

DO YOU HAVE CONCERNS OF YOUR CHILD'S SPEECH AND LANGUAGE DEVELOPMENT?



Most children acquire speech and language skills within a specific age. Yet, others may take just a little longer to develop a certain skill. Children who are two years old with a vocabulary fewer than 50 words and uses limited two-three word phrases are late-talking. At St. Elizabeth Healthcare, our speech therapy team works with children and their families to evaluate and treat speech and language concerns.

Types of Communication Disorders

- A child may have a **language disorder** if they have difficulty understanding language, following directions, choosing appropriate words, or combining words correctly to create sentences. A child may have difficulty interacting with others and have challenges with learning.
- A child may have a **speech sound disorder** if they have difficulty producing sounds. A child may substitute, delete, or distort sounds and syllables making it difficult for others to understand.
- A child may present with a **fluency disorder** if they present with frequent interruptions in their flow of speech.
- A child with a **voice disorder** has abnormal vocal fold structure or function.
- A child with a **resonance disorder** may have a problem with the valve that seals off the nose and mouth during speech.



KNOW THE SIGNS: Early Detection is the Key to Success!

If your child presents with the following signs, they may need a referral:

- The child doesn't babble using consonant sounds (particularly b, d, m, and n) by age 8 or 9 months.
- The child uses mostly vowel sounds or gestures to communicate after 18 months.
- Says p, b, m, h, and w incorrectly in words (1-2 years)
- Says k, g, f, t, d, and n incorrectly in words (2-3 years)
- Words are not easily understood (18 months-2 years)
- Leaves out consonant sounds or unclear speech by age 3 years.
- The child's speech is difficult to understand at age 4.
- Involuntary repetitions, blocks, prolongations, or disruptions in speech.
- Tension when speaking and associated abnormal physical movement (jerks, eye blinking)
- Lack of confidence in speech and avoids speaking situations due to fear of stuttering
- Chronically hoarse, breathy, harsh vocal quality
- Inappropriate vocal pitch for age and gender
- A voice that is consistently too soft
- Hypernasality/hyponasality/muffled and unclear speech caused by blocked sound



Causes of Communication disorders

The cause of communication disorders is not always known. Populations at risk and conditions that contribute to communication disorders include:

- A developmental disorder, like Autism
- A genetic syndrome, like Down Syndrome
- Abnormal tissue growth on the vocal folds
- Brain damage, or a head injury
- Cleft palate or cleft lip
- Emotional stress
- Hearing loss
- Intellectual disability
- Muscle weakness
- Nerve damage
- Prematurity or birth trauma
- Problems with vocal structures shape and function
- Prolonged thumb sucking or pacifier use
- Vocal fold damage

Next Steps: I'm Right Here!

If your child presents with signs of concern, contact St. Elizabeth Healthcare. It never hurts to be evaluated! Our team of Speech-Language Pathologists will work with your child and family to develop a plan to help your child develop important milestones and life skills.



**For more information, call (859) 301-5740.
To schedule an appointment, call (859) 655-7400.**

Children between birth and 3 years may qualify through the state's Early Intervention "family centered," program. Please contact your state's agency for more information.

Kentucky: First Steps

1 (877) 417-8377 | www.kyfirststeps.org

Ohio: Help Me Grow

1 (800) 755-4769 | www.ohioearlyintervention.org

Indiana: First Steps

1 (800) 387-7837 | www.indianafirststeps.org



**For more information
and resources please
visit our website:**

<https://www.stelizabeth.com/medical-services/speech-pathology>



Reference ASHA Better Hearing and Speech Month 2021
www.asha.org American Speech-Language-Hearing Association



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