Overview of Communication Disorders

Focus on Language Disorders

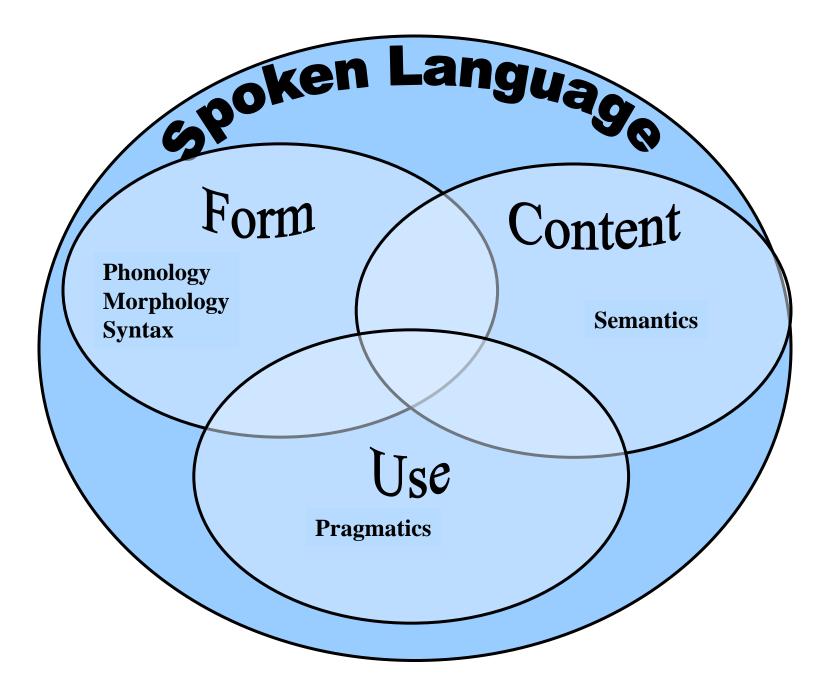
What is a Language Disorder?

 "Children can be described as having a *language disorder* if they have a significant deficit learning to talk, understand, or use any aspect of language appropriately, relative to both environmental and norm referenced expectations for children of a similar developmental level." (R. Paul, 2001)

ASHA's Definition

 Language Disorder: impairment in comprehension or use of spoken, written, or other symbol system.

 May involve the form, content, or use of language



Expressive vs. Receptive

- Receptive refers to the ability to comprehend what is said (be a competent listener)
- Expressive refers to the ability to generate semantically correct grammatical sentences that follow the appropriate pragmatics of conversation (be a competent speaker)

Normativist vs. Neutralist

- Normativist (Fey): a deficit big enough to be recognized by parents and teachersone that affects how a child functions socially or academically in the world that he lives in
- Neutralist: a deficit in relation to norm referenced expectations

Standard Scores

- 100 +/- 15 for average range (85-115)
 - 50th percentile corresponds to 100
 - Average range is 16th 84th percentile
 - This covers a full 67% of the population

 Subtest scores can have an average mean of 10 +/-3 for average range (7-13)

Common Norm-referenced Tests

- Clinical Evaluation of Language Fundamentals (CELF)
- Peabody Picture Vocabulary Test (PPVT)
- Expressive Vocabulary Test (EVT)
- Goldman-Fristoe Test of Articulation (G-F)
- Preschool Language Scale (PLS)
- Comprehensive Test of Phonological Processing (CTOPP)

Issues with Standardized Tests

 Not available for all ages and all language components (example: preschool and pragmatics)

• Are test valid? Reliable? Accurate?

 How low a Standard Score do you need to qualify for services?

Systems Model

 Looks at not only what is wrong with the child but how the **environment** contributes to the child's difficulties

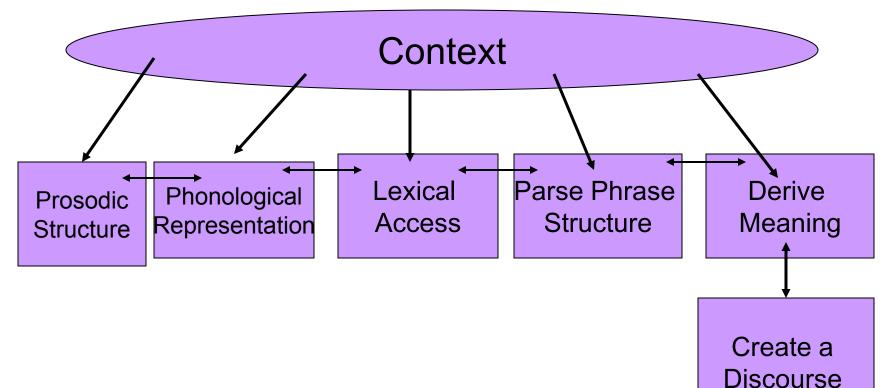
 What are some environmental factors that might contribute to a child with a language impairment's difficulties progressing with language acquisition?

Labels, Labels, Labels

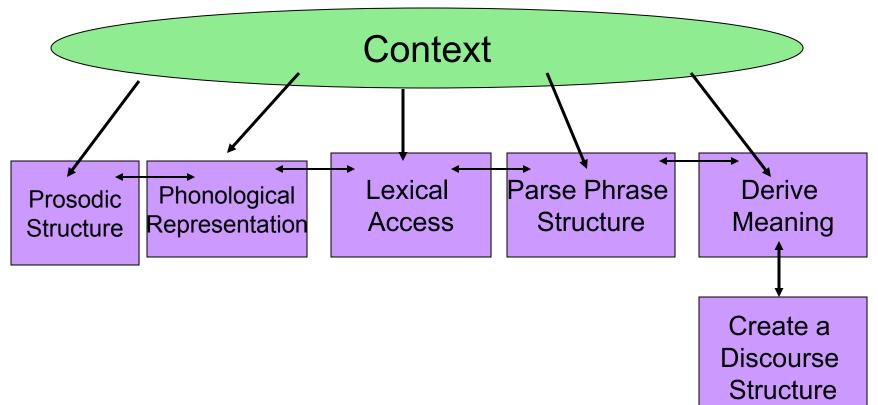
The Semantics of Historic Labels

- Childhood Aphasia
- Language Delay
- Language Disorder
- Language Impairment
- SLI: Specific Language Impairment
- LLD: Language Learning Disability
- OWL: Oral Written Language Impairment

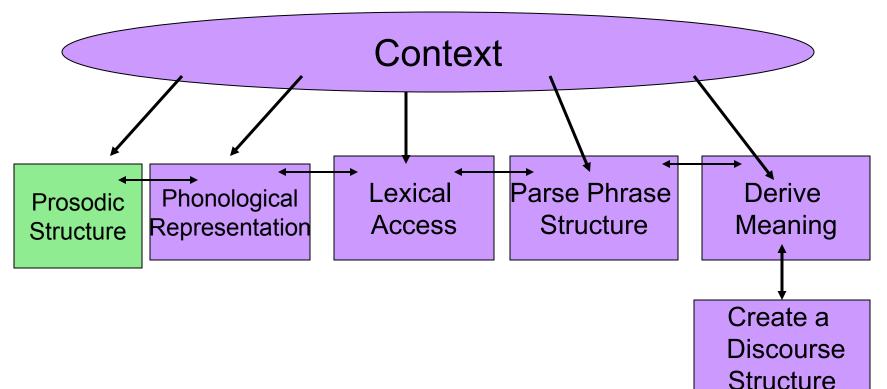
A Simple Model of Comprehension



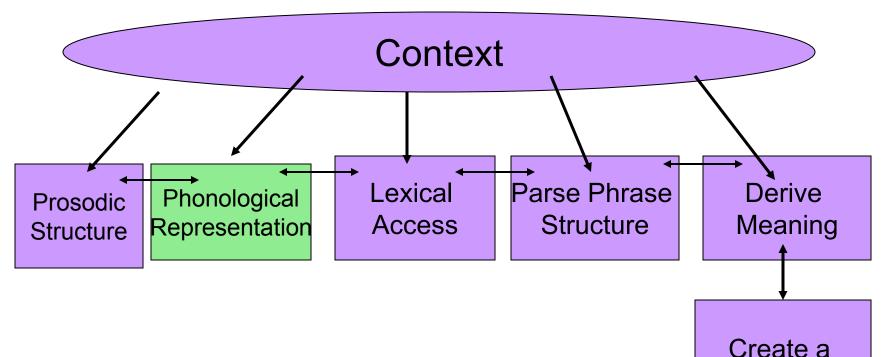
Structure



• Context is the environment within which the person is listening (the pragmatics, the knowledge base of the speaker and listener, the ongoing discourse). The context can also refer to the cognitive environment (e.g., memory; attention).



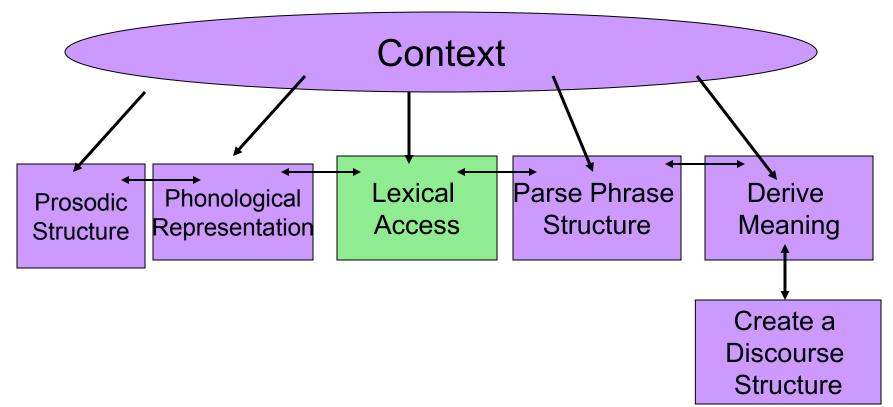
• The prosodic structure is the rhythm and intonation of speech that chunks information (syllables, words and phrases) and signals important information with pitch.



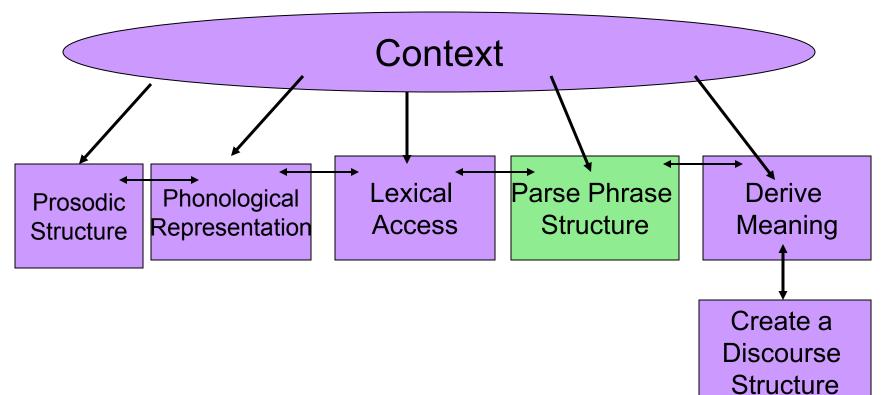
• The phonological representation is a mental representation of the sounds in speech.

Discourse

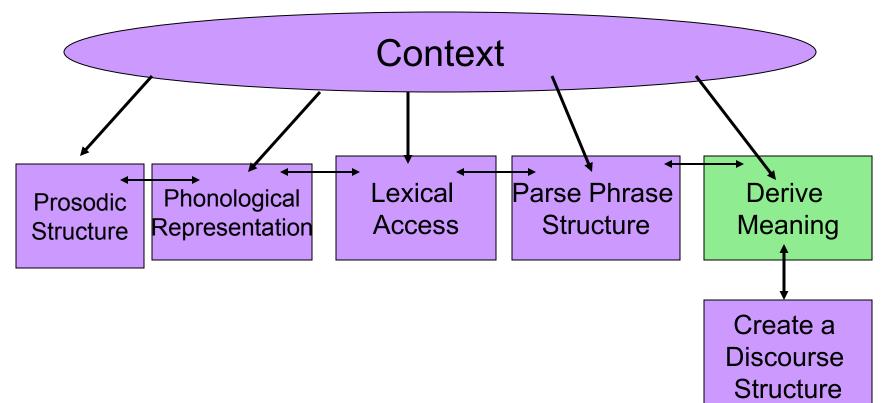
Structure



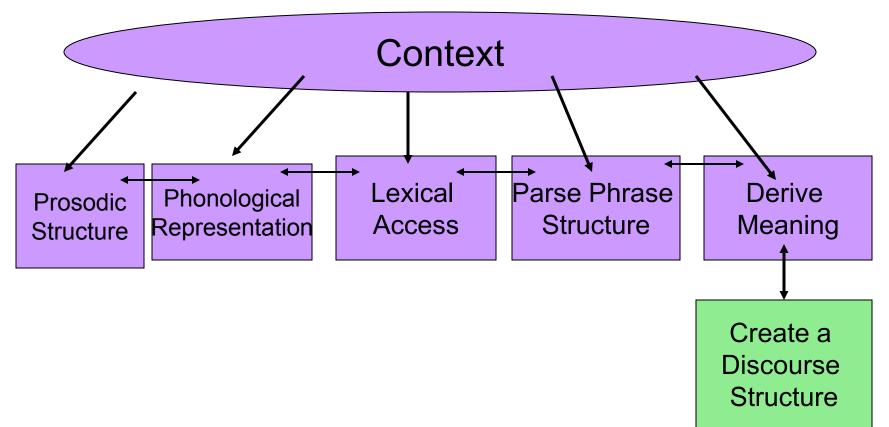
 Lexical access refers to the process of recognizing words in the mental lexicon and selecting them as the phonological representation matches.



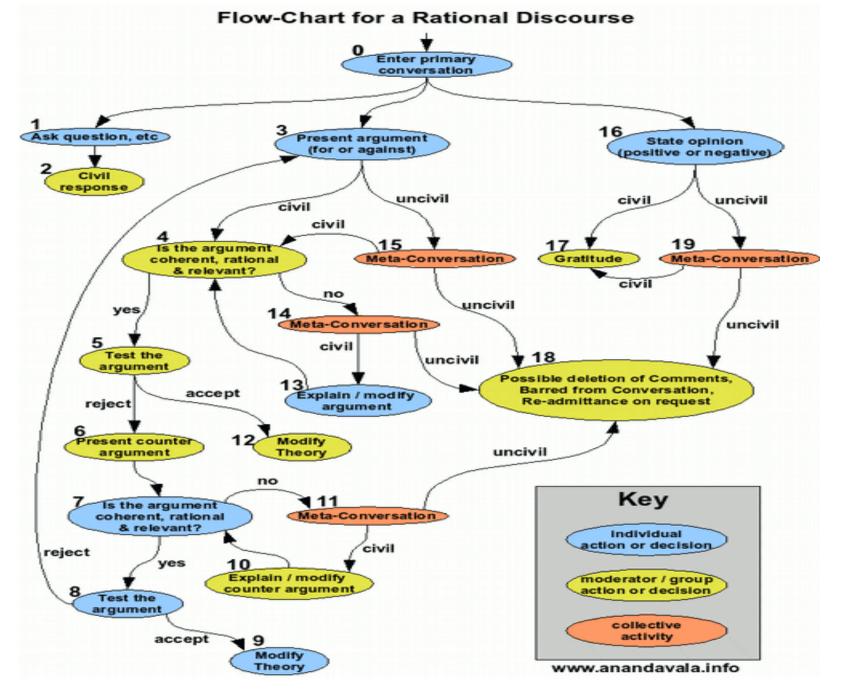
• Parsing the phrase structure refers to creating a mental representation of the syntactic structure of the utterance.



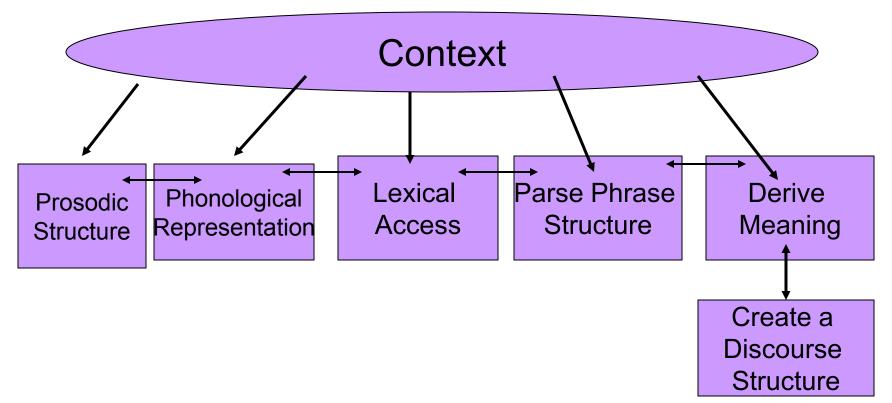
• Deriving meaning is the process of interpretation of the utterance.



• The discourse structure is the mental representation of the conversation; updated during each exchange.

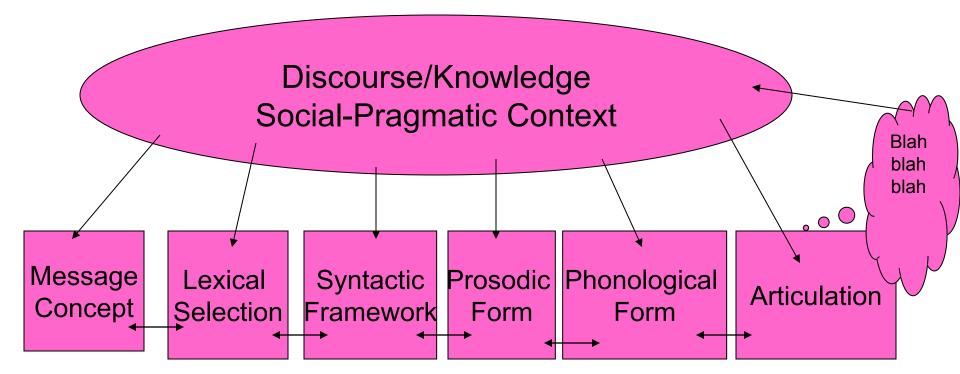


What do those arrows mean?

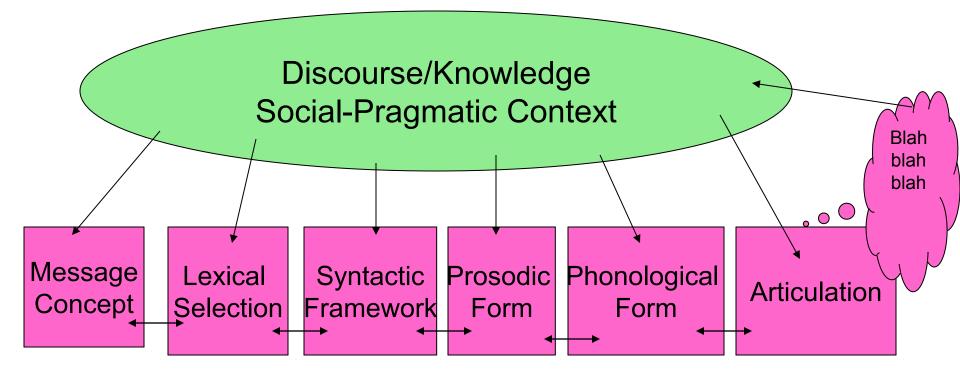


• The arrows show that the information flows back and forth. That is, the different levels influence one another.

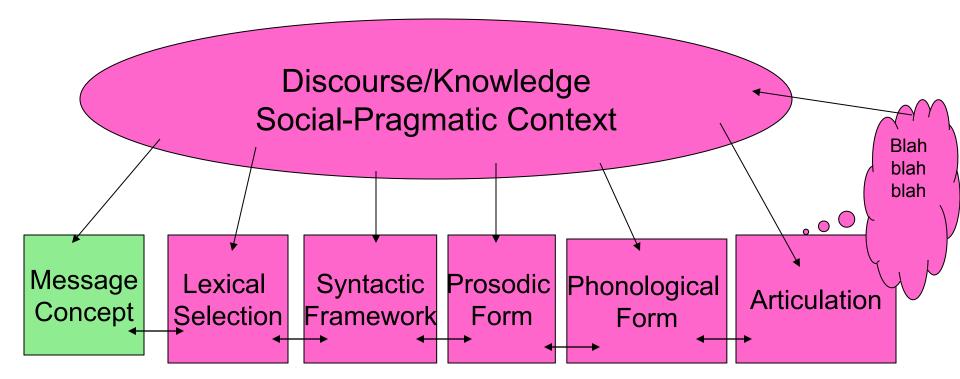
A Simple Model of Production



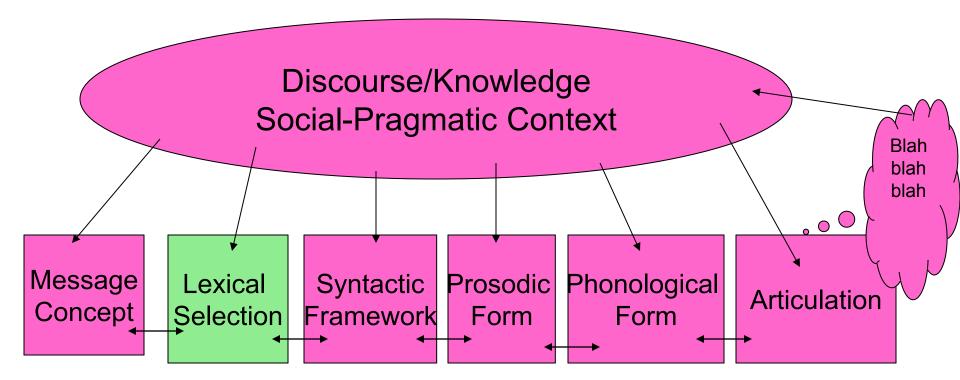
• The social-pragmatics and conversation context affects the message to be conveyed at all levels.



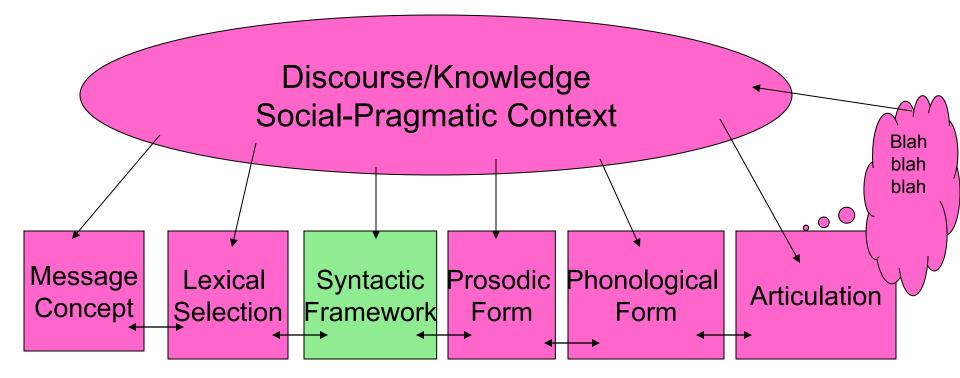
• The message concept is the idea to be expressed.



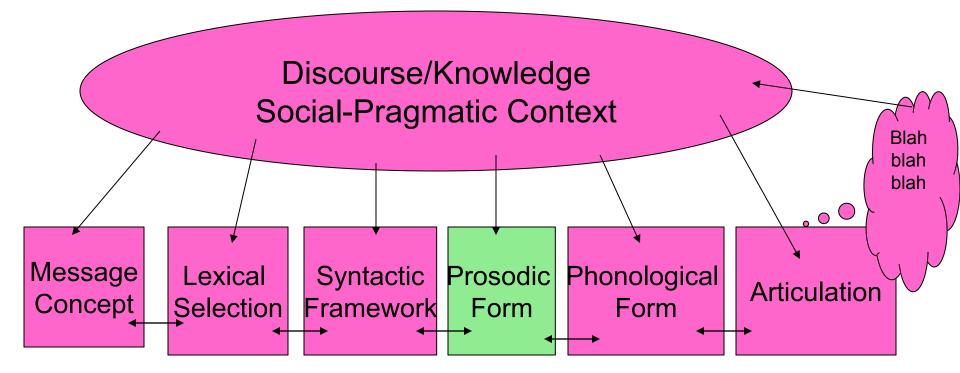
• The words to convey the message are selected.



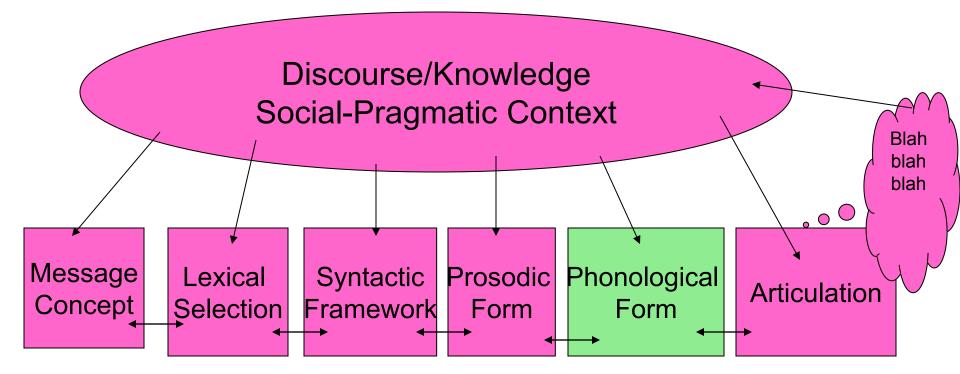
• With the words, the syntactic phrase structure can be constructed.



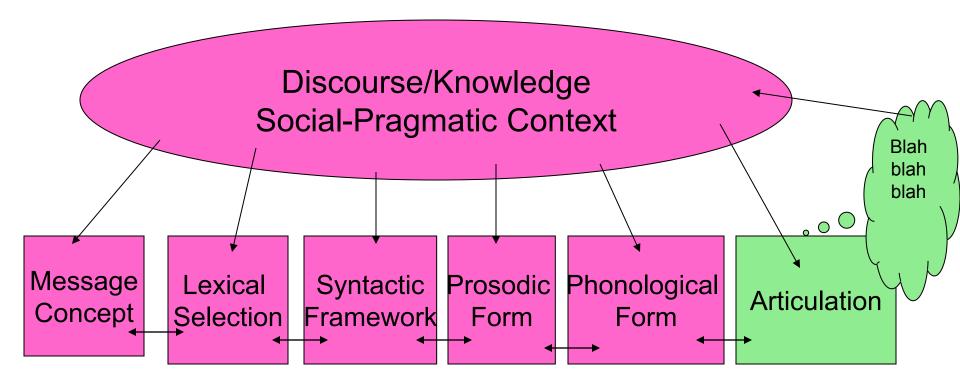
• A prosodic structure of the syllables, syntactic phrases, semantic highlights is constructed.



• The specific sounds of the utterance are constructed for the words in prosodic structure.



• The motor plan is executed to create the utterance.



Levelt's (not so simple) Model of Production

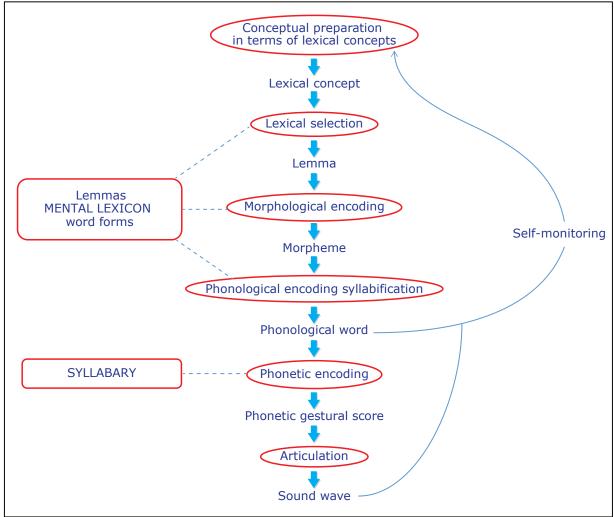
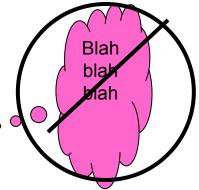


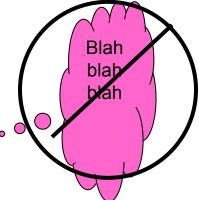
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Late Talkers A Simple Definition

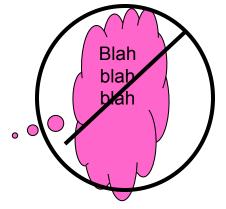
 Children with communication skills delayed in relation to developmental norms by more than 6 months



- Many are simply 'delayed' and are WNL with time and/or therapy
- Others have true speech and/or language disorders
- Until there is some output, it is difficult to diagnose any form deficits in production
- However, comprehension can be assessed/addressed



- Zubrick, Taylor, Rice 2007
- Looked at 1,766 Australian children aged 24 months
- Examined biological, behavioral, family and socio-cultural variables
- 19% of children were Late Talkers
- Half of these children will 'catch' up by 3years



- Family history of late talkers
- Less likely to be only children
- More likely to be male
- More likely to have premature status
- Gross and fine motor development correlates
- Negative psychological correlates

When to Refer Late Talkers

• Expression:

- No words at 18-24 months
- 10 or fewer words at 24 months
- No two word combinations at 24-30 months
- No unique sentences at 36 months
- Judged to be difficult to understand at 4+years
- Multiple errors in expressive syntax at 4+ years
- Overt frustration communicating at any age over a period of months

When to Refer Late Talkers

- <u>Comprehension:</u>
- Does not follow simple familiar commands at 18-24 months
- Does not point/look towards familiar pictures/objects named by a parent at 18-24 months
- Does not respond to name at 18 months
- Parent reports comprehension problems in children 4 and older

Specific Language Impairment (Stark and Tallal, 1981)

- Children with standardized language scores at least 12 months below chronological age or mental norms who DO NOT exhibit any of the following:
 - Hearing impairment
 - Significant emotional or behavioral problems
 - Performance IQ more than 1 SD from the mean
 - Obvious neurological deficits
 - Severe phonological/articulation deficits

Specific Expressive Language Impairment

- Late production of first words
- Fewer commenting and joint attention acts
- Late production of word combinations
- Reduced syntactic complexity in later development
- Reduced narrative skills at later ages
- Possible written expression issues in later grade school

Expressive-Receptive Language Impairment

- Same issues as Expressive Language Impairment +
 - Vocabulary comprehension problems
 - Sentence comprehension problems
 - Decreased phonological processing skills (in some children)
 - Probable reading comprehension issues

DLD

 Developmental Language Disorders (Kamhi): children with lower IQs and more concomitant problems than children with SLI used as research subjects. These children are more common on clinician caseloads.

Mental Retardation

- Mild: IQ 50-70
- Moderate to Severe: IQ 20-49
- Profound: IQ below 20
- Known Causes:
 - FAS
 - Chromosomal Abnormalities
 - Trauma to the brain before or after birth

School Age Labels

Learning Disability

Language Learning Disability

Dyslexia

Learning Disability

 A generic term that refers to a heterogeneous group of disorders manifested by significant *unexpected* difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities or of social skills. Involves a discrepancy between potential (often IQ scores) and achievement or between areas of development (verbal and nonverbal IQ etc.)

Language Learning Disability/Disorder

 A learning disability that primarily involves issues with language and in school effects the ability to read, write, or spell.

Dyslexia/Written Language Disorders

Types of reading disabilities

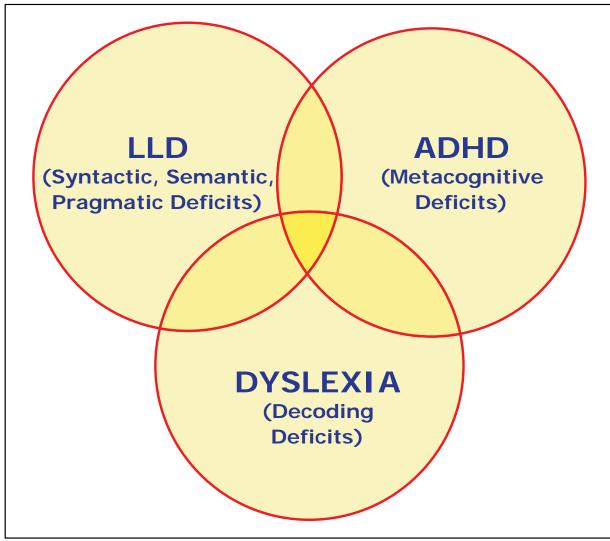


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Early Literacy Development

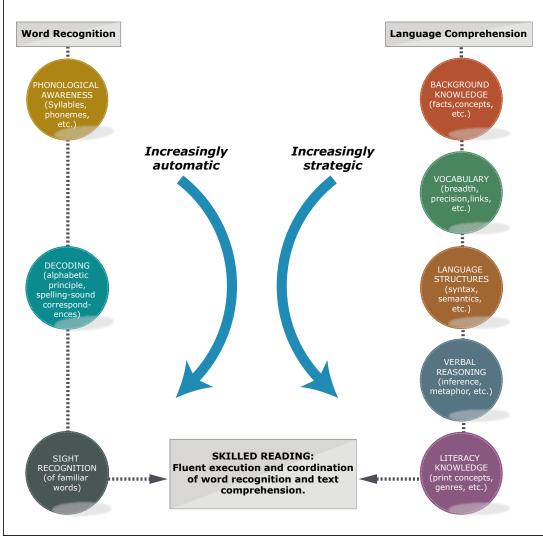
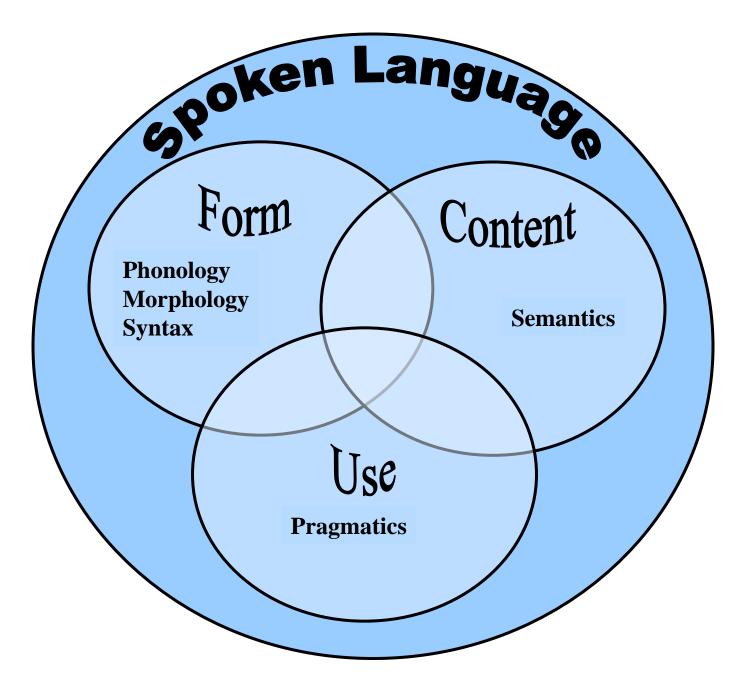


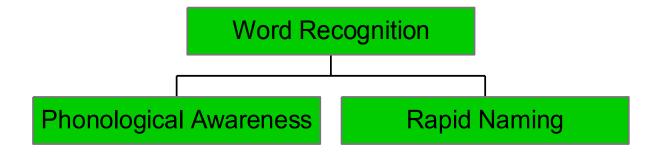
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Dyslexia

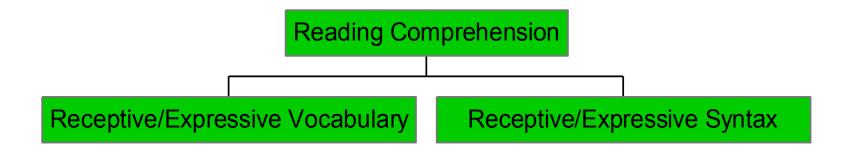
 A specific language based problem with phonological awareness/phonological processing ability that results in problems with single word decoding.



Kindergarten Oral Language Predictors of Grade 2 Reading Abilities



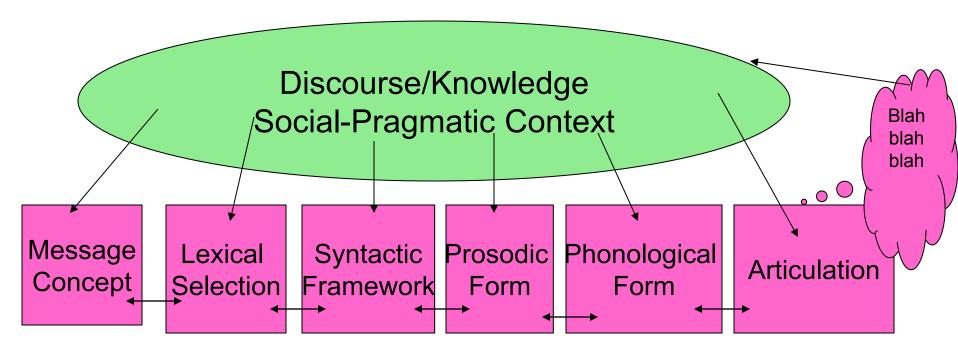
Kindergarten Oral Language Predictors of Grade 2 Reading Abilities



Autism Spectrum Disorders

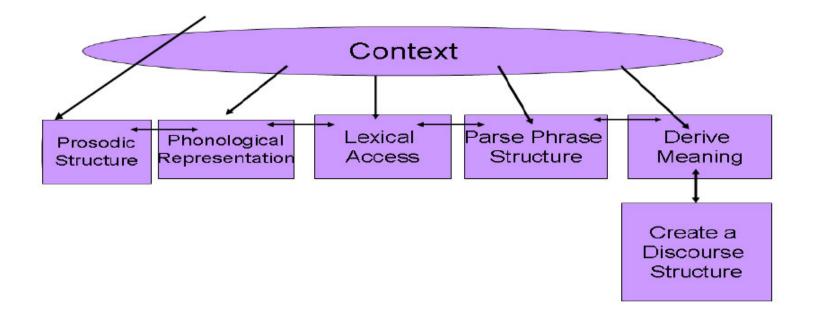
Autism Spectrum Disorders

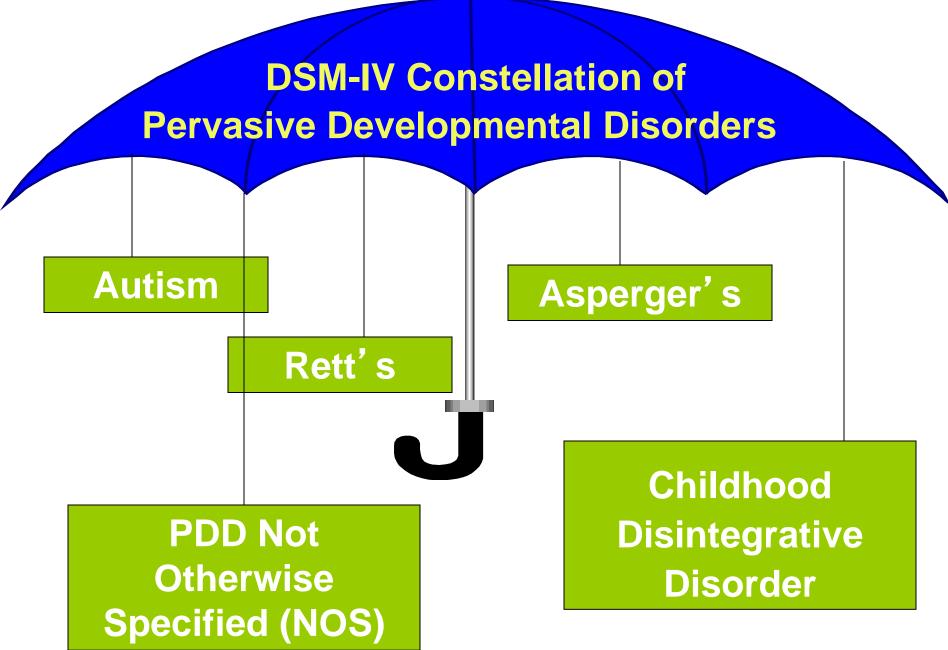
 These disorders arise from problems with the social pragmatic realm; this affects everything about expression of language.



Autism Spectrum Disorders

 As well as everything about comprehension of language; remember the bidirectionality of the arrows





PDD Criteria – DSM IV

Three core features:

- 1. Impaired social interaction
- 2. Impaired verbal and nonverbal communication
- 3. Restricted and repetitive patterns of behavior

DSM IV Criteria Current

 http://www.autismwatch.org/general/dsm.shtml

Severity

- Ranges from severe to subtle socialcommunication dysfunction
- The most severe form was first described by Kanner in 1943
- Asperger described the mild form of the disorder that carries his name in 1944
- ³/₄ have mental retardation (IQ below 70)

Prognosis

- Life-long disability
- Higher IQ and good language before age of 5 better prognosis
- Adults with near normal IQ adapt from poor to good, but low IQ do not adapt well
- Verbal skills are strongest predictor of social-adaptive success

Prevalence

- In the 1970's prevalence was considered to be 5/10,000
- Mid-1990's rates rose steadily
- In 2003, 1/166 to 1/250
- Other studies as high as 1/100
- Males 3:1 in nuclear autism
 5:1 in milder forms

Why the increase?

Diagnostics (the more extensive the clinical information, the higher the incidence)

 Broadening of diagnostic criteria ("spectrum")

• We don't know...

Other Features

• Hypotonia

Sensory Processing Issues

Dangerous Behaviors

Echolalia

Echolalia

- Many children/adults with ASD show some form of echolalia
- Can be immediate repetition of what is heard
 Q: what do you want?' A: 'what do you want?'
- Can be delayed and involve repeating lines from
 - television/movies ('I am plankton and I am SMALL')
 - cell phone prompts ('for English, press one')
 - parental commands ('brush your teeth')

Speech Disorders

What is an Articulation Disorder?

Difficulties with placement of the articulators for speech sound production.

• Also called a 'Phonetic Disorder'

What is a Phonological Disorder?

 Impairment of and individual's representation and organization of phonemes within the language system

• Also called a 'Phonemic Disorder'

developmental phonological disorder

Is a disorder in knowing the 'rules' about where speech sounds are placed in words. The problem is at a linguistic level: 'in the mind'. Not at a motor / movement / anatomical level.

How does Phonological Intervention Differ From Articulation Therapy?

- Error patterns are targeted rather than single sounds.
- Multiple sounds are worked on at the same time.
- Objectives are targeted in a cyclical manner rather than working to criteria.
- Patterns are generally targeted in words initially rather than isolation.
- Generalization of correct productions occurs more easily across contexts.

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