**

# Language Disorders

# Pupils with Communication and Language Disorders

## Language Disorders

|  |  |
| --- | --- |
| classroom_tip | Classroom-based tips (focus on instructional methods) |

**1. Consult a Speech and Language Therapist concerning each pupil with a language disorder** in the class and work with the pupil during the class. As some pupils may have to attend speech and language therapy sessions during school time, try to ensure they will not always be missing out on the same subject/activity (Shipley and McAfee, 2015).

**2. Minimise unnecessary classroom noise distractions as much as possible.** Keep unwanted noises (e.g., from outside, gymnasium, music room) out of the pupil’s classroom as much as possible so that the pupil can focus on the lesson and activities within the classroom. Noise within the classroom can be reduced by placing rubber boots on chairs and laying carpeting or rugs on concrete floors.

[Reference: <http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

**3. When giving instructions (oral or written) for pupils with Language Disorders (LD), break up long sentences,** reduce difficult vocabulary load and reduce concept density. Use short sentences because they are easier and quicker to comprehend than longer sentences.

**4. Provide verbal cues to help pupils develop their expressive and receptive language skills.** Point out privately when a joke is made or clarify that a particular comment was a figure of speech

[Reference: <http://www.macswd.sa.gov.au/files/links/Asperger_report_771KB_PDF.pdf>]

**5. Use gestures and body language when helping a pupil with a severe receptive language disorder understand the meaning of a word that symbolises an object or an action.** Facial expressions, gestures, and other body language will help convey your message. Note: This depends on the age of the pupil; it sometimes helps to involve the pupils in selecting the strategy that works best for them.

**6. Be a good speech model.** This will indicate to all that good communication is desirable. Use a slower speech to facilitate the process of information by keeping a visual contact with the pupil. Speak slowly, naturally, and clearly. Get the attention of a pupil with a language disorder before speaking. If the child says something incorrectly repeat it for them correctly in a natural way. When the child’s speech or writing contains grammar or word order errors, provide the correct form.

**7. Give simple directions in short sentences** (break down complex tasks) to facilitate pupils with LD understand sentences (e.g. ‘Put the book on the table’, etc). Give your pupils the opportunity to repeat the instruction back to you to check for understanding. You can use photographs to give directions

**Note**: An understanding of sentences is difficult for the pupils with language disorder and often presents in the classroom with difficulties in following instructions and poor oral comprehension.

**8. Provide listening activities that build awareness of sounds.** For instance, read a list of words and ask the pupil to clap every time he or she hears a certain sound. Introduce early minimal pair therapy using objects supplemented by flashcards in play. Name the target words pointing out the contrasts in meaning as you place them into a dump truck or slide them down a slide. For example, show as you label “kite” and “night”.

**9. Use word-retrieval cues to help pupils learn new vocabulary** (naming the semantic category to which the word belongs, synonyms –antonyms, an associate word, multiple choices etc) (Steele and Mills, 2011). Display each new word, pronounce it, give the meaning of the word, and have pupils repeat it. Provide and have pupils repeat multiple examples of the word used in context. Connect the word and its meaning to pupils’ current knowledge, and prompt pupils to describe their experiences related to the word. Provide multiple opportunities for pupils to use the word in context during guided practice, and provide feedback on their responses. Help pupils discriminate between words with similar meanings but subtle differences (e.g., separate and segregate). Assign independent practice activities; challenge pupils to select new vocabulary words to learn independently. Promote generalisation and maintenance by prompting pupils to use their new vocabulary, providing praise and other forms of reinforcement when pupils’ speech and writing contain new vocabulary, and having pupils self-record how often they use new vocabulary. For reinforcement, repeat new vocabulary in different contexts. Help pupils to construct their own dictionary by keeping a record of local figures of speech or metaphors (Alber and Foil, 2016)

Consult a Speech and Language Therapist for ideas concerning vocabulary development and word meaning; these could include for example, use of graphic organisers, use of word-games with family, and placement of words and definitions on note cards.

**10. Speak in sentences that are one to two words longer than the child’s typical utterances.** If a pupil usually combines two words, you should be modelling 3-4 words in your interactions. Paraphrase the pupil’s contributions so that s/he can hear interpretations of what has been said. Provide the pupil with opportunities to transform components into complex sentences (Martin, 2003).

**11. Present the pupil with printed or spoken sentences in which the order of words, phrases, or clauses is violated.** Encourage the pupil to formulate and produce a sentence with structure similar to that of a spoken model sentence. Encourage the pupil to paraphrase (Dodd, 2013).

**12. Use pictures or photographs to reinforce and review the new material that it is being taught.** Repetitions or summaries of the most relevant classroom questions, responses, and discussions are helpful to the pupil with language disorder (Paul, 2001).

**13. Use role-play as a regular feature of language learning as this helps alternate speaker/listener roles.** Pair up the pupils with more able pupils. Co-operative learning can be used to encourage discussion. Use board games and card games that can be beneficial as they promote turn-taking and sportsmanship.

**14. Give pupils with language disorders time to express themselves, do not interrupt or try to fill in gaps for them.** Design tests that are appropriate for their LD; make sure that test instructions are completely understood by the pupils and provide any additional assistance that may be needed (Roth and Worthington, 2015).

**15. Use naturalistic interventions.** Naturalistic interventions involve structuring the environment to create numerous opportunities for desired child responses (e.g., holding up a toy and asking, “What do you want?”) and structuring adult responses to a child’s communication (e.g., the child points outside and says, “Go with me,” and the teacher says, “Okay, I’ll go with you”). Effective milieu teaching more closely resembles a conversation than a structured instructional episode (Kaiser & Grim, 2006). Use Social Stories (Stories written to positively depict a situation in which a pupil has a difficult time, providing the pupil with appropriate ways to interact or respond.) Music, movement, nursery rhymes, finger plays, and story time are very motivating times for pupils to promote spontaneous language production.

|  |  |
| --- | --- |
| school_tip | School-based practical tips (focus on instructional methods) |

**Class Divisions / Arrangements**

**1. Accommodate the classroom environment** so as to respond to the needs of the pupils with LD. Place the pupils in the front seats, close to the teacher to maintain visual contact with them.

**2. Use highly structured settings for pupils who cannot attend to and learn language skills in a more typical environment.** These settings may feature such characteristics as plain walls, limited sensory input, and exaggerated text sizes and/or colours. However, it should be cautioned that highly structured interventions alter the nature of the environment and may be difficult to generalise to other settings.

[Reference: <http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

**3. Keep unwanted noises (e.g., from outside, gymnasium, music room) out of the pupil’s classroom** as much as possible so that the pupil can focus on language within the room. Noise within the classroom can be reduced by placing rubber boots on chairs and laying carpeting or rugs on concrete floors.

[Reference: <http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

**4. Foster a warm, supportive environment** in which the pupil will feel accepted and encouraged to speak and respond to others. In order to achieve such an environment, other pupils or family members may benefit from education about LD.

[Reference:

<http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

### **Community**

**1. Collaborate with the parents** in order to get information with regards to specific needs of the pupils, including diet, medical care, mood and behavioural information, in order to accommodate the needs of those pupils before a school excursion.

**2. Involve peers in the process of communication**. Peer-mediated or implemented treatment approaches incorporate peers as communication partners for children with language disorders in an effort to provide effective role models and boost communication competence. Typically developing peers are taught strategies to facilitate play and social interactions; interventions are commonly carried out in inclusive settings where play with typically developing peers naturally occurs (e.g., preschool setting).

[Reference: <http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935327&section=Treatment>)]

**3. Foster a warm, supportive environment** in which the pupil will feel accepted and encouraged to speak and respond to others. In order to achieve such an environment, other pupils or family members may benefit from education about LD.

[Reference:

<http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

### **Curricular Adaptations**

**Accommodate the classroom environment** so as to respond to the needs of the pupils with LD. Place the pupils in the front seats, close to the teacher to maintain visual contact with them.

**Educational Visits / Field Trips / Camps / School Exchanges / Trips Abroad**

**Collaborate with the parents** in order to get information with regards to specific needs of the pupils, including diet, medical care, mood and behavioural information, in order to accommodate the needs of those pupils before a school excursion.

### **Other (Pupils’ Involvement)**

**Involve peers in the process of communication**. Peer-mediated or implemented treatment approaches incorporate peers as communication partners for children with language disorders in an effort to provide effective role models and boost communication competence. Typically developing peers are taught strategies to facilitate play and social interactions; interventions are commonly carried out in inclusive settings where play with typically developing peers naturally occurs (e.g., preschool setting).

[Reference: <http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935327&section=Treatment>)]

### **Parents / Parents’ Association**

**1. Collaborate with the parents** in order to get information with regards to specific needs of the pupils, including diet, medical care, mood and behavioural information, in order to accommodate the needs of those pupils before a school excursion.

**2. Foster a warm, supportive environment** in which the pupil will feel accepted and encouraged to speak and respond to others. In order to achieve such an environment, other pupils or family members may benefit from education about LD.

[Reference:

<http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

### **Scheduling Events**

**Include the pupils in school events** by asking them to contribute in different roles according to their abilities.

### **School Purchases**

**1. Equip the classes in which pupils with LD are included, with audio/visual technology.**

**2. Involve the Speech and Language Therapist of the school in the class.** Provide an interpreter for the bilingual/multilingual pupils with LD.

**3.** **Provide training to teachers** with regards to strengthening memory, attention, processing rate, and sequencing. Strengthening these cognitive skills are thought to improve language and reading skills (e.g., phonological awareness, vocabulary, decoding, and comprehension).

[Reference: <http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935327&section=Treatment>]

**4.Use highly structured settings for pupils who cannot attend to and learn language skills in a more typical environment.** These settings may feature such characteristics as plain walls, limited sensory input, and exaggerated text sizes and/or colours. However, it should be cautioned that highly structured interventions alter the nature of the environment and may be difficult to generalise to other settings.

[Reference: <http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

5. **Keep unwanted noises (e.g., from outside, gymnasium, music room) out of the pupil’s classroom** as much as possible so that the pupil can focus on language within the room. Noise within the classroom can be reduced by placing rubber boots on chairs and laying carpeting or rugs on concrete floors. ]

[Reference: <http://www.education.udel.edu/wpcontent/uploads/2013/01/LanguageDisorders.pdf>]

### **Pupil Support**

**1. Accommodate the classroom environment** so as to respond to the needs of the pupils with LD. Place the pupils in the front seats, close to the teacher to maintain visual contact with them.

**2. Equip the classes in which pupils with LD are included, with audio/visual technology.**

3. **Involve the Speech and Language Therapist of the school in the class.** Provide an interpreter for the bilingual/multilingual pupils with LD.

4. **Keep up-to-date on the pupil's accomplishments in therapy.** Plan and develop an IEP in collaboration with parents, teacher, SEN teacher, Educational psychologist and the principal of the school.

### **Teacher Professional Development**

**1. Provide training for teachers, Speech and Language Therapists and Special Education teachers from external agencies,** such as educational psychologist services, to address the main difficulties of the pupils with LD, the signs for early identification, assessment procedures and practical tips for the teachers in order to support pupils with LD in the class.

**2. Provide training to teachers** with regards to strengthening memory, attention, processing rate, and sequencing. Strengthening these cognitive skills are thought to improve language and reading skills (e.g., phonological awareness, vocabulary, decoding, and comprehension).

[Reference: <http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935327&section=Treatment>]

### **Technology**

**1. Equip the classes in which pupils with LD are included, with audio/visual technology.**

**2. Involve the Speech and Language Therapist of the school in the class.** Provide an interpreter for the bilingual/multilingual pupils with LD.

**3.** **Provide training to teachers** with regards to strengthening memory, attention, processing rate, and sequencing. Strengthening these cognitive skills are thought to improve language and reading skills (e.g., phonological awareness, vocabulary, decoding, and comprehension).

[Reference: <http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589935327&section=Treatment>]

### **Supportive Literature**

A **language disorder** is the impaired comprehension and/or use of spoken, written and/or other symbol systems. The disorder may involve (1) the form of language (phonology, morphology, syntax), (2) the content of language (semantics), and/or (3) the function of language in communication (pragmatics) in any combination.#

Form of Language:

**Phonology** is the sound system of a language and the rules that govern the sound combinations.

**Morphology** is the system that governs the structure of words and the construction of word forms.

**Syntax** is the system governing the order and combination of words to form sentences, and the relationships among the elements within a sentence.

Content of Language:

**Semantics** is the system that governs the meanings of words and sentences.

Function of Language:

**Pragmatics** is the system that combines the above language components in functional and socially appropriate communication.

[Reference: American Speech-Language-Hearing Association. (1993). Definitions of communication disorders and variations [Relevant Paper]. Available from [www.asha.org/policy](http://www.asha.org/policy).]

**Resources for Children with Language and Communication Difficulties**

1. Black Sheep Press – this is a resource and has sections on speech and language, it is available on CD Rom and is bought directly from Black Sheep Press.

2. Listening Comprehension Series, Lower, Middle, Upper – this can be used to develop listening and attention. It is available through Primary–Ed.

3. Oral Language Series, Lower, Middle, Upper – can be used for facilitating expression and comprehension of oral directions – available from Primary–Ed.

4. Practical Language Activities and Auditory Processing Activities – Materials for clinicians and teachers, these two books are packed full of worksheets. They require some reading skills, but could be adapted and incorporated into games.

5. Clinical Language Intervention Programme – CLIP workbooks. There is a series of these books, each one focusing on a certain aspect of language e.g. syntax, semantics, pragmatics - can be used as homework sheets.

6. A series of activity books by Jean Gilliam DeGaetano focus on listening skills, auditory processing and direction skills. This may be especially useful for the older children in primary school.

7. Visualise Verbalises by Nancy Bell, this is a well-recognised programme for children that have difficulties describing items. It encourages the child to visualise the item first before attempting to describe it.

[Reference: <https://www.education.ie/en/Schools-Colleges/Services/National-Educational-Psychological-Service-NEPS-/NEPS-Guidelines-Handouts-and-Tips/Language-Skills/Language-Difficulties-Guidance-for-Teachers-and-Strategies-for-In-Class-Support-Primary.pdf>]

### **Useful Websites**

<https://www.nidcd.nih.gov/health/specific-language-impairment>

<https://councilfordisabledchildren.org.uk/sites/default/files/uploads/documents/import/sli_handbook_early_support-040413.pdf>

www.ican.org.uk/pdf/profs3.PDF: Language Difficulties in School.

www.ican.org.uk/TalkingPoint/Frontpage.aspx

www.ican.org.uk/upload/appdfs/ican/tipsfortalking.pdf

www.asha.org/public/speech/disorders/stuttering.htm: American Speech-Language-Hearing Association

#### References

Alber, R.S. & Foil, R.C. (2016). Drama Activities That Promote and Extend Your Students' Vocabulary Proficiency, *Intervention in School and Clinic*, Vol 39, Issue 1, pp. 22 - 29 .

Baker, E., & McLeod, S. (2011). Evidence-based practice for children with speech sound disorders: Part 1 narrative review, *Language, Speech, and Hearing Services in Schools*, 42(2), 102-139.

Dodd, B. (2013). *Differential diagnosis and treatment of children with speech disorder*. John Wiley & Sons.

Martin, D. (2003). *Speech and language difficulties in the classroom,* Taylor & Francis.

Paul, R. (2001). *Language Disorders from Infancy through Adolescence: Assessment and Intervention* (2nd ed.). St Louis: Mosby.

Roth, F. P., & Worthington, C. K. (2015). *Treatment resource manual for speech language pathology*. Nelson Education.

Shipley, K. G., & McAfee, J. G. (2015*). Assessment in speech-language pathology: A resource manual*. Nelson Education.

Steele, S. C., & Mills, M. T. (2011). Vocabulary intervention for school-age children with language impairment: A review of evidence and good practice. *Child Language Teaching and Therapy*, 27(3), 354-370.