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Early Language Development (0-12 months)

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Early language development involves many issues including cognition, play skills, social interaction and oral-motor development. As children awaken to the world at birth, they start a long cycle of language development which involves the understanding (receptive) and production (expressive) of language.

The following information was designed to give general development patterns for care givers.



Piaget and Early Motor Development

Speech-Language Pathologists often use Piaget's "Sensorimotor Stages" to track development of the cognitive skills needed for learning language:



1. Object Permanence: This skill involves that a child knows an object exists even when it is out of the child's view. It also relates to the actions a child can place on objects, and spatial relations. Examples: searching for a ball under a sofa, playing hide-and-go seek, waiting for Dad to come home from work, knowing that objects can fall, following the movement of toys, pushing, pulling and moving toys in varied ways.



2. Causality: This skill involves the child's awareness that they are one of many objects in the environment, and that their actions cause effects on other objects. Examples: pressing a button will turn a light on, shaking a toy will result in a sound.



3. Means-End: This skill involves the child understanding that a certain word, action or behavior will result in a desired outcome. Examples: saying "cookie" to receive a "cookie."



4. Imitation: This skill involves the child imitating gestures, actions, sounds, facial expressions and movements.



5. Play Skills: Play behaviors are a very important part of language development. "Pretend Play" or "Symbolic Play" are especially important as the child uses one object to represent another. Examples: using a spoon as a phone receiver and "pretending" to talk on the phone, pretending to sweep the floor, playing house, pretend cooking, etc.

Language and Social Skills

The term "Mother-ease" refers to the care giver - infant interaction that begins at birth. A mother hums her child to sleep, imitates the child's vocalizations, plays peek-a-boo with the baby. The first 12 months of a baby's life are essential in a child's communicative development:

AGE:

Birth to 3 Months



BEHAVIORS:

- Appears to recognize your voice and smiles or quiet
- Makes pleasure sounds (cooing)
- Smiles reflexively as newborn then develops social smile by 3 months

4 to 6 Months



- Moves eyes toward sound source
- Babbles using more consonant-like sounds (p,b,m)
- Vocalizes excitement and displeasure
- Begins to play - "peek a boo" and other games
- Imitates some movements and sounds

7 to 9 Months



- Exhibits resistive behaviors
- Shouts for attention
- Imitates play
- Plays vocally
- Recognizes some words
- Uses social gestures
- Uses jargon

10 to 12 Months



- Shows moods
- Uses objects appropriately (ex., spoon to pick up food)
- Obeys simple commands and directions
- Speaks one or more words
- Recognizes own name

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First Words

The type of words a child uses in the first year, as well as the reason a child uses words, follow a pattern shared by children across the world. Typically, the first words are about objects, people, and actions. "Mama," "Dada," "cat," "up," "car," "out," and "dog" are all common first words. Next, the child uses denial/rejection (no) and attributes (red, big, hot) in his/her vocabulary.

Word use is also important in understanding early language development. Children use their first words/gestures for the following reasons:

- LABELING:** child names an object or a person
- REPEATING:** child imitates a word
- ANSWERING:** child responds to their name when called
- REQUESTING:** child points to or labels an object or action which they desire
- CALLING:** child yells or calls for a person in another room or signals for a parent or pet
- GREETING:** child waves or says "hello" and "goodbye"
- PROTESTING:** child signals "no" when they do not want an object or action



Form of the First Words

When an SLP refers to "form" in early language development, we are talking about the types of sounds made, and the pattern by which they are made. The early forms of language consist of pointing, gesturing, yelling, crying, and early phonemes which generally consist of /p/, /m/, /b/, /t/, /d/, /n/ and most vowels. Some children may be able to produce more sounds at an early age such as: /k/, /g/, /l/, /f/, and /v/, /w/, and /h/.

The child usually starts making different combinations of sounds at six months which is known as "babbling." Later on, the child starts to repeat two syllables together such as "ba-ba" and "da-da." Finally, this turns into a meaningful word like "baba" for bottle or "dada" for Dad.

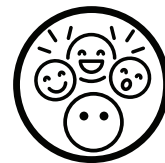
Receptive Language

Children may understand much more than they actually say by age one. By the age of one, children should be able to follow simple directions such as: "give it to me," and have an understanding of "yes" and "no."



Language Delay and Language Disorder

A child who demonstrates language development that follows the typical pattern but begins later or proceeds more slowly than expected would be said to have a "language delay." Children who demonstrate difficulties learning language skills that do not follow a typical developmental pattern are said to have a "language disorder." For example, a child who is two and is just learning first words would probably be said to have a delay. A child who is four and has a good vocabulary but only speaks in one or two word sentences would probably be said to have a language disorder.

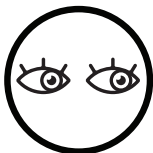


Language Delay and Language Disorders can occur alone or be secondary to autism, Pervasive Developmental Disorder, Attention Deficit Disorder, hearing loss, neurological impairments, or head trauma. As part of your child's speech and language evaluation, your therapist may ask for consultations with one or more of the following: Psychologist, Audiologist, Learning Disabilities Teacher Consultant, Pediatrician, Neurologist and/or Psychiatrist. These professionals often help the SLP rule out or diagnose specific disabilities that can occur with language problems.

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Early Warning Signs

There are some early warning signs that SLPs try to look for when evaluating a young child:



- poor eye contact
- poor imitation skills
- disinterest in paired games like “peek-a-boo”
- short attention span
- difficulty with eating various foods
- aggressive behaviors/tantrums
- inappropriate play behaviors (i.e., inability to complete a puzzle, not placing action on objects, disinterest in age-appropriate toys)

Speech and Language Therapy

The SLP will develop an individualized program for each child. In general, a child with a language disorder usually receives speech therapy one to four times a week for a duration of 30-60 minutes. (This depends on the age of the child and the severity of the disorder.)

Early intervention is the best bet for children with early language delay and disorders. Therapy can start during infancy, as a parent-based program. As parents, you can use suggestions and activities provided by the speech therapist to promote language skill development at home.



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