

# Ag

# Caint le Chéile

## Talking together



*A helpful guide with information on speech, language and communication development from birth to 5 years.*



# Contents

Introduction	1
Stepping Stones of Communication Development	2
Top Tips for Speech and Language Development	4
Play	6
Sound Development, Lisps, & Tongue Tie	7
Soothers, Stammering & Multilingualism	8
What To Do if You are Concerned	9
Speech & Language Checklists	10
Useful Resources	12
Bibliography	13

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# Introduction

Talking, understanding others and knowing what to say are really important skills. These skills help children make friends and learn. This booklet will help you to understand your child's communication development and give you ideas on how to help him/her.

## *Communication includes...*

- Looking
- Listening and Attention
- Pointing and gestures
- Facial Expressions
- Talking *and*
- Understanding

# Stepping Stones of Comm



helps children  
communicate  
REGISTERED CHARITY 21001

The following chart is based on *'Speech, Language and Communication Development from 0-5 years'* I Can, The Children's Communication Charity

**6**  
months

Baby watches parent / carer's face when they talk close up

Baby likes playing with sounds. Noises like "bababa" can be heard

Baby starts to understand words that are used frequently, e.g., "Bye bye" and "milk"

**1**  
year

They will begin using simple words anytime now

New words that are used may not sound like adult words yet

They can do what is asked when very simple sentences are used, "Give it to mummy"

**18**  
months

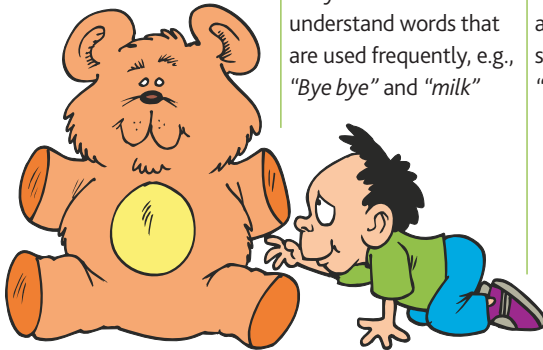
Toddlers will now start to join words together "teddy gone"

They can find things that you ask for— pictures in books or toys in the room

They are developing a larger vocabulary of 50 to 100 words

**By 18 months a child's speech is normally 25% intelligible**

Lynch, Brookshire &



## Causes

**6 months**

If baby seldom makes noises back to you when you talk to him/her

**1 year**

If he/she does not look around to see who is speaking

Does not produce a lot of babble

Does not follow your direction when you point

**18 months**

Is not interested in toys.

Does not understand simple everyday vocabulary

He/she does not use any meaningful words.

Does not show shared attention

# Communication Development

**2**  
years

Children now understand longer sentences, *"Your shoes are upstairs"*

Children start to use lots of single words (up to 200), building short, 2 to 4 word sentences

Children use and understand new words every day

**By 24 months a child's speech is normally 50-75% intelligible**

**3**  
years

Children may still find some sounds difficult i.e. 'r,w,l,y,f,th,s, sh,ch,j'

Sentences produced get more complicated, eg. *"I'm going to Nana's and getting a new toy car"*

Children may still stumble over their words and sentences. This is expected at this age

**By 36 months a child's speech is normally 75-100% intelligible**

**4**  
years

People who haven't met the child before will be able to understand what they say

Children are asking lots of questions, especially *"Why?"* questions

They can talk about things they have done and will do

**5**  
years

Children can now easily turn their attention to you, even if they are playing

They will understand longer and more complicated sentences, eg. *"Find the orange and black pens"*

Most speech sounds are now used correctly



Fox (1980), p. 102, cited in Bowen (1998).

## for concern....

**2 years**

Has a vocabulary of less than 50 single words

Doesn't join words together

Not understanding simple requests "give the doll to mommy"

**3 years**

He/she doesn't understand what you have said

Only uses 2 word combinations

Has a limited vocabulary

His/her speech is not understood by unfamiliar people

**4 years**

Speech is very unclear

Poor use of grammar, does not concentrate on anything for more than a few minutes

He/she does not understand what you have asked him/her

**5 years**

Speech sound development is immature

Sentence structure is ungrammatical

Vocabulary is weak

Not able to sustain attention for classroom activities

# Top Tips for Speech and



The following chart is based on: *Top techniques for developing children's speech and language* | I Can, The Children's Communication Charity

## Attention

**Get your child's attention first.** Get down to their level and ensure you are face to face with them.

## Fun

**Make language learning FUN!** Play with your child, use your imagination and have fun with language.

## Listen

**Listen to what your child says** rather than how they say it. Model the correct word for your child. If your child makes a mistake, e.g. 'Look mommy, a tat,' model the correct word for your child by saying something like "yes, look at the cat". Don't make your child repeat words after you!

## Time

**Try to spend 5 minutes per day** with your child without distractions and play a game or read a book.



## Speak

**Speak in your home language.** It is important for children to learn their first words and sentences in their home language.

## Questions

**Limit the amount of questions you ask.** Questions can be hard for young children to answer. Instead try to make comments e.g. 'that's a lovely picture you painted' rather than 'did you do art today?'

## Understand

**Don't pretend to understand** – if you don't understand, say 'show me?', encourage your child to use gesture or mime to get their message across.

# Language Development

## Soother

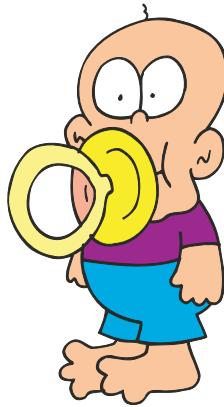
**Do not give your baby a soother when he/she is alert and content** as this is an excellent opportunity for your child to babble and chatter. Limit the soother to nap times or when your baby is very unsettled.

## Use simple language

**Keep sentences short.** Talk about what is happening around you. Name things throughout the day (e.g. when dressing your child, name all the body parts and items of clothing as you put them on). Remember children need to hear words a few times before they start to use them, so saying things more than once will help them to join in and learn new words.

## Easy

**Make it easy for them to listen.** Turn the music, radio and TV off. This helps children to focus on your words.



## Respond

**Give your child time to respond!** Children need longer than adults to formulate their responses, so make sure you allow a little more time for them to answer you. You might be surprised with the answer you get if you wait!

## Encourage

**If your child is using a soother, encourage him/her not to talk** while it is in his/her mouth. Children are unable to move their mouths and tongues properly if they are using a soother at the same time!

## Read

**Read to your child.** It is never too early to start introducing books to children. Whether they put them on their heads, eat them or read them upside down, introducing books to children is one of the best things you can do! Try to establish a routine of reading them a bedtime story every night.

# Play

Playing is what young children spend most of their time doing from the moment they wake up until they close their eyes at night. Play is any activity that your child enjoys and it does not need to be an expensive toy. Play helps children to develop their language skills.

## **What does play have to do with language development?**

Play usually involves listening and talking about what is happening. It is an important activity for language development. It also involves a lot of repetition, which is what a child needs to learn. Play helps a child develop skills which are important for communication, for example taking turns, using eye contact, body language and use of gesture. It involves using several senses, for example the child hears the word “*cookie*” while he touches it and tastes it. Adults support language by commenting on, or labelling children’s play and such comments provide a language rich environment for a child.

## **How best to play with your child**

- Set aside a special time; where you have one to one play time with your child. Even if this is only for a short time, for example a chat/game before bedtime, this can really make a difference.
- Choose interactive, imaginative activities. The best toys will allow you and your child to do things together, and most importantly to talk to each other whilst you play.
- Follow your child’s lead; let your child choose the game and activity and go with their ideas. Remember to go slowly and at your child’s pace, repeating the game if they like it.
- Describe what your child is doing; notice and comment on what your child is doing in play, for example ‘You’re pushing the button, that’s great’.
- Remember to build play into your everyday activities in the home, for example, get your child involved in gardening/cooking or other household activities and add language to these activities.
- And most importantly have fun!

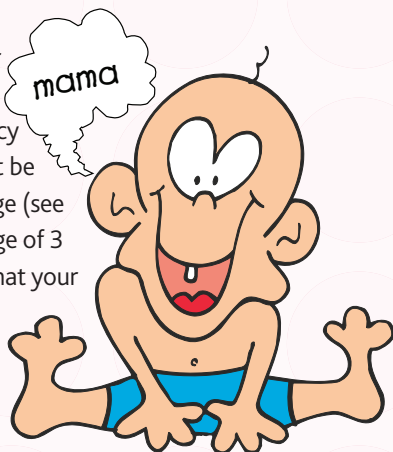
Reference: Parents Plus c/o Mater Child and Adolescent Mental Health Service,  
Mater Hospital, James Joyce Street, Dublin 1.



# Sound Development, Lisps, & Tongue Tie

## Speech

Speech development begins with babbling and playing with sounds. In order to produce speech, children need to hear sounds and move the muscles of their mouths. They also need to use their voices to make sounds, and listen to the sounds they make. It is normal for children to jumble up sounds while their speech is developing. Speech development spans from infancy throughout childhood, and certain sounds may not be fully developed until your child is over 8 years of age (see speech sound check list pg. 10). However, by the age of 3 years you should be able to understand most of what your child says without difficulty.



## Lisps

A 'lisp' occurs when the tongue is in an incorrect position when talking. It can happen when the tongue peeps out between the upper and lower teeth giving a hissy 's' sound. This type of lisp usually affects production of 'S' and 'Z'.

Another type of 'lisp' happens when air escapes through the sides of the teeth, resulting in slushy or wet sounding speech, it can affect the production of 'S', 'Z', 'CH', 'SH', and 'J'.

## Tongue Tie

Approximately 5% of newborns are born with a tongue tie (Messner et al., 2000; Rickett et al., 2005). For most children, tongue tie will not affect speech sound development. The majority of children with tongue tie will learn to adapt their tongue movements, allowing for normal speech production. Surgically releasing a tongue tie (Frenulectomy) is rarely needed for speech reasons alone. However, surgery may be considered where there are feeding problems with young babies.

# Soothers, Stammering & Multilingualism



## **Soothers**

Soothers can help comfort young babies, and also help to develop the sucking patterns. However, as your baby gets older, having a soother in the mouth can prevent him/her from playing with sounds and babbling. These are important steps in learning to talk.

Prolonged soother use can encourage the tongue to learn patterns of movement which can affect sound development, thus, resulting in unclear speech. Prolonged soother use can also affect the shape of the teeth as they grow. This can affect the clarity of your child's speech. Regular and prolonged soother use can encourage your child to breathe through his/her mouth, and may increase drooling. Research also suggests that soother use can increase the risk of ear infection. Speech and Language therapists do not recommend the use of soothers beyond the age of 12 months.

## **Stammering and Stuttering**

Stammering and stuttering refer to difficulties with fluency of speech. Children between 2 and 5 years of age often go through a phase of repeating words, phrases, or even the first sound of a word. They may also prolong a sound in a word, or get 'stuck' on/in a word. Stammering/stuttering is more common in boys than girls. It may happen when your child is excited, organising what to say, or when saying something tricky. It can come and go, and it may change depending on how your child is feeling and who he/she is talking to. Your child may not be aware it is happening. About 2/3 of young children who stammer improve without help; other children may need Speech and Language Therapy. If your child is demonstrating any of the above, please contact your local Speech and Language Therapy Service for further information.

## **Multilingualism**

A person who speaks two or more languages is multilingual. At home, it is essential that parents use the language they are most confident in (usually the home/first language) when interacting with their children. Learning more than one language does not cause speech and language problems. Multilingual children will usually learn English when exposed to it in preschool or school. After two years of exposure most children should be able to hold a conversation in their new/second language. If your child is having difficulty understanding and using his/her home/first language, please contact your local Speech and Language Therapy Service for more information.

# What to do if you are concerned...



- Check the stepping stones of communication development (page 2 & 3) in this booklet to see how your child is developing.
  - Talk to someone who knows or works with your child, for example preschool teacher, childcare worker, General Practitioner, and /or Public Health Nurse.
  - Contact your local Speech and Language Therapy service for advice .
- 
- If you have additional concerns about your child's development speak to your GP, Public Health Nurse or other health professional who will be able to guide you in supporting your child. An Assessment of Need under the Disability Act 2005, may be recommended. This is an independent assessment of the full range of your child's needs associated with his or her disability.
  - If your child's voice typically sounds strained or hoarse, 'cuts out' during speech, changes pitch abruptly, or is too loud – please talk to your GP and request a referral to an Ear, Nose and Throat Doctor, and a referral to your local Speech and Language Therapy Service.
  - Check out the list of resources on page 12 for ideas on what you can do at home to develop your child's communication.



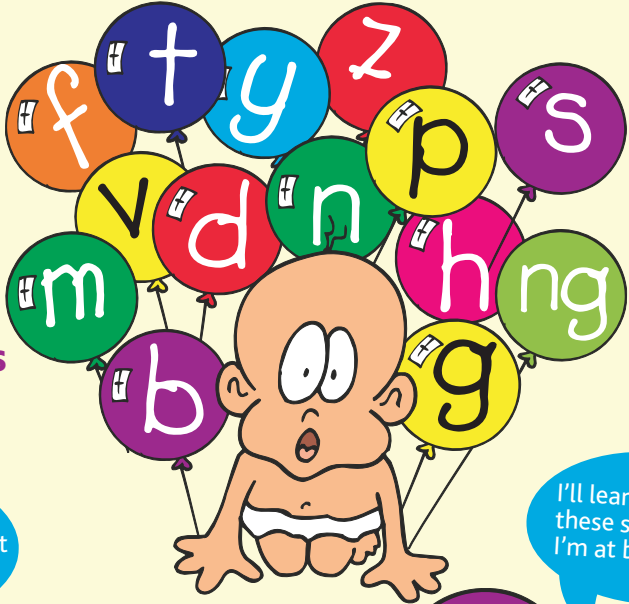
# Speech Checklist

Look for your child's age group to see what sounds they should have

Tick off all the sounds your child is using:

These are the first sounds I'll learn

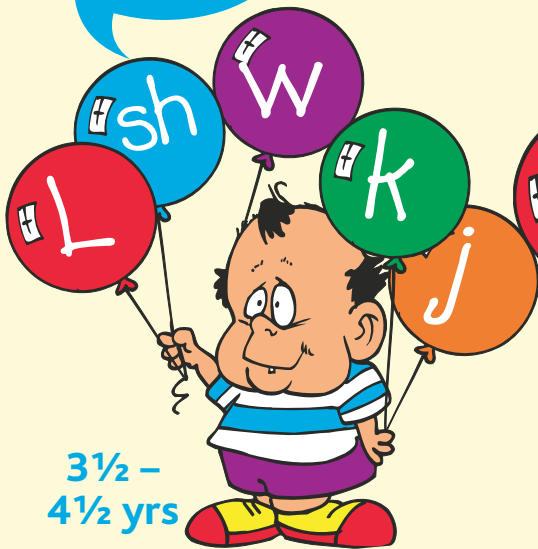
0 – 3½ yrs



I'll learn these sounds while I'm at pre-school

I'll learn to say these sounds when I'm at big school

3½ – 4½ yrs



4½ – 8½ yrs



# What to expect:

## *Record the age your child develops these skills...*

**12 months:** Baby should be starting to use single words e.g. 'Momma', 'dada'

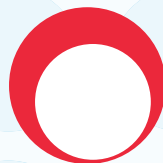
**18 months:** Baby is using mainly single words however they are starting to join words together e.g. 'More juice'

**24 Months:** Child is mainly using 2 word phrases to communicate e.g. 'daddy gone', 'play car'

**36 Months:** Child is talking in sentences most of the time and is also starting to ask 'why', 'where' and 'when' questions e.g. 'where is Peppa?'

**4 years:** Child is talking in full sentences, however there may be some grammatical errors, e.g. 'I goed to the shop'

**5 years:** Child is using sentences that are well formed although he may still have some difficulties with grammar e.g. plurals like saying 'sheeps' instead of 'sheep'



# Useful Resources

## Useful websites:

Help my Kid Learn – [www.helpmykidlearn.ie](http://www.helpmykidlearn.ie)

Irish Association of Speech and Language Therapists – [www.IASLT.ie](http://www.IASLT.ie)

Irish Society of Speech and Language Therapists in Private Practice – [www.iasltp.ie](http://www.iasltp.ie)

Libraries in Ireland – [www.library.ie](http://www.library.ie)

South Dublin County Childcare Committee – [www.southdublinchildcare.ie](http://www.southdublinchildcare.ie)

The National Adult Literacy Agency – [www.nala.ie](http://www.nala.ie)

Talk to your Baby – [www.talktoyourbaby.org.uk](http://www.talktoyourbaby.org.uk)

The Children's Communication Charity – [www.ican.org.uk](http://www.ican.org.uk)

## Stammering

Action for Stammering Children – [www.stammeringcentre.org/parent-information](http://www.stammeringcentre.org/parent-information)

BSA Leaflets for Parents of Under 5's – [www.stammering.org/under5.html](http://www.stammering.org/under5.html)

## Multilingualism

Talk to your baby in your own language – [www.talktoyourbaby.org.uk](http://www.talktoyourbaby.org.uk)

Talk Together – Helping babies and young children learn skills for talking.

I Can 2011 – [http://www3.hants.gov.uk/ican\\_talk\\_together.pdf](http://www3.hants.gov.uk/ican_talk_together.pdf)

Learning Two Languages –  
[www.asha.org/public/speech/development/bilingualchildren.htm](http://www.asha.org/public/speech/development/bilingualchildren.htm)

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- Paul, R. (2007) Language Disorders from Infancy through Adolescence. 3rd Edition. USA, Elsevier.
- Parents Plus c/o Mater Child and Adolescent Mental Health Service, Mater Hospital, James Joyce Street, Dublin 1.
- Public Health Agency: Healthy child, healthy future: speech and language therapy for children. Belfast DHSSPS, 2012.

## Websites

[www.literacytrust.org](http://www.literacytrust.org)

[www.hanen.org](http://www.hanen.org)

[www.superduperinc.com](http://www.superduperinc.com)

[www.stammering.org/under5.htm](http://www.stammering.org/under5.htm)

[www.speech-language-therapy.com](http://www.speech-language-therapy.com)

[www.ican.org.uk](http://www.ican.org.uk)

[www.talktoyourbaby.org.uk](http://www.talktoyourbaby.org.uk)

[www.latrobe.edu.au](http://www.latrobe.edu.au)

[www.asha.org/](http://www.asha.org/)

[www.communityplaythings.com](http://www.communityplaythings.com)

# Your Local Speech and Language Therapy Clinics

## Dublin South West

Rosemary Curry,  
*Principal Speech & Language Therapist,*  
Speech & Language Therapy Department,  
HSE ISA Dublin South West/Kildare,  
West Wicklow,  
Mary Mercer Health Centre,  
Fortunestown Road,  
Jobstown, Tallaght, Dublin 24  
**Phone: 01-458 5795**

## Catchment areas covered:

- Citywest
- Brookfield
- Fettercairn
- Killinarden
- Crumlin
- Springfield
- Ballycragh
- Millbrook Lawns
- Limekiln
- Terenure
- Fortunestown
- Mountainview
- Jobstown
- Firhouse
- Aylesbury
- Old Court
- Ballycullen
- Old Bawn
- Walkinstown
- Templeogue

## Dublin West

Anne-Marie Aberg,  
*Principal Speech & Language Therapist,*  
Speech & Language Therapy Department,  
HSE ISA Dublin South Central,  
Acorn Unit,  
Cherry Orchard Hospital,  
Ballyfermot, Dublin 10  
**Phone: 01-620 6256**

## Catchment areas covered:

- Inchicore
- Bluebell
- Clondalkin
- Newcastle
- Saggart
- Ballyfermot
- Chapelizod
- Lucan
- Brittas
- Rathcoole

## Dublin South Central

Anne Healy  
*Speech and Language Therapy Manager,*  
HSE ISA Dublin South Central  
Pearse Street Primary Care Centre,  
Mark's Lane,  
off Mark's Street,  
Dublin 2  
**Phone: 01-642 7700**

## Catchment areas covered:

- The Coombe
- St James area
- Bride Street
- Irishtown
- Rathgar
- Terenure
- Rathfarnham
- Edmonstown
- Rialto
- Liberties area
- Pearse street
- Rathmines
- Harolds Cross
- St Enda's
- Knocklyon