

Learning to Produce Speech Sounds

Does Your Child Need Special Help?

There is a certain age at which a child looks at you in all earnestness and delivers a long, pleased speech in all the true inflections of spoken English, but with not one recognizable syllable. There is no way you can tell the child that if language had been a melody, he had mastered it and done well, but that since it was in fact a sense, he had botched it utterly. - Annie Dillard, *Pilgrim at Tinker Creek*

Individuals with articulation problems have a difficult time forming various sounds and stringing those sounds together to create words. They may substitute one sound for another or they may omit sounds entirely. Some children, for example, leave off consonants at the end of words.

As professionals who work in the field of early intervention, we meet many parents who have concerns about their child's speech sound production. Sometimes, however, these "problems" are common among young children and may be overcome without special help. If you have concerns about your child's articulation development, the following information, based on data reported by Sander (1972) will be helpful:

Age	Sounds Produced by Most Children
Prior to 2	<i>b, h, m, n, p, and w</i>
2	<i>d, g, k, t, and ng</i>
2 ½	<i>f, y</i>
3	<i>r, s, and l</i>
3½	<i>ch, sh, and z</i>
Between 4 and 5	<i>th</i> in words such as <i>thumb</i> (voiceless) and <i>the</i> (voiced)
Between 5½ and 6	<i>zh</i> as in <i>treasure</i>

The fact that a child has not acquired a specific sound at the age listed above is not necessarily an indicator that something is wrong. Most children who are unable to produce *r, s, or l* at age three, for example, will learn these sounds without the need for therapy. To better assess your child's speech intelligibility, consider the following:

- By 18 months a child's speech is normally 25% intelligible.
- By 24 months a child's speech is normally 50-75% intelligible.
- By 36 months a child's speech is normally 75-100% intelligible. (Lynch, Brookshire, and Fox, 1980)

Individuals may experience difficulties learning speech sounds for a variety of reasons:

- **Mental Retardation** - Articulation disorders are common among children with intellectual deficits. Children who are very intelligent, however, may also have articulation disorders! Intelligence has been found to be associated with defective speech sound production only when it is significantly below normal (Roseberry-McKibbin and Hegde, 2006)
- **Hearing Loss** - Loss of hearing at an early stage of development may lead to a profound speech delay.
- **Maturation Delay** - Delays in maturation may affect the development of articulation skills.
- **Expressive Language Disorder** - Disabilities that affect the ability to learn language skills often affect

articulation development. .

- **Influence of a Second Language** - The development of speech skills may be influenced by the use of a language other than English at home. If the parents speak with an accent, for example, the child's speech may have similar characteristics. (Roseberry-McKibbin, 2008)
- **Language Exposure** - Environmental factors such as poverty, poor housing, abuse, emotional stress, neglect, and malnutrition may affect social interactions and learning. Speech development may be affected if the child has poor speech models or limited opportunities to interact with others.
- **Genetic Inheritance** - Genetic factors can play a role in speech and language development. Sometimes, however, children acquire speech difficulties because they interact frequently with older siblings who are poor speech models. Both genetic and environmental factor can affect the learning of speech sounds.

If it is absolutely essential that parents and professionals in the field do not confuse articulation errors/delays with speech differences resulting from use of a specific dialect. Many different dialects of English are used in the United States. In some dialects of English, for example, it is common to substitute **f** for **th** in words such as *bathroom*. These environmental "differences" are to be expected and should not be viewed as abnormal behaviors. As educated and informed members of society, it is our responsibility to know, understand, and distinguish between behaviors that are common within a specific dialect and those that are not. Therefore, when assessing a child's speech, at any given age, one must always take into account any and all cultural differences that may influence speech production.

A variety of activities can help children to build their "speech muscles." Consider the following:

- **Licking Lollipops.** Give your child a lollipop to lick to help her develop the tongue, the strongest muscle in the body. As the child licks the lollipop, she moves the tongue in and out, up and down, and from side to side.
- **Blowing Bubbles.** Encourage your child to blow bubbles to help her strengthen the jaw, cheeks, and lips. By blowing bubbles the student practices making movements of the lips that are critical for correct production of **p** ("paper"), **b** ("ball") and **m** ("money").
- **Using Straws.** Give your child a straw and ask her to blow through it. This activity strengthens the lips and cheeks. Some children allow air to escape through the sides of the mouth, and the result is "slushy speech." By blowing through a straw, the child stabilizes the jaw and practices appropriate lip closure.
- **Chewing Gum.** Help strengthen muscles of the jaw by giving your child a piece of gum to chew.
- **Knocking It Off.** Put a Cheerio on the child's lip and ask the child to knock it off with the tongue. This activity builds tongue control so that the child can produce sounds that require use of both the tongue and teeth (linguidental sounds). The "th" at the beginning of *the*, for example, is a linguadental sound in which the tongue is placed between the upper and lower teeth.
- **Using a Mirror.** Use a mirror to heighten the child's awareness of how muscles of the mouth are used to produce speech. The mirror provides the child with a visual image of the sounds they are being taught. By using a mirror, the child sees how the lips and tongue work to produce sounds. Children can build speech muscles by looking at a mirror and making funny faces!

If you feel that your child needs special help, consult with a speech-language pathologist. A comprehensive assessment may need to be conducted to identify specific learning problems that your child may be experiencing. In some cases, testing will be conducted by a multidisciplinary team that includes a speech-language pathologist and other specialists. In school settings, an Individual Educational Plans (IEP) is developed for children identified as having special education needs. Children with articulation disorders may receive on-on-one or small group instruction.

Children with articulation disorders can be helped. The "key," however, is to identify the problem early. Early intervention helps children overcome problems that can affect learning in the classroom.

References

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