

Speech/Language Impairment

DEFINITION

IDEA defines a speech or language impairment as a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child's educational performance.

SPEECH DISORDERS

Speech Sound Disorders: Speech impairment where the child has difficulty producing sounds. Most children make some mistakes as they learn to say new words. A speech sound disorder occurs when mistakes continue past a certain age. Every sound has a different range of ages when the child should make the sound correctly.

Speech sound disorders include problems with articulation (making sounds) and phonological processes (patterns of sounds).

Sounds can be substituted (saying "tat" for "cat"), left off (saying "ca" instead of "cat"), added (saying "kwat" instead of "cat") or changed (saying the sound incorrectly as in a lisp). Sometimes children produce a pattern of sound errors (phonological process disorder). For example, a child may consistently say one sound instead of two in words that contain blends ("boken" for "broken" or "poon" for "spoon").

Some students may have motor problems (cerebral palsy), motor planning issues (apraxia) or physical limitations (cleft palate and/or cleft lip), which may impact their ability to produce sounds or sequences of sounds

Stuttering: A speech impairment which affects the fluency of speech.

The disorder is characterized by disruptions in the production of speech sounds, also called "disfluencies." Stuttered speech often includes repetitions of words or parts of words, as well as prolongations of speech sounds. Most people produce brief disfluencies from time to time. For instance, some words are repeated and others are preceded by "um" or "uh." Disfluencies are not necessarily a problem; however, they can impede communication when a person produces too many of them or avoids participation in certain activities because they are concerned about how others might react to their disfluencies.

Voice: Speech impairment where the child's voice has an abnormal quality of pitch, resonance, or loudness.

Persistent voice issues can indicate problems such as vocal cord nodules, which should be addressed. Some students who have structural abnormalities, such as cleft palate or palatal insufficiency, may exhibit a nasal sound to their speech. An otolaryngologist must verify the absence or existence of structural or functional pathology before voice therapy can be provided.

Dysphagia: Some children may have difficulty eating (chewing and swallowing food) and drinking without aspiration. The speech-language pathologist may be involved in developing a plan, along with other team members, to ensure that the child is provided with safe nourishment and hydration during school hours.

COMMUNICATION DISORDERS

Augmentative and Alternative Communication: the use of an alternative to speaking as a substitute for speech or to supplement speech.

Some children's speech cannot be understood by others because they have physical challenges, such as cerebral palsy, or sensory limitations, such as a hearing impairment or hearing loss. Everyone can communicate, given a means to communicate and a communication partner who is willing to "listen." There are no prerequisite skills required. The team must presume competence. Students may use sign language or other communication systems, such as an object or picture board, picture communication notebooks, or a "talking" communication device, computer or tablet.

Autism: A developmental disability, generally evident before age three, significantly affecting verbal and nonverbal communication and social interaction. Speech-language pathologists work as a team member to assist children with autism.

ASHA, American Speech Language Hearing Association
<https://asha.org/public/speech/disorders/SpeechSoundDisorders/>
<https://asha.org/public/speech/disorders/Preschool-Language-Disorders/>
<https://asha.org/public/speech/disorders/SelectiveMutism/>

Policy 24-19: West Virginia Department of Education (2017)

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LANGUAGE DISORDERS

Language Disorder: Refers to persistent difficulties in the acquisition of language and use of language across modalities (i.e. spoken, written, sign language, or other forms of communication (AAC)). Language deficits can occur in:

Receptive Language or Comprehension - reduced vocabulary understanding and following directions, answering questions.

Expressive Language or Production - talking, writing or communicating verbally or with AAC, in complete sentences, using word endings like plurals or past tense.

Social (Pragmatics) - maintaining a conversation, taking turns, social greetings, following rules for storytelling, understanding humor and multiple meanings of words.

Preschool children (3 to 5 years old) - may initially have problems with understanding and/or using language. In many cases consistent participation in a language-rich preschool classroom is all the child needs to catch up.

Language-Based Learning Disability - persistent language impairments can affect all areas of academic success, including reading, writing, spelling and even math. The Eligibility Committee will determine how best to meet the students' identified needs. SLP may provide direct or indirect services.

Intellectual Disability: significant below average intellectual functioning that exists concurrently with deficits in adaptive skills area. The SLP may or may not provide direct services, depending upon whether the Eligibility Committee determines that the student requires specially designed instruction. Often the student's communication needs can be met in the classroom, with SLP observations and consultations.

ELL: English Language Learners are children who speak a language other than English. These children are challenged by learning the language spoken in school and are assisted by special instructors, called ELL instructors. Sometimes these students may also have speech sound disorders or underlying language problems which may make it difficult for them to learn and use either language correctly. In these instances, a

speech-language pathologist may evaluate the student's speech/language skills, using an interpreter.

Selective Mutism: Some children do not speak in certain situations, like at school, but speak at other times, like at home or with friends. Selective Mutism is a complicated disorder which requires a team approach. The speech-language pathologist may or may not be a member of the team, depending upon evaluation and input from psychologist/psychiatrist, social worker, parent, teacher, pediatrician and other relevant sources.

EDUCATIONAL RELEVANCE

While children may exhibit speech and language difficulties, IDEA requires that the Eligibility Committee determine whether the speech-language impairment affects the progress and involvement of the student in the general curriculum; in other words, does the speech-language disability adversely affect educational performance and/or non-academic areas or vocational and prevocational skills. Some students may have a speech sound disorder but do well in school. Each student must be considered for eligibility on an individual basis.

Requirements of the three-prong test of eligibility are:

1. Meets state eligibility requirement - determined by a speech-language evaluation which includes standardized testing, as well as informal assessments, language samples, observations, teacher and parent reports.
2. Experiences Adverse Effect on Educational Performance—based on observations of the student, teacher information, academic performance and review of student portfolio.
3. Needs Special Education - requires specially designed instruction to ensure access to the general curriculum.

ENROLLMENT AND DISMISSAL

In most instances, speech-language services are not expected to continue for extended periods of time. Once a skill has been developed or the child is no longer making progress, the speech-language pathologist and Eligibility Committee or IEP Team may dismiss the child from direct services. The SLP may continue to monitor the child and consult with the teacher and parent as needed.