

My Child Needs Extra Communication Support: A Companion Document for

The ABC's of Language Development

Discover Language with Your Child



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“
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- Caitlin Bittman**



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My Child Needs Extra Communication Support

If you suspect or learn that your child has a language delay or needs language support for some other reason, you may wonder what this means for you and your family, and what will happen when your child meets their speech-language pathologist (SLP).

Many children have communication difficulties. Because of this, a lot has been learned about ways to provide support. After all, communication is important.

Every parent wants their child to be able to communicate with them and others. You may have read or heard about our book, *The ABC's of Language Development: Discover Language with Your Child*. It focuses on key aspects of communication development:

-  Building the all-important connection with your child
-  Following your child's lead
-  Learning through play
-  Encouraging all communication attempts

If you have not yet read it, we encourage you to do so as it is for parents of ALL children. It was written to provide recent research on language acquisition and practical strategies you can use, based on that research. Four authors, with expertise in **language acquisition, speech-language pathology, pre-literacy and social and emotional development**, combined their knowledge so that you would have a trustworthy resource to guide you as you support your child's language development.

We have developed this companion document, *My Child Needs Extra Communication Support*, based on the work of speech-language pathologists who use these strategies with children at all stages of language development. It expands on two sections, “Delay” and “When and How to Seek Help,” found in the book, *The ABC’s of Language Development: Discover Language with Your Child*.

About this Document

This document provides background information and terminology to introduce you to what you may encounter when you meet your child’s speech-language pathologist. **It is not a replacement for seeking out professional help that is specific to your child’s needs.**

You can learn about:

- 🐏 What to expect during your session with your speech-language pathologist
- 🐏 Different types of communication delays
- 🐏 Typical indicators for each type of communication delay
- 🐏 Helpful strategies you can use

Speech-Language Pathologists

Speech-language pathologists who work with children have chosen to do so because they like children and want to help them reach their communication potential. Your child will be in good hands.



Your Child's speech-language Pathologist

Your child's speech-language pathologist will assess your child's communication development. They will rely on your knowledge and experience with your child in addition to their own observations. They may even complete a parent checklist with you. As a parent, you know your child best, and your knowledge is an essential part of any assessment. Your child's SLP will then design a plan that provides support specific to your child's needs.

How will the SLP work with my child?

Your child's assessments and sessions with their SLP may look a lot like child-led play. SLPs have a variety of toys and choose from these according to your child's interests and the skills they expect to see, based on your child's age. There may be some periods of looking through books with pictures. These are designed to assess different aspects of communication. Through play with toys and books, your child's SLP will be working through the plan for what they want your child to achieve and will gently guide it to unfold.

Sessions reflect your child's stage and growing abilities

With young children there is a plan but the structure of assessments and sessions may not be obvious. Most children find these to be fun.

As children age and their communication develops and becomes more complex, assessments become more structured. For the child it may still look a lot like play and your child will likely have fun.

With older children SLPs explain the goals and involve the child in achieving them.

With all kids

With children at every age and stage, their interests and motivations generally guide the sessions. SLPs strive to have sessions that are child-led. Most children look forward to time with their SLP as an opportunity to play with someone who wants to play with them. SLPs are trained to be encouraging, and to recognize when a child is tired. They will do their best to make sure your child gets a fun break when they need a rest.

What is my role as a parent/caregiver?

In some cases parents stay in the room during the session. SLPs and parents decide this together. As SLPs like to say, they know their field and the parent knows their child, so many SLPs draw on the parent's expertise to know how best to work with their child. Parents can draw on the SLP's expertise to learn how they can work with their child at home. It's a two-way street. There are children who work better with their parent nearby and others who are more distracted with a parent in the room. To make the most of the time together you and your SLP may choose to have your SLP spend a portion of the session alone with your child and a portion with you in the room. That way you will know what to work on and how to practise at home with your child. All of this can be discussed.

Types of Delays

Language scientists tend to categorize types of delays in order to better understand them. The main categories are:

- ★ Receptive language abilities
- ★ Expressive language abilities



- ★ Speech sound skills
- ★ Voice or vocal quality
- ★ Fluency skills
- ★ Social communication skills



Receptive Language Abilities: What are they and what are the indicators that your child may need extra support?

Definition of Receptive Language

“Receptive language” abilities or “comprehension skills” describe how your child understands words and language.

To understand language, your child needs to:

- ★ Know the meaning of individual words
- ★ Figure out the meaning of words when they are put together in different types of sentence structures
- ★ Understand grammatical markers – these indicate the grammatical function of a word, phrase or sentence (**run/ran, bird/birds/bird’s**).

Examples:

- ★ If you tell your child, “pass me **some** cars,” your child needs to:
 - Know the words. The word “some” is a word that means more than one, but it is different from “many”
 - Understand the *grammatical markers*. The plural “s” on “cars” is a grammatical marker. It is another clue that you are asking for more than one car

★ If you say, “the **cat** is chasing the **dog**” as opposed to “the **cat** is being chased by the **dog**,” your child needs to:

- Know the words
- Recognize that even though the key words are in a similar order – the meaning is very different.

This requires an advanced language stage.

It can be hard to know if your child is experiencing difficulties with their receptive language skills. They may respond as if they understand the language used, but in fact they might simply be responding to “clues” from a person, regular routines, or the general environment.

Examples:

- ★ Your child crawls towards you when you say “come here” with outstretched arms. They may be responding to your gesture, rather than to your words
- ★ Your child sees you holding your car keys and hears you say, “It’s time to go. Put on your shoes and coat.” They might be so familiar with the “getting ready to go outside” routine that they start to complete the steps without fully understanding what you have **said** to them

Indicators of Delays in Receptive Language

It can difficult to tell if an infant or young child has a receptive language delay. Below are some indicators you can look for when your child is around 6 months of age. At this age they typically:

- ★ Turn to a familiar sound when they hear it
- ★ Seem to recognize familiar voices

- ★ Discriminate between soothing and harsh noises
- ★ Watch faces/mouths while people speak to them
- ★ Calm down (when upset) when parents speak to them
- ★ Smile/laugh in response to their parents' smiles/laughs
- ★ Become upset to an angry tone of voice
- ★ Respond with a gesture when you ask them if they "want up?"
- ★ Respond to their name (it takes some children 7-12 months for this)

If your child is not doing these things you will first want to have their hearing checked to eliminate hearing loss as a possible cause.

Older children with undiagnosed delays in their receptive language abilities may have difficulty with relationships and learning and participating in daily life. It can be harder for them to:

- ★ Follow directions at home, school, or in the community
- ★ Answer questions appropriately
- ★ Maintain attention and concentration
- ★ Maintain friendships
- ★ Learn to read and write
- ★ Develop higher-level problem-solving and reasoning skills

It can also be common for children with receptive language delays to be more disruptive in the classroom or other environments because they have a hard time understanding academic content and what is expected of them.



Children who have receptive language delays are also at risk for having “expressive language” delays. This is because we generally develop understanding of language (receptive language abilities) before developing expressive language.

There are clues that your child might need a little extra support with their receptive language skills. You might notice that your child does not seem to understand or respond to some words you use.

As a general rule, by about 18 months, children can:

- ★ Understand about 50 words
- ★ Point to some different body parts on themselves or on a doll
- ★ Understand some action words and some simple location words, such as “in” or “on”
- ★ Identify some pictures in books when named

You might also notice that they have difficulty responding to simple directions and/or questions.

As a general rule, children can:

- ★ Respond to simple 1-step directions (“give me,” “sit here,” “come here”) by about 12-18 months
 - 1-step directions WITH a supporting gesture are generally understood around 7-12 months
 - 1-step directions WITHOUT a supporting gesture are generally understood by about 1-1.5 years
- ★ Respond to 2-step directions (“go find your ball and bring it to me”) by about 18-36 months

- 2-step directions with support (familiar routines, gestures) are generally understood by about 18-24 months
- 2-step unrelated commands without an accompanying gesture (jump then touch your nose) are generally understood by 30-36 months

★ Respond to questions with multiple “modifiers” by about 36 months (“pass me the **broken blue** crayon”)

★ Respond to “yes” and “no” questions correctly by around 33 months

★ Respond to some simple “wh” – questions appropriately, such as “who,” “what,” or “where” questions, by about 36 months (“what” questions tend to be earliest)

There are other clues that your child may need extra support with their receptive language skills. You might notice:

★ That they have difficulty understanding what comes next in regular routines, such as bath time, or getting dressed to go outside.

★ They use vague and non-specific words when they speak:

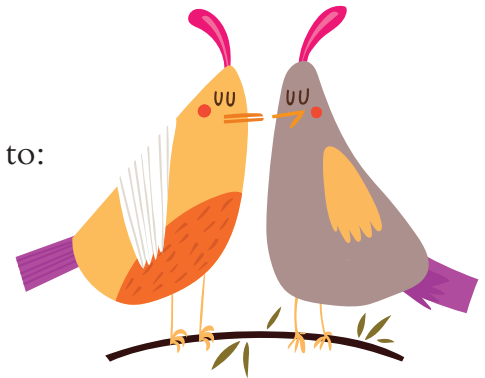
- “I want that” [while pointing], instead of “I want the colouring book”
- “Nana, get me that thing?” instead of, “Nana, can you get me the crayons?”

★ They respond to questions by repeating what is said instead of responding to the question itself, or they give unusual responses to questions

- Parent: Who gave you that cute bunny?
Child: In my bed

As a general rule, children can understand and respond to:

★ “What’s this?” by about 12-18 months



- ★ “Yes/no,” “where,” “what” questions by looking, pointing, or using words by about 12-24 months
- ★ Simple “where,” “what,” “what-doing” and “who” questions about objects, people, and basic events by about 24-36 months (“Where did your sister go?”)
- ★ More complex “why,” “how,” and “what if” questions by about 3-4 years
- ★ “When” questions are the hardest, and children often don’t understand how to respond to these questions until about 4 years or older

If you wonder if your child is experiencing receptive language skill difficulties, you can give them directions without gestures or extra “clues.” Observe your child to see if they can respond to words alone.

Expressive Language Abilities: What are they and what are the indicators that your child may need extra support?

Definition of Expressive Language

“Expressive language” refers to your child’s ability to use gestures, signs, words, and sentences to communicate. Expressive language includes:

- ★ Your child’s use of gestures, signs, vocabulary and sentences
- ★ How they use and apply the rules of grammar
- ★ How they use and construct sentences
- ★ Their sentence length and complexity
- ★ Their story-telling skills

Expressive language skills are different from your child’s speech sound skills.

Expressive language is about the **message** and how words are put together to communicate that message.

Speech sound skills are about how your child makes the individual sounds that help them express that message verbally.

Expressive language skills develop over time. Some errors may be typical for a child's age. For example, it is developmentally appropriate for a 2-year-old to say, "**me** want that" or "he cry." By age 3.5 years, we expect a child to say, "**I** want that" or "He **is** crying."

Indicators of Delays in Expressive Language

It can be much easier to identify your child's expressive language difficulties as you can directly observe the words your child is using and how they string those words together to create sentences.

You may notice that your child does not use or combine words as is expected for their age. There may be a delay if they:

- ★ Do not use single words frequently by about 18 months
- ★ Do not combine 2 words together by about 24 months
- ★ Do not combine 3 words together by about 36 months
- ★ Combine words together in an unusual way ("him not got a ball")
- ★ Mix up words (saying both "he" and "she" when referring to the same person)
- ★ Forget some grammatical markers altogether ("I see two shoe")

What is correct and what is an error differs for different language communities.

Something that is correct in one language and cultural group can be an error in another. The examples in the book, “The ABC’s of Language Development: Discover Language with Your Child” and in this document, represent varieties of English that are the most commonly spoken in North America. Your dialect may be different. One way to figure out if your child is saying things in “odd ways” is to think about how **you** would say something and then compare your child’s utterances to your own.

Speech Sound Skills: What are they and what are the indicators that your child may need extra help?

Definition of speech sound skills

Speech sound skills refer to the way humans produce sounds that form words and enable speech. These skills require rapid and precisely-timed motor movements, and the mental organization of sounds into **patterns of sound contrasts**.

Most children learning to speak make speech sound errors, and/or patterns of errors that affect many sounds. This happens because children often need to simplify their sound system as they are learning to speak. The result is that children will naturally substitute, omit, or simplify difficult sounds to become ones that are easier to produce.

Many children make speech sound errors that persist past the age where these are usually “corrected”

They may:

- ★ Have trouble coordinating the many muscles required to speak
- ★ Have difficulty saying specific sounds



- ★ Substitute, leave off, or simplify sounds
- ★ Have an error pattern that affects many sounds

Indicators of Delays or Difficulties in Speech Sound Development Skills

Not all children will make the same speech sound or patterned errors, and every child's development will be different. Parents and speech-language pathologists don't usually need to be concerned unless:

- ★ The child is demonstrating patterned errors that are atypical
- ★ The child passes the age that the sound or error pattern is usually "mastered" by the majority of same-aged peers

These age expectations are called **speech sound norms** or **ages of acquisition**, and they are just one useful tool to help determine whether a child's speech sound development is progressing as expected.

If a child is having difficulty with a sound that they are not yet expected to have mastered at their age, we call that a **developmentally appropriate error**.

A speech-language pathologist can identify if a child has a delay or disorder in a speech sound skill because they know at what ages children generally stop making expected errors. When a child is past that age and still makes the errors, the child may have a delay or a disorder.

Individual sound errors affect just one sound. For example:

- ★ A child may have difficulty with the /t/ sound

An SLP may use the term **phonological processes**. These are **error patterns** that affect many sounds and that most children make as they are learning to talk.

Error patterns refer to one error pattern that affects many sounds. For example:

★ A child may use the “stopping” pattern, which is when they stop the airflow in sounds that are supposed to have long airflow. If they use the “stopping” pattern, “**fish**” may be said as “**pit**,” or “**shoes**” as “**tood**”

- Children are expected to stop using this pattern for most long airflow sounds by about 4.5 years

It is expected that young children will make errors because they are still learning their sounds and to coordinate all of the body parts and muscles needed for speaking clearly. Eventually, as children hear more speech and gain more control and coordination, their speech clarity is expected to improve.

Some speech sound errors or patterns are very common and are not a cause for concern. They “resolve” in their own time.

For example:

★ It is common for a 2 year-old to say “**tup**” instead of “**cup**.” This is a pattern called “fronting.” It occurs when children produce their **back sounds** (/k/ and /g/) at the front of the mouth instead. By about 3.5 years, they should be able to say /k/ and /g/ sounds correctly

★ A 4 year-old might use /w/ instead of /l/ and /r/, and tell you they “**wove** my **witto wabbit**” (love my little rabbit). This is typical for many children until around 6 years of age

★ Many children will use /f/ or /d/ for “th,” such as in “**dat** is my **fum**”/ **th**at is my **th**umb. This is typical for many children until around 6-7 years of age

Generally speaking, unfamiliar listeners should be able to understand a 2 year-old about 50% of the time, a 3 year-old about 75% of the time, and a 4 year-old almost all of the time, even if the child is still making occasional speech sound errors.

Sometimes an unfamiliar listener has great difficulty understanding a child even though the child is making only **developmentally appropriate** errors. The child is hard to understand because they are combining many such errors. Although the child is not yet expected to have mastered each of the sounds or patterns individually, if the total number of errors and patterns gets in the way of being easily understood, a speech-language pathologist may still recommend speech therapy.

A small number of children may have significant difficulty coordinating and sequencing the rapid and precise movements required for clear speech. Many muscles and parts of the body need to work together for clear and understandable speech. These include all of the muscles needed for breathing, the muscles of the larynx or “voice box,” and the muscles of the mouth and face.

Some children who have difficulty coordinating all of these muscles can still move the individual **articulators** and muscles needed for speech. Their problem is getting everything to work together “in the right way.” The result is that the speech of these children is often difficult to understand. Adding to the difficulty, when they attempt to say the same word multiple times, it can sound different each time. This type of difficulty is called a **motor speech disorder**.

Frequently mixing up or having difficulty saying vowel sounds can be another indicator. For example a child may say “bet” when they mean to say “boat,” and their intonation may sound a little “robotic.”



Well-practised words may be very easy to say, but new words can be hard, and the longer the word the more difficult it may be. In addition, speech can appear to be laboured overall.

A motor speech disorder can be quite challenging for speech-language pathologists and other healthcare professionals to diagnose in young children. This is because a diagnosis should only be made after a period of “diagnostic intervention” where a professional observes your child’s speech sound skills over time during therapy, and rules out other possible causes. However, this type of speech disorder is also very rare.

For more information about speech sound development, see Appendix E by Dr. Carla Hudson Kam, Language Acquisition specialist and Caitlin Bittman, SLP in *The ABC’s of Language Development: Discover Language with your Child* (authors: Dr. Carla Hudson Kam, Caitlin Bittman, Estelle Paget, Elizabeth Wellburn).

Voice Quality – functional issues

Among children of similar age and sex, there can be differences in the quality of their voices that may require various interventions. A child may consistently sound a little more hoarse or harsh, have a voice that is very high or very low in pitch, one that is very loud or very quiet, or a voice that is more or less “nasal” than that of their peers.

In some instances, for example hoarseness or differences in nasality, a speech-language pathologist will likely work in conjunction with an ear-nose-and-throat doctor. There may be a physiological difference in the child’s **vocal folds** or in their **soft palate**, located at the very back of the roof of the mouth, separating the nose from the mouth.

For children who have a consistently hoarse or harsh voice, parents may notice that by the end of the day their child tires of speaking because of discomfort in their throat. Parents might also notice that their child's voice "breaks" or "cuts out" when they speak.

When a child's voice is **hypernasal**, or too nasal, it may mean that the soft palate is not closing off the nose from the roof of the mouth. Sounds that are typically made in the mouth are instead being partially made through the nasal cavity. In this case, speech may sound "soggy" or imprecise.

If a voice is **hyponasal**, or not nasal enough, it may mean that the soft palate is closed too often. Sounds that are usually produced through the nose are only produced through the mouth. In English, three sounds are made through the nose: /m/, /n/, and 'ng'. Children with hyponasal speech may sound like they are sick or have a stuffy nose. They might try to say "**my mama made some lemon jam**" but instead it comes out closer to "**by baba bade sob lebod jab.**"

Sometimes it is possible for swollen adenoids or tonsils to cause hyponasal or hypernasal speech. These structural differences may make it difficult for the soft palate to close completely, or may partially block the soft palate, which can impact the sound of your child's speech.

Fluency

Everybody stutters or stammers from time to time. Speech-language pathologists call this a dysfluency. It is common for adults and children to have moments of dysfluency when they are forgetting a word, are thinking about what to say, or planning their sentence.

There are several types of dysfluencies. They include:

- ★ Repetitions of sounds “c-c-c-can I have a cookie?”
- ★ Repetitions of syllables “ca-ca-ca-can I have a cookie?”
- ★ Repetitions of words “can-can-can-can I have a cookie?”
- ★ Repetitions of phrases “Can I – can I – can I – can I have a cookie?”
- ★ Interjections “can I have...ummm umm...a cookie”
- ★ Revisions “can I have....I think I want a cookie”
- ★ Prolongations “mmmmmmmay I have a cookie?”
- ★ Blocks – the presence of physical strain, or the appearance of “pushing out” words, or of “getting stuck on a word” when trying to say something, “I want a –
C (air pushed out) **OOKIE**”

When children go through a language burst period, many temporarily demonstrate more dysfluencies than usual. They have learned a lot of new language in a short period of time and just need a little more time to organize their thoughts, sentences and words. This is called a **developmental stutter**, and is expected to go away after a short period of time, within around 6 months. If children are going through a period of developmental stuttering, they are most likely to repeat whole words or phrases, and only a few times. They might also have revisions or interjections, like “umm” or “ah.”

Some children, however, have a fluency disorder. Their stutter or stammer lasts for over six months and has some specific characteristics. These



children are more likely to demonstrate prolongations, blocks, or larger number of repetitions. They might also look tense while speaking, or demonstrate a negative reaction or frustration to their own stuttering.

Social Communication Skills: What are they and what are the indicators that your child may need extra support?

Definition of Social Communication

Social Communication, or **Pragmatics**, refers to a child's social use of language to communicate and interact with others. It includes both verbal (words) and non-verbal communication, such as facial expressions, gestures, and body language. It is often referred to as "social skills." Social communication skills can be challenging for some children to notice and learn. This is because many social rules are implied, and not often talked about directly. Children are using good social skills when they know what is required of them in social situations, and seem to "fit in."

Indicators of Difficulties with Social Communication

Children who have delays in this area may have difficulties engaging in play with others, making or maintaining new friends, and communicating with unfamiliar people in unfamiliar situations.

For a young child who is just learning to communicate, difficulties with social communication skills may appear as:

- ★ Has reduced eye contact
- ★ Responds inconsistently or not at all when people call their name

- ★ Doesn't meet the milestones for using gestures to communicate
- ★ Doesn't meet the milestones for directing communication to a person (i.e., intentional communication)

An older child might have difficulties:

- ★ "Reading" social situations
- ★ Using nonverbal communication
- ★ Making eye contact
- ★ Understanding the thoughts and feelings of others
- ★ Interpreting the meaning behind people's actions or words, such as when people use sarcasm or figurative language.
 - For example, if someone says "nice hat" in a sarcastic voice, a child with social communication difficulties might not understand that they are being teased



What You Can Do to Help Your Child

This document has introduced you to the types of language delays and difficulties supported by speech-language pathologists. As you were reading it, you may have recognized indicators you have noticed in your child's language. Feel free to try the suggestions in the tables below. Your SLP will design a program that meets the specific needs of your child and suggest strategies you can use at home. Keep in mind, anything you do to connect with your child helps them.

The remainder of this document provides examples organized under the following headings:

- ★ Receptive language abilities
- ★ Expressive language abilities
- ★ Speech sound skills
- ★ Voice or vocal quality
- ★ Fluency skills
- ★ Social communication skills

These strategies are generally good for all children because they help build the all-important parent/child relationship. They are intended to be used in a playful and loving way so that you and your child enjoy the interactions.



What you can do if your child has Receptive Language Delays

What you can do

Your health professional or SLP will likely want your child to have a hearing test, especially if they have a history of ear infections. They can set this up for you.

Sometimes the SLP will want to screen your child's hearing themselves, depending on your child's age.

Why this helps

It is possible that your child is not responding to your words because they can't hear you well.

What you can do

Simplify your sentences, and ★highlight key words in play and conversations:

- Speak using sentences that match your child's language level or are slightly above
- Highlight the important words that carry the most meaning

If your child is speaking in 1-2 word phrases:

If you usually say:

“Sweetie, I need you to put your shoes on because it is time to go”

Say:

“Sweetie, put your shoes on”

★You can **highlight words** by saying them a little **louder** and **longer** than the rest of the words you are using.

Why this helps

Shorter sentences make it easier for your child to:

- *Pay attention*
- *Notice the most important words*
- *Process what they hear*
- *Learn important words*

What you can do

Use a multi-sensory approach to help your child understand new words and concepts:

- SAY the words often
- SHOW the words
 - Use gestures, pictures, or objects
- DO something related to the word, if possible.

If you are teaching your child the word, “book”:

- **Talk** about the book while you are holding it
- **Explore** it together
- **Repeat** the word “book” as you look at it
- **Let your child** use and explore the book

Why this helps

When your child experiences something through multiple senses:

- *It is more memorable for them*

- *It makes learning easier*
- *It creates stronger associations in the brain*

When you repeat words often:

- *It easier for a child to learn and remember the word*

What you can do

Use new words in as many situations as possible:

- Highlight and repeat words that carry the most meaning:
 - Object names
 - Actions
 - Describing words
 - Locations
 - Feelings

Why this helps

When a word stands out for your child, they are more likely to:

- *Notice the word*

When you repeat new words in many different situations, it is easier for your child to:

- *Understand the word*
- *Remember the word*

*Children need to hear words and experience what those words refer to **many times** before they will understand and remember them*

What you can do

Give directions 1-2 steps at a time:

- Use short, simple directions
- Highlight key words
- Add in gestures

Feel free to help your child follow the directions, especially when they are learning. You can:

- Repeat what they need to do bit-by-bit as they work through the steps

Why this helps

When you simplify giving directions and provide additional support as needed, you:

- *Set your child up for success*
- *May reduce frustration*

It can be a lot for a child to:

- *Process what they are hearing*
- *Remember what they just heard*
- *Do what you are asking*

What you can do

Use words, gestures and/or pictures to help ease **transitions**.

If you are at the park and it's time to go, and your child doesn't seem to understand why they need to leave now, you can:

- Say, “It is time to go. We need to video chat with Grandma”
- Point to the way home
- Show a picture of Grandma, maybe from your phone

Why this helps

Using visuals can help your child learn, especially when paired with simple language that is matched to your child’s level

Visuals can help your child understand when you are talking about something that is not “in the here and now”

What you can do

Narrate what you and your child are doing throughout the day.

From the time you first see your child in the morning till you read them their bedtime story at night, you can describe what you are about to do and then what you are doing:

- “It’s time for breakfast. Here is your bowl. It is your special bowl. For oatmeal. I’m cutting the banana. The banana for your oatmeal”
- “It’s time for bed. It’s time for your story. Here is your story book”

Why this helps

Narrating daily activities gives your child a sense of security. Most children like some predictability.

This also helps them learn about routines – what comes first, what comes next.

By naturally matching words to what is happening in the moment, you are exposing your child to words that are common to your household routines and culture.

Adding words to what your child is currently seeing or experiencing increases their receptive vocabulary.

What you can do

Describe what your child notices or is holding.

If your child is not yet using words and picks up a stuffed toy bunny, you can say:

- “Bunny! You found your bunny. [pet the bunny] pet, pet, pet.”
- Wait to give your child a chance to pet the bunny
- Then keep the conversation going using more describing words, “Oooh. It’s soft. What a soft bunny.”

Why this helps

Noticing what your child is doing gives you an opportunity to talk about what they are interested in. You are increasing their receptive vocabulary for something that is important to them.

Your child is more likely to pay attention when you talk about something that motivates them, or something they are already interested in.

You are also showing your child that they are important, because you are following their lead in this conversation, even if they are not using words.

Turn-taking, sometimes called “serve and return” is one of the best ways for children to learn.

What you can do

Turn off background noise, such as TVs or other electronics.

Why this helps

Background noise makes it more difficult for your child to pay attention to your words. Distractions get in the way of learning.

TVs and flashy electronic toys often “steal” your child’s attention. Your child learns to communicate best by interacting with you, and hearing your words in play rather than from an electronic toy.

What you can do

Play with your child at their level, and follow their lead.

- This may mean getting comfortable on the floor with them, or bringing them up to your level. For example, you can play with them when they are in their high chair or on the couch, if that is safe. Face-to-face is best.
- Join in your child’s play instead of directing it.

Why this helps

Children learn through play and the more they play, the more they learn.

Your child is more likely to stay interested in playing if you are close to them and follow their lead.

When you are close, your child can learn more as they can more easily see and hear how you speak.

When you are close, it is much easier to notice what your child is interested in, and how they like to play.



What you can do if your child has Expressive Language Delays

What you can do

Try not to anticipate your child's every need. Instead, wait for them to communicate that they need help.

Create natural situations that encourage your child to communicate, and then wait for them ask for help. You can:

- Give your child their favourite snack bit-by-bit only. Model how they can say the name of the snack, or maybe introduce the sign. Wait to give them a chance to respond.
- Give your child something motivating in clear, hard-to-open containers. Some items might include:
 - Bubble liquid with the lid screwed on tight
 - Big clear jar with their favourite race cars inside
 - Favourite snack inside a container with a screw-on lid
- Find toys your child likes but that are hard for them to operate on their own
 - For young children this may be wind-up toys, popper toys, or a modeling clay accessory, such as a play garlic press, which is hard for little hands to squeeze
 - Balloon games can be fun with close adult supervision (deflated balloons can be a choking hazard). A parent can blow up a balloon without tying the end, and then let it go. Young children love the noise the balloon makes as it flies away and generally will want you to do it again. They will need you to blow up the balloon again.

- On swings, push your child a few times, then stop and wait for them to ask for more. You can stand in front of the swing (be careful not to get kicked!) instead of pushing from behind. Remember, face-to-face is best
- Put some of your child's favourite toys in sight but out of reach
- For toys or routines with lots of pieces, hold on to the pieces, and introduce them slowly instead of putting them all out at once. Encourage your child to ask for the pieces, or label them with your child as you take them out. For example, you can hold the pieces of the puzzle, and hand them to your child when they ask. Or, put the bath toys in the tub one at a time
- In a well-known routine, do something unexpected, and then wait to see if they will respond. For example, tell them to put on their shoes, but then hand them their grandfather's shoes. Wait to see how they will respond.

Why this helps

Your child will need to ask you for help! And they will be motivated to do so.

You are giving your child a reason to want to communicate

*This is sometimes called **friendly sabotage** or **communication temptations**.*

Use your judgement. Sometimes your child will be happy to play along.

Other times you may sense that your child is trying so hard that they are getting frustrated.

*In this situation, you will want to reward your child's **language attempts**.*

Respond to ALL of your child's attempts to communicate, and celebrate their attempts, even if they don't sound exactly right. This will help keep communicating fun, and will reward them for trying.

All of these activities and games encourage your child to use their communication skills.

As you label toys and actions you give your child more opportunities to hear words to describe what they want or things that are in their environment.

This gives your child an opportunity to have fun with language and with you.

What you can do

Respond to any and all your child's attempts to communicate, even if it doesn't sound or look like how you would say the word or make the sign.

- You are holding a book and your child wants to see it too. You can ask, "What do you want?" Your child may say "bbbb" which is what they can do at this stage. You can smile and say, "Yes! It is a **book**. Let's read the **book** together."

Why this helps

By responding right away after your child attempts to communicate, you are rewarding them positively for trying.

It's okay if it doesn't sound or look perfect right away. It's more important that your child starts to understand the power of communication.

Your positive response keeps them motivated.

Responding to all communication attempts can help your child avoid frustration when they are having difficulty saying something "just right."

What you can do

Repeat key words often during play so your child has a chance to hear the word. Wait after you repeat the word to give them a chance to try to say the word or respond in some other way

- Parent: Let's get the **blocks**. You take some **blocks**, and I'll take some **blocks** [hand out the blocks as you speak]
- Pause – child may or may not respond with words
- Parent: Wow, you are carrying so many **blocks**. Thank you. Now we can **build** a **block tower**

Why this helps

This increases the likelihood your child might try to make a word attempt themselves.

What you can do

Pause during a favourite song, rhyme or routine to see if your child will tell you what comes next. Songs with actions work really well for this, or games such as tickles, or chase, where there is anticipation and a fun ending.

- Your child might like the song, “Zoom, zoom, zoom, we’re going to the moon ... 3-2-1 blastoff!” (with an action)
 - You can sing this a few times with the actions and then pause in one place to see if your child will “fill in the blank”, such as:
 - At the start of the song, at “Zoom”
 - Part-way through the song, at “moon”

OR

- right before the really fun “blastoff”
- You are dressing your child to go out the door. You put on their socks and ask, “What do we need now?” Or you can say, “First we put on your socks and then we put on your _____(shoes)”

Why this helps

When you create patterns and do the same actions, saying the same words consistently, your child benefits in several ways. They learn what to expect, and they connect the words to the objects or actions

When children are familiar with the routine and parents pause in a predictable place each time, children are more likely to know how to take their turn or “fill in the blank”, and are more likely to try.

When you pause in a routine right before the most fun part, your child will be more likely to try the word or gesture because they are excited about what comes next.

Children generally love rhymes and benefit from hearing them. It is easier for your child to make a word attempt when the song is familiar.

For hundreds of years at least, parents have been saying or reading poems and rhymes to their children. Today we know, through science, that it builds children’s brains and helps with language development.

What you can do

Match words to whatever you think your child is trying to communicate

- If your child pushes an object towards you and says “uh!” you can model the specific word that you think they are meaning to communicate

Parent: “**Help?** You want **help?**”

Pause – to give your child a chance to try the word or respond in some other way. Respond immediately to any attempt to communicate.

Why this helps

When you use words to match what you think your child is communicating, you are:

- *Showing them that they are important*
- *Demonstrating the power of communication*
- *Helping them develop their vocabulary*
- *Giving them a clear communication model*

Your child’s response, whether it is a word attempt, gesture or facial expression, will guide your next steps.

What you can do

Instead of only “yes/no” questions, offer choices.

If possible, hold the choices up to show your child the objects you are offering, and name them.

Wait for your child to respond with a gesture or word attempt.

When they respond, repeat the name of their choice and bring the object closer to your face so they can see how you say the word.

At snack time, you can ask:

Parent: “Do you want milk? [hold up the milk] or water [hold up the water]”

Pause: Wait for them to respond.

Child: Points to water or makes a word attempt.

Parent: (Holds water close to their face) “**Water**. You want the **water**.”

Here is the **water** for you.”

Why this helps

When you give your child choices, you are also creating another opportunity to model specific language

Choices encourage language use in a gentle and natural way, and may help expand your child’s vocabulary. Your child may try a new, more specific word.

Giving two options gives your child some power or control in their life without overwhelming them.

Choices contribute to your child’s brain development. (Narrowing the options is also a very useful parenting tip.)

What you can do

Reduce the number of questions you ask in play.

If your child is getting frustrated or ignoring your questions and requests, turn some questions into comments. No one wants to feel they are being “tested” all of the time.

- Instead of “what’s this?” you can say, “It’s a **cow**!”
- Instead of “what colour is this?” you can say, “a **brown** horse”
- Instead of “What does this say?” you can point to the image of a sheep and say “**baaaa!**”

After you comment, wait to give your child a chance to take a turn in the “conversation.”

Why this helps

You can feel pressure to give your child as many opportunities as possible to practise their language.

Sometimes, however, they just don’t want to do it. It can hard for parents to remember that being “tested” and told what to do isn’t always fun. A child can feel pressure too, and this is not helpful for learning.

Focus on following your child’s lead, and join in on their play without “testing” them.

Children learn better when they are engaged and having fun. Your child will want to communicate with you when you show them you are a fun play partner.

What you can do

Recast your child's sentence so that it sounds more like the way you say it.

You may notice:

- Their comment is incomplete
- They are mixing up words
- They are missing some grammatical markers
 - Child: "him running"
 - Parent: "Yes, **he** is running! **He** is really fast! I wonder where **he** is going."

Why this helps

When you highlight and repeat your child's comment in your words and in a conversational way, you are helping your child notice that you say things differently. It can take a long time for all children to grasp these subtleties. In the meantime, you can continue to gently point these out in a natural way.

What you can do

Help your child make their sentences longer or more complex by adding on to their words, phrases or sentences.

- Child: Dirty! (holds out their hands)
- Parent: Oh, yes! What dirty hands! Let's wash your dirty hands.

Or with a child in a later stage of communication

- Child: I falled down. Mommy got me a band aid
- Adult: Oh, you **fell** down **and then** your mom got you a band aid. Did it hurt?

Why this helps

Children generally begin their expressive language by making sounds or word attempts, single words and then two word utterances. An aim is to help them first speak in sentences, then produce longer sentences and eventually, complex sentences.

When you add to what your child has said, you are:

- Showing you have heard them and when they speak you are interested in what they have to say*
- Demonstrating how to add on to their comment to express a more complex sentence or thought*
- Providing the additional vocabulary they need so that when they are ready, they will be able to make their sentence longer and express the more complex thought*

What you can do

From early in life, use books to point out objects, to talk about feelings and to read or tell stories. Practise turn-taking or serve and return, even when your child is preverbal. You can:

- Notice what they are looking at and label it
- Pause to give them a chance to “respond” (there may be no clear response at first)
- Take your “turn” again and say something else

As your child progresses, there will be more turn-taking in your “conversations”. At this stage you can:

- Choose a book -- or let your child choose a book -- to read together

- Encourage conversation before, during and after
 - “Oh look at the cover. I wonder what this book is about”
 - While reading, stop and ask, “What do you think will happen next?”
 - If a character is showing feelings, “I think that bear is feeling sad”
 - Talk about the stories afterwards
 - Summarize the story back to one another
 - Talk about the order of events

Why this helps

Books are an outstanding way to help your child understand the world and how it works. Books introduce new worlds, new ideas and imaginary and real situations. They enable your child to see how words and sentences are used and give them vocabulary that they will be able to use.

Perhaps most important, books encourage conversations. Recent research reveals that children benefit from having as many “conversation turns” as possible every day.

Most children love to hear and talk about the same story over and over. The predictability helps them feel safe and the repetition helps them learn words and sentence structure that they may be able to use to talk about their everyday experiences.

Books provide an ideal way to build and maintain the connection with your child. You can create routines where you are physically and emotionally close, sharing a book and taking a “mini-holiday” together.

Many books have pictures with things your child may not often see or may never have seen. Books therefore create a unique opportunity to expand your child’s knowledge and vocabulary when you talk about the pictures together.

Research shows that early and frequent exposure to books helps children have stronger pre-literacy skills. Reading with children early on has a positive impact on their language development.



What you can do if your child has Difficulties with their Speech Sound Skills

What you can do

In play, position yourself face-to-face. Let your child see how you are saying words and making sounds.

Why this helps

It may be easier for your child to try a word or sound when they can see how you do it.

What you can do

Have fun playing with sounds.

For children who are not yet using words, or seem more quiet than others:

- Use lots of fun words, sound effects or environmental noises in play, such as: “Woah!”, “wow”, “uh-oh”, “pop”, “crash”, or “boom”, “vrrrrmmmm” for a car, and “ssshhhh” when you pretend to pour a cup of tea

Give your child opportunities to safely explore what their voice and articulators can do:

- Hum songs, make noises into empty cups, blow raspberries, or listen to your voices echo in a big empty room

Turn imitation into a game:

- Start by making the same noises as your child
- As your child changes the noise they make, imitate them
- Change the sound you make to see if they will copy you (avoid telling them directly to “copy me” so that it stays fun and low-pressure)
- Take turns making new sounds and noises. Include actions if you’d like

Why this helps

Children need the opportunity to safely explore what their voice and articulators can do.

They are more likely to try sounds and words in a playful and relaxed atmosphere. Fun sounds are part of play and motivating for children.

Your child may notice and think it’s funny that you are making silly sounds or copying them.

They may even try new words and sounds for you to imitate.

You are creating ideal conditions for learning by playing and connecting at the same time.

If speech therapy is needed, good verbal imitation skills will help children to be successful.

Practising imitation in a low-pressure and fun way can be seen as supporting therapy-readiness skills.

What you can do

If using words is hard for your child right now, or they are showing signs of frustration, it may help to introduce signs or gestures, or visual communication boards.

We call these **augmentative or alternative communications (AAC)**. AAC includes any communication techniques other than speech that support, enhance, or supplement communication.

Start by choosing signs or pictures that you think will be motivating for your child, or ones that your child will use often. Model and use them with your child as much as possible in a natural way. Make sure to continue saying the words as you sign or point to the pictures.

You can make a picture board with your child's favourite snack items, toys, or common messages, and leave it in an accessible place. This can act as a choice board, or a tool your child can use if they are having difficulty communicating.

You can also:

- Suggest other ways that they can communicate their message. Ask them to:
 - **Show you** what they are talking about
 - **Point to** what they are telling you about
 - **Take you to it**
- Say the words that your child is expressing through their gesture. Match words to their communication to give them a clear model

Why this helps

When they do not yet have the words, it can be frustrating for children who want to say something.

Gestures, signs and visuals can help your child communicate while they are learning their words.

Gestures, signs and visuals provide another positive way for your child to communicate with you. They can help keep your child motivated to communicate, even while they have some challenges.

Some parents are concerned about introducing signs or gestures. They worry that this may decrease their child's verbal communication. Recent research shows that there is no cause for concern as using gestures or signs neither speeds up nor delays language acquisition.

For children who are experiencing a speech sound delay, introducing AAC may help support their ability to speak and use language.

There can be side benefits from using gestures and signs. They can reduce a child's frustration and enhance the parent/child relationship.

By helping your child persist in communicating their message you are showing them that you care about them and what they have to say.

What you can do

For children who are mispronouncing or leaving off some sounds when it is no longer developmentally appropriate, you can **recast** the sound or word, highlighting the correction

Child: I can't find my "sues" ("shoes")

Parent: Okay, I'll help you find your **ssshh**oes. I wonder if your **ssshh**oes are in the closet. [looks around] Hmm. No **ssshh**oes here!

In your everyday speech, frequently, yet gently, highlight the sounds that are difficult for your child to say, whether they have attempted them recently or not.

Why this helps

It is developmentally appropriate for all children to experience difficulty pronouncing some sounds and saying complete words as they are learning to speak.

Some sounds are much harder to produce than others – in all languages.

By gently highlighting pronunciation in your everyday conversations you draw attention to the way you say words. This can help your child learn to use them on their own without feeling they are constantly being "corrected".



What you can do if your child has Difficulties with their Voice or Vocal Quality

VOICE OR VOICE QUALITY

What you can do

At any time you think your child's voice sounds harsh or hoarse:

- Ensure your child drinks lots of water

- Encourage gentle speaking both inside and out. Raise awareness about louder and softer voices, and praise your child when they are using a ‘soft’, ‘gentle’, or ‘inside’ voice. Give your child opportunities for quiet play throughout the day
- Avoid calling for people from across the house and instead, go to them
- Reduce background noise during speaking situations so that people don’t need to speak louder to “compete” with the other noise. Turn off background TV and videos. Turn down your devices in the car too
- Be aware that whispering irritates the delicate tissues of the vocal folds
- Do everything possible so your child has a good sleep each night.
- Encourage at least 10-15 minutes of calm and quiet play before bedtime. This will give your child’s vocal folds a break. Some good ideas for quiet play include colouring, puzzles, or listening to a story

If you have concerns about your child’s persistent voice or vocal quality:

- See a health professional who can make two referrals – one to a speech-language pathologist and another to an ear-nose-and throat doctor

For a child who sounds **hyponasal** or **hypernasal**:

- Seek specific support from a doctor and speech-language pathologist to learn what you can do to help

Why this helps

Your child may have a temporary issue that can improve through actions that hydrate their vocal folds and give them a rest.

Drinking water is good for all children, and much better for them than most other options.

Model the behaviour you want to see in your child. Remember, children are always watching and you are a role model whether you want to be or not.

Changing the noise environment is the easiest way to decrease stressors on your voice. When background noise is lower, speaking voices can be lower too.

You may be surprised to hear that whispering is hard on the vocal folds, but every actor knows this!

Sleep is beneficial for all children. So many good things happen during sleep and a quiet time without any devices before bedtime contributes to a good sleep

Persistent voice issues may indicate that your child has a physical condition that can improve through professional support



What you can do if your child has Difficulties with Fluency Skills

DYSFLUENCIES

What you can do

It would be good to have your child seen by a speech-language pathologist if they:

- Have been **stuttering** or **stammering** for over six months
- Are using **prolongations** or **blocks**
- Regularly repeat sounds, syllables, words, or phrases upwards of 4–5 times

They may be demonstrating a “persistent stutter” which will benefit from additional support.

Your SLP may find it helpful if you can:

- Discreetly monitor your child’s stuttering each day. At the same time each day, rate it daily on a scale of 0 to 10, where 0 is no stuttering at all, and 10 is the most stuttering imaginable. Some parents use a calendar to record their numbers, and an alarm in their phone to remind them to monitor
- Notice any patterns
 - Are there times of day when stuttering is better or worse?
 - Are there activities associated with increased stuttering?
 - Is the stuttering associated with any major life events?
 - Is the stuttering getting better or worse over time?
 - Anything else you notice. You know your child best

Any time you encounter moments of dysfluency wait calmly for your child to get their message out on their own

- Avoid drawing attention to it
- Avoid interrupting your child or completing their sentence for them
- Encourage siblings and others to follow your lead

When your child has got their message out, there are various things you can do and model fluent speech at the same time. Depending on the situation you can:

- Paraphrase their comment using slow, smooth speech and a warm voice, “Oh you would like us to read your favourite book. Ok! Let’s cuddle up for a story. ”

- Repeat their message back in a slow and calm way
- Smile and do what they have asked, explaining what you are doing, using some of their words
- If you cannot do what they want, respond in a comforting way, again using some of their words

A good example of this style of speaking can be found in old videos of Mister Rogers in his children's TV show, "Mister Rogers' Neighborhood".

- Plan for about 15 minutes of uninterrupted time alone with your child each day doing a calm activity. When you communicate with one another in a calm and unhurried way, this supports fluent speech. Think of "Mister Rogers"!
- If you have a very talkative family with lots of lively conversations
 - Try to reduce competition for talking time
 - Make sure everyone has a turn to speak, and that no one is interrupted when they have their turn

Reducing the number of questions can reduce dysfluencies. Try making a comment instead of asking a question.

Why this helps

Your speech-language-pathologist will design a program to support your child's specific needs. The following information will help your SLP formulate their plan:

- *How long your child has been dysfluent*
- *The age at which the dysfluencies started*
- *If there is a family history of stuttering*

- *The patterns of stuttering you notice at home*
- *If there have been any big life events at the time of onset, such as the arrival of a new sibling or a family break-up*
- *If other aspects of their communication are delayed*
- *If your child seems to notice or have negative reactions to their dysfluencies, such as demonstrating frustration*

When families take a “scientific” approach and observe when dysfluencies happen, that is, they notice them without drawing attention to them, many wonderful things can happen:

- *Family members are likely to become more supportive allies of the child and less likely to be judgemental*
- *Your SLP has more clues to formulate their plan*
- *Your child feels more valued, and this enhances their self-esteem*
- *The family makes space to fully listen to their child and is often enriched by this*

Modeling is a powerful learning tool. When you take the “Mr. Rogers” approach you are modeling slow, fluent speech.

All children benefit from good sleep patterns and regular sleep.

Quiet time with your child:

- *Builds the bond between you*
- *Gives them a relaxed environment in which to practise their language skills*
- *Increases the likelihood they will have a good night’s sleep*

Your child can feel “put on the spot” when they have to deal with too many questions and this can increase dysfluencies.



What you can do if your child has Difficulties with Social Communication

What you can do

- Play with your infant or child! Encourage turn-taking (serve and return) in conversations and games, even when they are pre-verbal. Remember, you are your child's first play partner. When you talk and play with your infant or child you are helping them practise their interaction skills.

Why this helps

When you talk and play with your older child, you are also modeling how to play with others. By giving them opportunities to practise interacting and playing with you, they will know how to do this with their peers.

What you can do

It can be hard for some children to shift their attention from their toys to their communication partner (frequently, you):

- As often as possible play face-to-face with your child at their level

Why this helps

Successful communicators easily “share” their attention between people and objects.

You make it easier for your child to learn this when you are face-to-face with them. When

they can look at your face and their toy when playing, they can practise sharing their attention between a toy and a communication partner.

If your child is “object-focused,” that is, they have great difficulty moving their attention from the object to you this can be a sign of, or lead to, a communication delay. It is good to have the support of a speech-language pathologist.

What you can do

Along with your words, use lots of gestures -- such as pointing -- throughout your day. Exaggerate your facial expressions, gestures, and noises in play.

Why this helps

This will help your child notice you and look at you more easily and will help them understand that we can communicate nonverbally as well.

What you can do

If your child does not notice you when you try to join in, or if they prefer to play on their own:

- Imitate your child in play. Notice what your child is doing, and then do the same thing with or without toys
- Once they have noticed you copying them for a few turns, they may copy one of your actions. Try to add in a simple action, and see if they will take a turn copying you

Why this helps

Imitation can encourage interaction.

Children are more likely to engage with adults when we follow their lead.

You child is likely to notice you following their lead and will appreciate that you are respecting their play and not trying to change it.

*Later, when you are connecting and playing together, you can try to add creative elements, using **serve and return** and propose new ways of playing. This may take your child to a place that is new for them and increase their ability to adapt to different situations. As you do these things, you are modeling and helping them practise social communication skills.*

What you can do

Use more “people games”. These are songs and games that do not typically involve objects. The fun comes from the other person, not a toy. Some examples of early “people games” are:

- Tickle
- Chase
- Peek-a-boo
- Simple Songs with actions, like “Ring Around the Rosy” or “Eensy- Weensy Spider”

Some examples of later “people games” are:

- Tag
- Hide and seek
- Charades

Why this helps

*Social communication is about interacting with people and learning to read and respond to social cues. Remember to “read” your child’s cues to see if they **want** to be tickled at that time.*

It can be much easier for some children to pay attention to their play partners when playing “people games” rather than playing with toys. Many parents find that their child is more engaged with them during this type of play. This is because in “people games”, your child has less to “juggle”. Children only need to pay attention to the other person, instead of sharing their attention with the other person and their toys or objects.

Fun takes away the stress some children experience in social situations.

Playing early people games with you gives your child opportunities to practise shared enjoyment and to begin to learn turn-taking, an important aspect of social communication.

Later on, when your child is playing tag with other children, for example, it will be important for them to understand how to:

- *Take turns*
- *Be a “good” loser*
- *Notice when someone looks like they are done playing*

What you can do

Talk about emotions and thoughts. Help your child notice other people’s feelings. Find opportunities when you read stories and in everyday life.

- At the grocery store, if your child tells you they want green apples, you can say,
 - “Sure. You like green apples! I prefer red apples. So does your sister. Let’s get red apples too!”

Why this helps

Some children need a little extra help learning that other people may have thoughts and feelings that are different from their own. You can help them learn this early by highlighting similarities and differences in people's thoughts and feelings.

What you can do

Talk about the connection between actions and feelings:

- “Good job. You shared your car and that made your friend feel happy. Look at his smile!”

Why this helps

It can sometimes be hard for children to understand that their actions have an impact on other people's thoughts and emotions.

What you can do

Give your child extra support to notice and engage appropriately with peers.

When you are at a playground and playing in the sandbox, if your child does not seem to notice other children, you can:

- Draw attention to what other children are doing. Point to how they are playing and talk about it:
 - “Look! He is making a sandcastle. Let's make one too”
 - “She is filling her bucket up with sand. You can put some sand in your bucket”

If your child generally cries or becomes upset when they see another child is using a toy they want, you can help them learn to ask for the toy by modeling the words and approach they can use:

- Parent: Are you crying because you want to play with the shovel?
- Child: (through tears) YES
- Parent: That little girl is having her turn. You can ask her if you can have the shovel when she has finished her turn. You can say, “Can I please have the shovel?”
- Child: Can I please have the shovel?

Why this helps

When you are a “play coach” you can help your child to notice, respond, and engage appropriately with friends in play.

It takes time for children to learn to think about others’ feelings, needs, wants, and plans.

When children have opportunities to learn how to think beyond themselves everyone benefits:

- *Your child – because other children will want to play with them*
- *Other children – because they get to play with your child and see their qualities*
- *You – because your child can engage with people other than you*
- *Society as a whole – because your child is more likely to grow to be a good citizen*

It is perfectly natural for children to want what others have. If your child learns to ask, using socially acceptable strategies, other children are more likely to share with them.

Of course, your child also needs to learn to share when other children want what they have.

What you can do

Use conversations and role play to explore appropriate and inappropriate ways of communicating.

If you notice your child stands too close making their peers feel uncomfortable:

- Have a conversation with your child about “too close” and “too far” and how boundaries change with the situation. What is appropriate in some situations – standing close to family members for example – is not appropriate in others
- Talk about “clues” your child can look for to learn if they are too close or too far from someone. Demonstrate through role play
 - Parent: “Stand really close to me. Let’s pretend I am a kid you don’t know. Uh oh! Right now you’re too close to me and it is making me feel uncomfortable. Look at my face and body. I’m turning away from you. My face looks unhappy and my body looks uncomfortable”
 - Child: (moves a little further away)
 - Parent: “Oh, that’s better! I feel good again. My body is much more relaxed and my face looks happy again”

Why this helps

When you hold conversations and use role play in a safe and relaxing way, you increase the likelihood that your child will understand and retain what you are explaining.

*Some children learn through direct conversations and explanations. Others learn through experiencing something (**experiential learning**). When you use both conversations and role*

play, you are expanding your child's ability to learn, as one type of learning reinforces the other.

*When you encourage your child to be a “detective” who looks for “clues” on other people's faces and bodies, or in others' actions, **you are giving your child strategies they can use to improve their social communication.** Instead of criticizing or discouraging your child, you are empowering them.*

What you can do

If you are concerned about your child's social communication skills:

- Speak to a doctor or other health professional in addition to your speech-language pathologist. Your child may benefit from a more in-depth assessment from a pediatrician or psychologist who can offer additional support

Why this helps

It is an excellent “investment” of your time and energy to help your child acquire social communication skills early in life. These skills are foundational for forming and maintaining relationships. It is an ongoing process to develop these skills and it takes most people years of practice!

The book, *The ABC's of Language Development: Discover Language with Your Child*, by Dr. Carla Hudson Kam, Caitlin Bittman, Estelle Paget and Elizabeth Wellburn, is designed for ALL children, including those with language delays or difficulties.

To learn more or obtain copies, contact: UBC Language Sciences:
www.languagesciences.ubc.ca

This companion document builds on the book. It was produced by KidCareCanada Society and developed by Elizabeth Wellburn and Estelle Paget with content provided by speech-language pathologist, Caitlin Bittman, and input from language scientist, Dr. Carla Hudson Kam (copyright) 2020.



About the Authors



Dr. Carla Hudson Kam, Professor of Linguistics and Canada Research Chair in Language Acquisition from 2010-2020 at the University of British Columbia, studies first and second language learning, focusing on the relationship between input – what learners hear and see – and what they learn about the language. With a background in brain and cognitive sciences, linguistics, and developmental psychology, she brings an interdisciplinary perspective to her work. She has investigated the learning of sounds, words, and sentences, as well as conversation management and social markers in language, from books, gestures, and speech.



Caitlin Bittman is a registered Speech-Language Pathologist in Victoria, BC. She has extensive experience in public health and private practice settings, working with preschool-aged children and their families to diagnose and treat a wide range of communication needs. Caitlin recognizes the critical role parents and caregivers play in helping their children develop to their maximum potential. Through everyday routines and playful interactions, Caitlin builds capacity in both parents and children to expand children's communication skills and enhance their overall development.



Estelle Paget is the Founder and Executive Director of *KidCareCanada Society*, a registered charity focused on social and emotional development in infants and young children. The high-quality, innovative and trustworthy resources they produce are widely used by families and professionals. For almost 30 years Estelle taught in universities in France and Canada and designed and led university-wide programs, based on her background in linguistics, second language acquisition, international education and pedagogy, informed by cognitive science. Estelle is the lead author of *ABC's for New Parents*.



Elizabeth Wellburn has an MA in Educational Psychology from the University of British Columbia and a background in research and instructional design. She has been with KidCareCanada since 2015 and prior to that worked for or taught at several postsecondary institutions in BC, including Royal Roads University, University of Victoria, University of British Columbia, and Camosun College. She also spent fifteen years with the BC Ministry of Education, focusing mainly on curriculum design and the role of technology in K-12 education.



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