

Responding to a Common Early AAC Question: "Will my child talk?"

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Young children who are at risk for being non-speaking often have multiple concerns that may all need to be addressed during early childhood. Parents may face struggles in helping their children walk, eat, use their hands, or communicate effectively. Among all the typical expectations that may be challenged for their child, one of the common concerns raised by parents to speech-language pathologists during this period is: "Will my child talk"? Professionals who routinely work in AAC may be quick to emphasize the benefits of the many alternative forms of communication, and encourage parents to focus on these areas of potential strength for their children. For many parents, given the common emphasis on speech as synonymous with communication, labeling a child as "nonspeaking" may imply that the child will never be able to communicate effectively. Part of our role in early AAC is to help parents understand the range of skills involved in augmented communication, including speech. We can't necessarily predict the extent to which any given young child will develop fully intelligible speech, but the points below outline issues that help to frame speech within the larger context of AAC, and help to understand progress in vocal development in children at risk for being nonspeaking.

The bulleted points below all illustrate important concepts for parents who have asked the question "will my child talk?" Further information and

references for these concepts, and responses to other commonly asked questions in early AAC, is provided in Cress & Marvin (in press).

- Talking isn't an either/or question.

Communicators aren't divided neatly into groups of people with fully intelligible speech and people who never vocalize at all. There are multiple possible outcomes including persons who may have speech that is intelligible to family but not strangers, or persons who may be intelligible for most utterances but need symbols to clarify unclear messages. Labeling a child as "non-speaking" does not indicate that he/she cannot use speech for any type of communication. We can help parents recognize the full range of communication options available, most of which include vocalization for some purposes.

- There may be reasons to suspect difficulties in your child's speech development.

Children who are having difficulty controlling the muscles involved in speech or respiration, or who have other neurological or cognitive limitations that affect speech and language, are at risk for not developing speech that is intelligible to all listeners. Clarifying the potential sources for a child's difficulty in developing speech may help account for slow progress in speech development, as well as explain why we are addressing multiple forms of communication in intervention.

- We can't tell exactly how your child's own speech motor system will develop yet.

Young children's motor systems are still developing in ways that cannot be predicted, and we cannot yet accurately predict the process of speech development in children with significant motor and/or cognitive delays. We know that the timing of some forms of babbling (canonical babbling) can signal whether a child is showing early signs of language delay (Oller, Eilers, Neal & Cobo-Lewis, 1998; Yoder, Warren & McCathren, 1998) but we don't know how sound progresses in children known to have speech development risks. While we may use terms such as "nonspeaking" in early childhood, it is important to remember that motor development is a dynamic process that may change in unexpected ways as neurological and physical control improves. The first three years of life are too early an age to give up on further improvement in speech skills.

- Your child is producing some sounds that provide a basis for further vocal development.

Almost all children who can produce a voice will use sounds in some ways to communicate some messages that can be understood by partners. It may be important for parents to recognize that simple sounds such as /ah/ or lip smacks are early forms of vocal development for all children, with either typical or atypical development. A child can learn that their sounds make an impact on people, regardless of the type of sounds, and this communicative use of sound supports children's development of the more complex sounds involved in speech.

- AAC includes a commitment to speech as part of multimodal communication.

AAC includes making best use of all of a child's available communication methods, including behavioral, gestural, or pictured communication methods. Part of AAC intervention may include introducing new communication modes such as pictures or voice output. We also need to recognize, though, that AAC includes enhancing a child's use of existing communication modes, such as behaviors and voice, as well as parent responses to those modes. It may be very important for parents to understand our commitment to enhancing speech as part of our early AAC services, particularly as many parents have a priority on speech development as a preferred mode of communication for their child. Any later decisions to discontinue speech intervention in older children or adults rely on child/parent perceptions of limited progress in speech development and increased priority on other communication modes. Possible vocal development goals for children who are not yet linguistic include increasing frequency and control of vocalizations, increasing range of vocal sounds produced, and associating those vocalizations with communicative purposes (Cress, 2003).

- Gradual changes in speech sounds may show progress toward more intelligible speech.

When children continue to learn new sounds or new variations on the sounds they are producing, that is a positive sign for their continued vocal development. Ronski and Sevcik (1996) found that increased sound production and variety tended to co-occur with speech and symbolic development in adolescents with severe disabilities. Children who produce continue to add new vowel contours or consonants to their vocal repertoire

are gradually approximating adult-like speech sounds, but it is not clear what rate or range of vocal change is expected or what other factors contribute to predicting speech in nonspeaking children. Ongoing research is addressing changes in speech sounds and communicative skills that are associated with the development of intelligible speech in children at risk for being nonspeaking.

References

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CEU Questions:

1. Why might parents of young children refuse AAC strategies such as picture symbols or voice output?

- a. They may have a priority for their child developing verbal speech
- b. They may perceive that using AAC for “nonspeaking” children would imply that their child would never use speech
- c. They may consider AAC to only address pictures and voice output and exclude vocal and/or speech development
- d. All of the above

2. What would be an appropriate short response to the question “will my child talk”, based on the responses in this article?

- a. Not everyone is a talker, so it doesn't matter whether your child talks or uses symbols to communicate.
- b. Since your child is “nonspeaking”, we have to concentrate all of our energies on using picture symbols and voice output to communicate.
- c. We don't know how clearly your child will be able to use speech in the long run, but they are using some sounds effectively now and we will work together to support their speech along with other ways of communicating.
- d. Don't worry about speech development right now, I'm sure it will be fine – you have a wonderful child and let's enjoy interacting together.

3. Which of the following are possible strategies to promote speech in prelinguistic children?

- a. Increase children's ability to produce sounds consistently
- b. Increase the variability and range of children's sounds
- c. Associate children's different sounds with communicative meanings
- d. All of the above