

Does your child need speech therapy?

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Is your child stammering or stuttering? Is your toddler's speech development slower than his peers? If your child is having speech and/or communication problems, it may be time to see a speech therapist or speech and language pathologist (SLP).

Care Speech director Jennifer Peters says anybody who has communication difficulty should see a speech therapist. This would include children who were born with disorders like Down Syndrome or autism as well as those with acquired disorders like accident victims.

"Speech therapists are also trained in helping with swallowing disorders which means we work with those who have feeding problems. This includes children with cleft and lip palates (birth defects) as well as children who have problems with feeding," explains Peters, who has been a speech and language pathologist for 18 years.

Assessment

What happens when a parent calls up or brings their child in?

"We first find out when the child started walking or babbling and other developmental milestones. Sometimes you get a general delayed pattern. Sometimes all the motor skills are on par but the speech is delayed.

"It really depends on their general development. Then we make an assessment on whether a child really needs speech therapy.

"I have a lot of children who come to me who are about 2 ½ years old and they

understand everything that everyone says but they're not really speaking a lot. It could be that they're the only child and they don't have a lot of interaction and everything is done for them so they don't have to ask for anything. Sometimes I look at them and say yes, this child is late to start speaking but everything else seems to be on par, so normally we won't start therapy yet.

"We would then share with the parents some informal ways to kickstart the child's talking. We'll give them ideas on what to do and then we'll see them in four or five months' time. If it hasn't kickstarted by then it's still not too late. In four or five months, the child would not be three years old yet.

"If the child still hasn't started talking by then we know there's something more going on and that's when we will see what we need to do about it.

"There is a range of speech developmental milestones and parents need to know what that range is. As a very general rule of thumb, by one year to one and a half a child should know a lot of single words and should be starting to say some of them. By two or two and a half years, the child should be saying a lot of single words and some of them will even start putting two words together.

"By three years you would get three-word phrases and it just takes off from there. So you will find three-year-olds speaking in strings of words.

"That is the general rule of thumb. If parents are worried about their child not being on par with that, then they need to go and see someone who can help them," explains Peters.

According to her, receptive language (what we understand) comes before expressive language. As such, a child who understands everything but is not talking is still okay.

However, if the child does not understand what you are saying to him or her, then there is cause for concern.

If parents are really worried, then the SLP can perhaps draw up a pre-verbal skills programme. These are skills we learn before we learn to speak. This would include sound imitation, turn-taking and eye contact.

Peters explains it is better for parents to work on developing these skills with their children at home as really young children don't respond well to strangers. They would communicate more naturally at home with whoever they see on a daily basis.

However, as the child approaches three years old, they tend to open up a bit more and then the SLP can start working with them.

Working together

That doesn't mean that parents can be hands-off in their child's speech and communication development. Parents still have to do some work with their child at home.

Peters explains that speech therapy isn't like taking a magic pill to get rid of a problem.

"We guide; we tell parents what to do and what is missing. But once a week for 45 minutes isn't enough to really help. Communication is in everything you do and children tend to forget quickly if there is no reinforcement at home," she says.

If there is no followup and support at home, the child won't remember what was taught in the session. So, at the next session, the SLP will have to repeat that last session in the hope of building on it.

"We work very well with parents who support us at home because by the time they come back for the next session, certain things are already set in place because they have worked on it. Then we can go to the next step and build on it. Those are the cases that have a good success rate.

"You can get two children with the same problems and have two different outcomes because of the support from home," she explains.

For Peters, it is important that the person who looks after the child daily comes in for the sessions as well. This means, if both parents are working, it should be the maid, grandparents or even the nanny.

However, this doesn't mean that parents can just drop off their child with the maid and drive off. The parents still need to sit in on the child's sessions with the SLP.

"I insist that all parents have to sit in at their child's sessions. I don't like seeing people who send their child in with the maid because then the homework is not followed up on.

"The norm is that the parent sits in on the session but doesn't interfere; it's just for them to see what their child is capable of and what their child cannot do. Then, at the end of the session, we explain what we did. We also tell them what we want them to do at home, which is not necessarily what we did during the session.

"Generally, we try to work hand in hand with the parents. We try to use books and toys to encourage and elicit communication but this environment is not the real world to that child. We need the skills to be generalised and that's why we need the parents to step in. If we're working on a skill today, every time the child wants food, drink or to play, this is what you need to do. That's how we work hand in hand with parents. So parents are very, very involved. If they are not, it does hamper progress," says Peters.

Are parents the problem?

Peters explains that often parents ask if they caused the problem.



"I think you can never cause the problem but you can compound it and make it worse.

"Parents should spend time talking and having mental engagement with their child from small. You can put your child in the front of a TV and no doubt the child will learn some words but it's not mental engagement because it's only one way," she says.

How long will speech therapy take?

Peters explains that parents do sometimes ask how long speech therapy will take before their child is on par with his peers.

Peters: 'You can never cause the problem but you can compound it.'

"It's a fair question but at the same time it's not a fair question because we don't know how much of work you're going to be doing at home and we don't know what the child's capacity to learn is,"

she says.

Normally after working with the child for some time and seeing the progress made, Peters and her colleagues would be able to give parents an idea of how much progress they think can be made and in what frame of time.

Peters explains that so far the parents who go to Care Speech have been very discerning and they're usually very well read before their first visit.

There's hope

She is optimistic about being able to help children, regardless of their age. However, the earlier a child comes in for speech therapy, the easier it will be for the child to learn and adapt and thus correct the problem.

Generally, the majority of children she sees are between the ages of three years and eight or nine. According to Peters, she sees every type of problem - hearing-impaired, cleft and lip palate, Down Syndrome, developmental delay, ADHD (Attention deficit hyperactivity disorder) and autism. However, currently, she sees more children with autistic spectrum disorders.

Currently, she is the only RDI (relationship development intervention) consultant in Malaysia. RDI is a parent training programme specifically to help autistic children.

"The reason why I went into this is because I realised 80% of my casework consisted of autistic children. And yet, I don't think what I am doing is sufficient to help them because you can teach them to talk but you can't make them want to talk. It's very frustrating for a speech therapist,"

Peters admits to generally being successful at helping the children who come in. This means, the child's communication skills would be better than before.

"I believe we can help everybody who comes to Care Speech. They can be better than where they were. How far they go really does depend on the support they get at home and the child's capacity to learn," she adds.

Peters says she has never in her experience had a child she couldn't help at all.

“You can always make it better from where they were.”

If there were any problem that might impede progress it might be the child's behaviour such as inability to sit still or tantrum-throwing.

The longest she's had a child in therapy is a couple of years.

Conclusion

To find a reputable speech therapist, Peters recommends parents go to the Malaysian Association of Speech-Language Hearing's (MASH) website (<http://www.mash.org.my/>) for a full listing of members. To be a member, a speech therapist would have to have clocked a certain number of clinical hours. So, you're likely to find a reputable specialist in the MASH member directory.

She recommends parents go to a speech therapist near them rather than travel all the way just to see her.

Her parting advice to parents?

“Read, educate yourself and don't be afraid to ask questions. I think it goes the same for anybody and for any field. I always tell parents who come to see me, 'Don't trust what I am telling you. Think about it. You know your child best. Does what I am saying make sense?'

“I feel education is important so keep informed and don't let the professional put you down; you know your children best. Try to learn and read up about the problem and try to listen to the professional, and think if it makes sense. Is there some shred of truth here? If you feel there is, then go with it. But you cannot do that judgment unless you have some kind of basic knowledge about it. That is very important.”