Learning Language

Birth to 36 Months
Break the Ice!

• Name
• Location and program/age group they work with
• Best teaching/classroom memory to date
Objectives:

• List at least THREE developmental milestones for infant and toddler speech and language skills

• Describe activities teachers can implement to support and enhance learning of speech and language in young children

• Recognize factors or “red flags” that may interfere with a young child’s learning of speech and language
What Do We Already Know?

- Complete the Pre-Test
- Take notes as needed
- All shall be revealed!
Typical Development: A Note

• Most of the information in this course focuses on the "typical" phases of child development.
• Children develop on their own "track," with some reaching milestones earlier or later than others.
• If you have a concern that a child may not be developing “typically” in one or more areas, consult with your supervisor or center director for procedures to follow for observation, assessment and communication with parents.
• Concerns about a child’s issues regarding children should remain confidential and follow guidelines of your program.
• **As always**, keep in mind that you *should not attempt to diagnose the issue on your own.*
Getting Started: Language is Natural!

- Language: one of the most important skills young children learn in their early years
- Can be acquired without direct instruction
- To develop normal/typical speech and language skills, children need:
  - Cognitive ability
  - Normal hearing range
  - Models to imitate
How Important is Early Education in Language Development?

• The first five years of a child's life are the most critical for the development of speech and language skills.

• National Institute of Child Health and Development
  – Children who received higher quality child care before entering kindergarten had better vocabulary scores in the 5th grade than children who received lower quality care.
  – Quality child care includes positive caregiver/child interactions and conversation
Foundations for Learning

- Writing (acquired skill)
- Reading (acquired skill)
- Speaking - Expressive Language (natural skill)
- Listening - Receptive Language (natural skill)
- Experience/Environment

Once behind, it can be very difficult to catch up!
Language: Typical Development

Why is it important to understand normal language development?

— Your activities need to match the child's developmental level.
  • (i.e. reading age appropriate books)

— Your knowledge of developmental milestones in speech and language will alert you when a child's development may be "off track." At that point you can act appropriately to observe, assess, and intervene.
  • Early intervention is important in order to help children build a strong foundation for future reading and writing skills. The earlier the services can begin, the better the outcome!
**Infant Language: Birth to 3 Months**

**What should you expect?**

<table>
<thead>
<tr>
<th>Hearing and Understanding (Receptive Language)</th>
<th>Speaking (Expressive Language)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Startles to loud sounds</td>
<td>• Cooing (makes pleasure sounds) when content</td>
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<tr>
<td>• Smiles when spoken to</td>
<td>• Cries differently for different needs (i.e. hungry, wet, colic)</td>
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<tr>
<td>• Turns in direction of familiar voice and quiets if crying</td>
<td>• Smiles when he/she sees you</td>
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<tr>
<td>• Increases or decreases sucking behavior in response to sound</td>
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<tr>
<td>• Responds to comforting vocal tones</td>
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*Receptive Language* refers to the infant's ability to listen and understand sounds and language, while *Expressive Language* refers to the infant's ability to communicate through speech and other vocalizations.
## Infant Language: 4 to 6 Months
What should you expect?

<table>
<thead>
<tr>
<th>Hearing and Understanding (Receptive Language)</th>
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</tr>
</thead>
<tbody>
<tr>
<td>• Responds to the word &quot;no&quot;</td>
<td>• Babbling with many different sounds including p, b, and m (Note: Even babies with a hearing impairment babble)</td>
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<tr>
<td>• Enjoys music and rhythm</td>
<td>• Makes gurgling sounds when you are playing with the baby or while they are occupying themselves</td>
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<tr>
<td>• Often fascinated by toys that make sound</td>
<td>• Vocalizes excitement and displeasure</td>
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<tr>
<td>• Responds to changes in your tone of voice</td>
<td>• Uses sounds or gestures to begin to indicate they want something</td>
</tr>
<tr>
<td></td>
<td>• Imitates some sounds</td>
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Infant Language: 7-12 Months
What should you expect?

<table>
<thead>
<tr>
<th>Hearing and Understanding (Receptive Language)</th>
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<tr>
<td>• Turns and looks at your face when called by name</td>
<td>• The sound of babbling changes because it now includes more consonants, as well as long and short vowels (e.g. &quot;tata bibibibi&quot;)</td>
</tr>
<tr>
<td>• Enjoys simple finger play games like &quot;pat-a-cake,&quot; &quot;peek-a boo“</td>
<td>• Uses speech or other sounds (other than crying) to get and keep your attention</td>
</tr>
<tr>
<td>• Obviously recognizes names of familiar objects like &quot;cup,&quot; &quot;shoe,&quot; &quot;eyes,&quot; etc.</td>
<td>• First word(s) have usually appeared by 12 months, although sounds may not be clear (e.g. Dada, Mama, bye-bye)</td>
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<tr>
<td>• Begins to respond to requests such as &quot;Give it to me“</td>
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</tr>
<tr>
<td>• Responds to simple questions such as &quot;Want more?&quot;</td>
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</table>
Which of the following milestones listed below would you typically see develop in an infant between 4 to 6 months old?

- Saying their first word
- Identifying pictures in a book
- Babbling different sounds
Language Learning for Young Children: Make Learning Language Fun!

• Make language fun and inviting!

• *This is especially important for the first year of a child's life.*
  – During the first year, a child understands language primarily through an adult's gestures, facial expressions, and tone of voice.

• The tone of your voice and facial expressions and gestures should convey enthusiasm. The more interesting and exciting your language interactions with children are, the more the children will benefit!

• *Remember:* There is NO substitute for hearing real, child-directed language from an adult. Human connection is a necessary component to language learning for young children!
Language Activities to Use with Infants: Birth - 12 Months

- Reinforce the baby's attempts to talk by looking at him, cuddling and holding him, and imitating his or her babbling and cooing.

- Repeat the baby's laughter and facial expressions.

- Teaching baby sign language can be helpful. It will encourage, not hinder, speech and language development.
Language Activities Infants: Birth - 12 Months

• Talk to the baby as you are doing things such as changing a diaper, feeding him, or counting the steps as you go up and down stairs, etc. Examples:
  – "Betsy is eating pudding. Yum. It's cold. It's good."
  – "Let's put on your socks. Red socks. Two socks on two feet."
  – "Time for a change. Let's get the diapers out."

• *Think, Pair, Share:* What are some other moments in your day when you might be able to model language for infants to hear?
Additional Language Activities for Infants

• Teach the baby to imitate actions such as waving bye-bye, blowing kisses, and clapping. Games such as "peek-a-boo" and "itsy bitsy spider" teach turn-taking which the child will need to learn for conversational skills.

• Sing soothing songs and lullabies.

• Point out objects and say their names and their color.

• Practice counting. Count toes and fingers.

• Read simple books using lots of vocal and facial expression. Point out pictures and name objects in the book.
Real Life Application

Susan was asked by a new parent what was the most important thing for infants and toddlers to develop normal speech and language skills. She said they need:

- A parent with at least a 5th grade education
- Formal training in language
- The stimulation of being talked to and read to by an adult (social interaction)
- The opportunity to watch educational TV and DVDs
### What to Expect with Language: Toddler Time! (12-24 months)

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<tr>
<td>Points to some body parts when asked</td>
<td>Spoken vocabulary increases monthly</td>
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<tr>
<td>Follows simple commands (&quot;Roll the ball,&quot; &quot;Come to me&quot;)</td>
<td>12 months = &quot;mama&quot; &quot;dada&quot;</td>
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<tr>
<td>Understand simple questions (&quot;Where is your blanket?&quot;)</td>
<td>18 months = 10 spoken words</td>
</tr>
<tr>
<td>Enjoys simple stories and points to book pictures when you name them</td>
<td>24 months = 300 spoken words</td>
</tr>
<tr>
<td>Understands &quot;no&quot;</td>
<td>Puts two words together. &quot;Go bye-bye,&quot;</td>
</tr>
<tr>
<td></td>
<td>&quot;No want“</td>
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<tr>
<td></td>
<td>Uses some one or two word questions like &quot;Where mama?“</td>
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<td></td>
<td>Speech is becoming clearer</td>
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Language Activities: 1- to 2-Year-Olds

• Use simple, but grammatically correct speech that is easy for the child to imitate.

• Use "self talk." (This is a one-sided conversation.) Talk about what you are doing.
  – For example, "Miss Juanita gets juice. It's apple juice. Here is the cup. Juice goes in
    the cup. Do you want juice?"
  – **Important Note:** Pause after each statement so the child can respond.

• Expand on the child's words.
  – Example: if the child says "ball", you say "Yes, it is a big, red ball."

• Use "parallel talk" to comment along with what the child is doing. Example:
  "Darius eats cheerios. One cheerio. Two cheerios. Crunch, crunch. Darius likes
  cheerios!"
Language Activities: 1- to 2-Year-Olds

- Read to children daily with enthusiasm and expression.
- Use books with large pictures and a simple phrase on each page.
- Name and describe the pictures on each page.
- Have children point to pictures you name.
- Ask children to name some of the pictures. If they do not respond at first, just name the pictures for them. Eventually they will begin naming them.
## Language Development: Older Toddlers (24-36 months)

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<tr>
<td>• Understands differences in meaning (e.g. up-down, big-little, in-out)</td>
<td>• Vocabulary growth explodes (30 months = 450 words, 36 months = nearly 1,000 words)</td>
</tr>
<tr>
<td>• Follows two step requests (e.g. &quot;Get the cup and put it on the table.&quot;)</td>
<td>• Uses two to three words (noun + verb) to talk about and ask for things (e.g. &quot;Where book is?&quot;, &quot;That mine.&quot;)</td>
</tr>
<tr>
<td>• Listens to and enjoys hearing longer stories</td>
<td>• By age three, can usually say first name, last name, gender, and recite one or two nursery rhymes</td>
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<td>• Family/teacher understands the child's speech most of the time by age three</td>
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Best Practice Ideas for Language Development: 2- to 3-Year-Olds

- At this age, it is important to talk with children. Carry on conversations with them and show them you understand what they say by smiling, nodding, etc.

- Talk to children about similarities and differences between things such as "There are two cups, one is empty and one is full."

- Continue to read daily to children. Introduce new vocabulary by reading books that have a simple sentence on each page.

- Ask children questions that require a choice, rather than a simple "yes" or "no" answer. "Would you like the red crayon or the blue crayon?"
  - (i.e. Open ended questions)

- State synonyms for familiar words (e.g. Mommy, woman, lady, grown-up). Use this vocabulary in sentences so children learn it.
Best Practice Ideas for Language Development: 2- to 3-Year-Olds

• If children communicate with gestures or pointing, say "Use your words" to encourage speech and language development. Then, model the shortest version of the phrase that will help them communicate in that moment.

• Don't directly correct or criticize children's grammar or articulation* errors. This can discourage them from talking. Instead, model the correct grammar or articulation.

• Example:
  Child- "Der a wed wabbit".

  Teacher- "Yes, there is a red rabbit."
Best Practice Ideas for Language Development: 2- to 3-Year-Olds

- Encourage children to speak in sentences. Put objects in a bag. Have children take turns removing them one at a time and naming them. Repeat what the child says and expand upon it using a complete sentence. Example:

  Child: "Ball"

  Teacher: "Say the whole thing. Listen. This is a red ball. Say that." (Point to the child to indicate that he should repeat the sentence.)

  Child: "This is a red ball."

  Teacher: "Good job saying 'This is a red ball.' You said the WHOLE thing!"

Try It!
CLASS: Emotional and Behavioral Support

• Positive Climate
  – Relationships
    • Reciprocal interactions
  – Positive affect
    • Verbal affections
    • Smiling and laughter
  – Respect
    • Respectful language
    • Warm, calm voice
    • Body orientation and eye contact
CLASS: Emotional and Behavioral Support

• Regard for Child Perspectives
  – Child Focus
    • Elicits children’s expression and ideas (i.e. open ended questions)
  – Flexibility
    • Adjusts pacing for individual children (i.e. items in bag activity)
CLASS: Engaged Support for Learning

- Language Modeling
  - Repetition and Extension
    - Repeats
    - Extends/elaborates
  - Self- and parallel talk
    - Describes own actions and narrates children’s action with language
  - Advanced Language
    - Variety of words and descriptive vocabulary
    - Labeling
    - Connecting to familiar words and ideas
CLASS: Engaged Support for Learning

- Quality of Feedback
  - Scaffolding
    - Verbal assistance
    - Prompting thought processes
  - Providing Information
    - Expansion and elaboration
  - Encouragement and Affirmation
    - Specific and individualized feedback
    - Recognition of effort or accomplishment

- Facilitation of Learning and Development
  - Expansion of Cognition
    - Teacher provides and embeds information
    - Teacher relates information to children’s lives and experiences
Which of the following activities would be appropriate to encourage language development in a toddler between ages two and three years old?

- Encourage children to speak in sentences
- Correct children immediately when they use incorrect grammar
- Use parallel talk to comment on what children are doing
Putting Knowledge Into Action

Think about the milestone markers we just explored.

Using one or two milestones, describe at least one activity for each you might do with young children to help support that milestone.

How will this information impact your work with young children?

*Think, Pair, Share*
Red Flags: When To Be Concerned

- **By 3 months** - Not crying to express different needs, not responding to the human voice, not smiling or making pleasure sounds (cooing/gooing)
- **By 6 months** - Not babbling or imitating some sounds
- **By one year** - Not imitating gestures (i.e. bye-bye), not understanding one-step directions
- **By 18 months** - Absence of any spoken words
- **By 24 months** - Absence of two-word phrases
- **By 36 months** - Not using three-word sentences
Red Flags: Hearing Loss

- All infants born in a hospital are screened for hearing loss. However, children can acquire hearing losses later. Even a very small hearing loss can cause a speech and language problem in a young child! Often children with frequent middle ear infections (otitis media) experience delays in speech and language development because it interferes with their hearing.

- **Middle ear infections are the most common cause of hearing difficulties in young children. Don't ignore them!**

Symptoms of otitis media:
- Not paying attention
- Wanting sounds louder than usual, like a TV or needing someone to talk louder
- Listlessness/irritability
- Pulling or scratching at the ears; redness
Red Flags: Physical Problems

• **Cleft Palate**
  A cleft palate is an opening in the roof of the mouth. Many clefts are found after a baby is born. If the cleft is not easy to see, it may not be noticed until the baby has trouble feeding.

  **Symptoms:**
  • Milk may come out of the nose when drinking
  • When the child starts talking, the child sounds like he is talking through his nose (nasal speech)

• **Dental/Jaw/Swallowing Issues**
  Some very young children may have severe overbites or underbites that can cause later articulation problems (speech sound errors). Overuse of pacifiers in infants and toddlers can cause swallowing problems that also result in later articulation difficulties.
Red Flags: General Developmental Delay

• In addition to speech and language concerns, children with general developmental delays MAY also have delays in fine motor skills (using a spoon), gross motor skills (sitting up), visual skills (pointing) and overall cognitive development.

Some conditions that may cause these developmental delays include:
  – Premature birth
  – Cerebral palsy
  – Brain injury
  – Malnutrition
  – Lack of early stimulation/environmental deprivation
  – Genetic disorders such as Down Syndrome
Red Flags: Other Possibilities

• **UNUSUAL SPEECH PATTERNS**
  – Having words, but not using them to communicate with others.
  • For example: may be able to recite parts of TV commercials or nursery rhymes that they have memorized but do not use speech and language to interact or converse with others.
    – These are referred to as autistic-like speech patterns, but may or may not indicate autism.

• **ENVIRONMENTAL AND/OR EMOTIONAL FACTORS**
  – We know that young children need fun and engaging social interaction to develop normal speech and language. Some factors which may prevent this needed social interaction include:
    • A chaotic home environment
    • Depressed parent/primary caregiver
    • The child is continually ignored or reprimanded when talking
Red Flags: Other Common Concerns

- Stuttering
  - All young children repeat sounds and words as they learn to talk
  - This is not necessarily stuttering but may be part of the normal patterns of speech development
  - For young children, it is important to predict whether the stuttering is likely to continue.
  - The American Speech-Language-Hearing Association (ASHA) lists four risk factors for stuttering that are important to consider:
    - A family history of stuttering
    - Stuttering that has continued for 6 months or longer
    - Presence of other speech or language disorders
    - Strong fears or concerns about stuttering on the part of the child or the family
Red Flags: Other Common Concerns

• **Selective Mutism**
  – Children with selective mutism can talk but choose to remain silent in at least one setting (usually school) and/or with some people
  – Selective mutism typically lasts more than one month and occurs before a child is 5 years old.
  – It is usually first noticed when the child starts school.

• **Persistent Hoarseness**
  – Vocal Nodules
  – Allergies
  – Constant yelling or vocalizing other loud noises
What do I do when I think a child needs professional help?

- Discuss your concern with your supervisor/director.
- Document your observations and concerns in a report for parents.
- Plan a conference with the child's parents.
  - **DO NOT** attempt to diagnose the problem or suggest possible causes!
  - Provide factual information on what have you have observed and where the parents might inquire about a speech and language evaluation.
- Provide parents with resources for help.
Our Children Can’t Wait

The first five years of life are THE MOST IMPORTANT for speech and language development.

Children can't afford to wait for help if they have problems that require professional intervention.

Early education teachers are in a vital position to make the difference for the rest of a child's life!
Real Life Application: Joaquin’s Story

*Read and Respond*
Joaquin’s Story: What did you think?

• By two-years-old, Joaquin should be speaking in at least two-word phrases and following simple commands. The fact that he rarely speaks and is very difficult to understand indicates a major concern.

• Did you also notice that he often tugs on his ears? As you have learned, ear infections can cause children to have difficulty hearing spoken language and may lead to language development delays.
  – A good suggestion for his parents would be to have him checked out by a pediatrician to see if he is experiencing ear infections.
  – You could also refer him to a speech language pathologist for further evaluation. **Remember, it is not your job to diagnose language delays!**
Let’s Review!

• Pre-test Responses
• Questions, Thoughts, or Comments