

Talking (Expressive Language)

What is appropriate for children aged 22-36 months

Learns new words very rapidly and is able to use them in communicating.
 Uses action, sometimes with limited talk, that is largely concerned with the 'here and now' (e.g. reaches toward toy, saying *'I have it*).
 Uses a variety of questions (e.g. *what, where, who*).
 Uses simple sentences (e.g. *'Mummy gonna work.'*)
 Beginning to use word endings (e.g. *going, cats*)

What is appropriate for children aged 30-50 months

Beginning to use more complex sentences to link thoughts (e.g. using *and, because*).
 Can retell a simple past event in correct order (e.g. *went down slide, hurt finger*).
 Uses talk to connect ideas, explain what is happening and anticipate what might happen next, recall and relive past experiences.
 Questions why things happen and gives explanations. Asks e.g. *who, what, when, how*.
 Uses a range of tenses (e.g. *play, playing, will play, played*)

What is appropriate for children aged 40-60+ months

Extends vocabulary, especially by grouping and naming, exploring the meaning and sounds of new words.
 Links statements and sticks to a main theme or intention.
 Uses language to imagine and recreate roles and experiences in play situations.
 Uses talk to organise, sequence and clarify thinking, ideas, feelings and events.
 Introduces a storyline or narrative into their play.

TALKING (EXPRESSIVE LANGUAGE) GENERAL

Common Signs of Difficulties:

- Little or no participation in simple conversations, discussions about recent past events or remembering and describing routines
- The child may take a passive role in imaginative play
- Child may have difficulties asking for things from adults and peers
- Over reliance on gesture, and other forms of non verbal communication
- The child becomes frustrated when trying to speak to their peers (this may have an impact on behaviour)
- Limited use of 2 or 3 word phrases
- They are not using sentences

Factors Affecting Talking (Expressive Language):

- Poor attention and listening skills.
- Limited vocabulary.
- Limited experiences and interactions.
- May be due to delayed receptive language.
- May be due to delayed speech development.

Strategies to Support Talking (Expressive Language):

- Listen carefully to any attempts at communication the child makes and respond to them.
- Do not demand repetition.
- Praise a child for any communication attempts
- Give the child choices e.g. "do you want water or milk?"

- Make your voice sound interesting and stress certain words
- Keep your language level just above the child's but simple
- Leave pauses with gaps and smile to encourage the child to communicate
- Use repetitive rhymes, songs and familiar stories.
- Use specific language in context to help the child attach meaning and labels to objects e.g. "whose shoes are these?" rather than "whose are these?"
- Avoid imitating immature words that a child may use. Model words correctly.
- Encourage the child to expand on what they have said by repeating back what they have said and adding another word. E.g. child: "dog", adult : "yes, a big dog"
- Correct a child's errors in a positive way by modeling e.g. Child: "drive him car" , adult: "he's driving his car.
- Create opportunities for learning language in the everyday setting situation. It is important that new language is used in natural situations and does not simply take place in 1:1 or small group situations.
- Ensure that children have lots of opportunities to hear and learn new words before you expect them to use them.

SPEECH SOUNDS

Common Signs of Difficulties:

- They are using a limited range of speech sounds
- Their speech is difficult to understand
- The child's speech may only be understood by members of the family
- A child may have delayed speech sounds where sounds may be missed off the ends of words or other sounds substituted
- Some children may use more unusual sound substitutions and could be following a disordered pattern of speech

Factors Affecting Speech Sounds:

- Delayed and disordered speech can occur alongside sensory, physical and learning difficulties
- Speech sound production will be hindered by prolonged and inappropriate use of bottles and dummies.
- Hearing difficulties / impairment. In order to say speech sounds correctly a child needs to be able to hear them correctly
- A child may have specific difficulties in using their oral muscles effectively

Strategies to Support Speech Sounds:

- Discuss with parents and check that the child has had any necessary hearing checks
- Help the child to listen.
- React to what the child says, not how clearly they speak.
- Repeat what the child says but give the correct speech model. E.g. child: "I like to torys" adult: "yes stories are fun!"
- Don't make the child repeat the words
- Don't pretend to understand. Encourage the use of gesture. Ask the child to show you things

SPEECH FLUENCY

Common Signs of Difficulties:

- May hesitate during an utterance and say "um" a lot
- May have a lot of hesitations in their speech
- They might prolong or repeat a word or a sound over and over as they prepare for their turn in conversation

Factors Affecting Speech Fluency:

- Many children of nursery age go through a stage of (normal developmental dysfluency). Children are sometimes dysfluent (stammer) due to a rapid surge in their language skills. Their mouths simply cannot keep up with their thoughts!

- Children who demonstrate dysfluent speech should be monitored carefully and if the stammer persists it is advisable to refer to the speech and language therapy service then appropriate management advice can be given.
- Emotional factors may affect fluency

Strategies to Support Speech Fluency:

- Be calm and patient and let the child know that you will wait.
- Make sure that the child is not rushed or feeling rushed
- Give a child time to think before responding
- Allow the child time to finish what they are saying rather than finishing the sentence for them
- Do not put pressure on a child to speak in a large group
- Encourage the child with warm and encouraging body language and facial expression
- Ensure that the child has lots of opportunities to join in with songs and rhymes

RELUCTANT SPEAKERS

Common Signs of Difficulties:

- Is reluctant to speak in the setting but may talk a lot at home
- May refuse to speak

Factors Affecting Reluctant Speakers:

- Some children are quiet and reserved and can feel overwhelmed in a setting.
- There may be a family history of shyness.
- Some children may have a psychological difficulty and are fearful and afraid of speaking
- Some children may refuse to speak as part of a behavioral problem and withhold speech to gain attention
- Family members may convey the expectation that that the child is unlikely to speak. This can make the child fearful about what will happen when they do speak.

Strategies to Support Reluctant Speakers:

- Maintain a positive and reassuring facial expression
- Treat the child in the same way you treat other children. Don't make special concessions for not talking.
- Avoid letting the child think that you regard them as "the child who doesn't speak".
- Avoid begging, bribing or challenging the child to speak or letting on how much you would like them to talk.
- Be calm and unemotional when the child refuses to speak, try to move on before they become anxious "Okay, let's see if Ellie wants some toast".
- Be aware that some children find their silence rewarding, it can secure special attention or excuse them from tasks that they don't want to do. The aim is to reverse this situation and show the children that they are missing out on something positive by not participating. It is important to reward communication rather than silence.
- Avoid using direct questions, these can make the child feel fearful of answering. Instead try to make opportunities for them to comment. "I wonder..." "I bet...." Are useful phrases as they invite a response rather than demanding one.
- Avoid looking directly at the child after providing the opportunity to speak.
- Turn your ear towards the child so that they can whisper an answer to you if they prefer (non speaking children often begin to communicate by whispering initially).
- Try to provide opportunities for the child to speak that are out of the spotlight. Avoid situations where adults / children are watching and waiting for the child to speak.
- Consider creating small comfortable enclosed spaces within the indoor and outdoor environment. These discrete Communication Friendly Spaces can

often provide security for a reluctant speaker.

- Focus on ensuring that the early years environment is relaxing and enjoyable.

Further Information:

Websites:

www.ican.org.ukwww.talkingpoint.org.uk

www.talktoyourbaby.org.uk

www.hello.org.uk

www.elizabethjarmanltd.co.uk

<http://www.stokespeaksout>

www.elklan.co.uk

Books:

- Early Language Builders, Liz Elks and Henrietta McLachlan (published by ELKLAN)
- Communication Friendly Spaces Toolkit, Elizabeth Jarman
- A Place to Talk (range of books available) Elizabeth Jarman ISBN: 978-1-906029-26-5

Resources:

- Refer to Pre School Basic Communication Group Activities
- Inclusion Development Programme (Supporting children with speech, language and communication needs)
- Hello: Universally Speaking