

4 Myths About Speech Therapy for Children

Because communication skills are essential for people of all ages, parents of children experiencing difficulties with their speech are generally quite concerned, but they don't always know where to turn because of the misinformation commonly seen and heard. While there are many misconceptions about treating speech problems in children, there are a few that seem to be more prevalent than others. It's important that speech language pathologists (SLPs) and other interested parties take the time to dispel these myths.

Only older children can be successfully treated

This myth is especially troubling because identifying issues during early stages of development can potentially allow treatments that, essentially, eliminate specific issues before they become deep-seated habits that are more difficult to treat.

However, different issues tend to manifest themselves at different points in a child's development. In many cases, issues don't develop until a child reaches school age. Determining when and if a child would benefit from speech therapy depends on multiple criteria, which suggests some issues not deemed treatable at one age may, at a later point, be reconsidered. The determination changes as the child's development advances. In other words, what is not considered abnormal at one stage can, at a later point, qualify a child for therapy.

The important thing to remember is there is no set age when speech therapy should be considered. Rather, the relationship between the child's development and the norm for his or her age group is the determining factor.

Children with speech problems are just being lazy

This myth is, as a rule, totally incorrect. As children develop, they tend to work out short cuts for speech as they struggle with learning new words. This is especially true with very young children when they are bombarded with countless new words they are struggling to incorporate into their vocabularies.

Speech pathologists note the issues with pronouncing certain sounds, especially more difficult ones, should be addressed if they don't disappear before the child enters school. Most children work out the issues on their own by the time they are four or five as they become more comfortable with the sounds. However, speech therapy should be considered if the issues persist when the child enters school.

Children often become frustrated when they are misunderstood or chastised for making errors, so care is needed in how speech problems are addressed in the home. To minimize the frustrations involved, exploring the options for speech therapy is recommended if the child exhibits a high level of frustration when attempting to express his or her thoughts.

Learning Multiple Languages as a Child Causes Speech Disorders

While children exposed to multiple languages tend to display some unique characteristics, the simple fact a child is learning more than one language has no direct bearing on developing a speech disorder.

As a child learns the languages, they often develop speech patterns where they use sentences incorporating words from both languages. This is commonly referred to as code switching and is not really an issue. Speech experts recognize the fact these children are learning new vocabulary and grammar rules in more than one language. Mixing them is not a speech issue, and the children will, at some point, learn to distinguish between the languages and how they are used.

With that being said, bi-lingual children are just as prone to experience actual speech issues as any other children. If a child is learning multiple languages, the same problem will, generally, be expressed in all languages being learned. It isn't related to the language use itself and should be treated in the same manner as any other child's speech issues are dealt with.

Children will grow out of their speech problems

This myth is a little more complicated to deal with. While it is, indeed, true that some children will outgrow a specific speech issue, others will not. That means, to be safe, it's generally recommended the problems be dealt with rather than waiting and simply hoping the issues will resolve themselves.

When speech issues are present, they can affect other areas of development. That simply means a child's overall well-being can suffer if an issue is not addressed. Social development is important in young children, and if a child's self-esteem is impacted due to peer relationships related to the speech issue, the setbacks in development may be difficult to overcome when treatment is delayed.

Other Related Myths to Be Aware Of

There are other myths related to the four above that should be recognized. The use of different dialects and slang are not speech defects. Even in the same geographic area, different speech patterns are common, as children are exposed to the dialects of their parents and siblings and will adopt those speech patterns as their own. Languages are fluid, and dialects evolve over time. Recognizing the differences between the uses of dialects and actual speech issues is important for anyone involved in diagnosing and treating children.

There are also misconceptions about the type and frequency of treatment children should have. While one-on-one treatment may be appropriate for some children, other children may be more amenable to treatment in a group setting. In addition, more intense treatment plans may be appropriate for some speech issues while other issues may be successfully addressed

with less-frequent treatments. There is no hard-and-fast rule, and each child's situation must be evaluated on an individual basis.

Another related myth is that only children need speech therapy. Adults who have had strokes or suffered head injuries often need speech therapy to restore function. SLPs are trained to provide treatment for all age groups and design treatment plans to meet each patient's specific needs.

Children needing speech therapy should be screened if there are any indications a problem is outside the normal parameters for children of that age group. When questions arise, it's far better to err on the side of caution and schedule a meeting with a speech language pathologist to determine if treatment is indicated.