



# CHILDREN'S SPEECH CARE CENTER

UNDERSTANDING... THINKING... LEARNING... DISCOVERING...

Understanding speech and language impairment

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## Expressive Language Disorder ICD 315.31

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A person with an *expressive language disorder* (as opposed to a mixed receptive/expressive language disorder) understands language better than he/she is able to communicate. In speech-language therapy terms, the person's *receptive language* (understanding of language) is better than his/her *expressive language* (use of language). This type of language disorder is often a component in *developmental language delay* (see section on this disorder). Expressive language disorders can also be *acquired* (occurring as a result of brain damage/injury), as in *aphasia* (see section on aphasia). The developmental type is more common in children, whereas the acquired type is more common in the elderly. An expressive language disorder could occur in a child of normal intelligence, or it could be a component of a condition affecting mental functioning more broadly (i.e. mental retardation, autism).

Children with expressive language delays often do not talk much or often, although they generally understand language addressed to them. For example, a 2 year old may be able to follow 2-step commands, but he/she cannot name body parts. A 4 year old may understand stories read to him/her, but he/she may not be able to describe the story even in a simple narrative. Imaginative play and social uses of language (i.e. manners, conversation) may also be impaired by expressive language limitations, causing difficulty in playing with peers. These are children who may have a lot to say, but are unable to retrieve the words they need. Some children may have no problem in simple expression, but have difficulties retrieving and organizing words and sentences when expressing more complicated thoughts and ideas. This may occur when they are trying to describe, define, or explain information or retell an event or activity.

In school-aged children, expressive language difficulties may be evident in writing as well. These children may have difficulties with spelling, using words correctly, composing sentences, performing written composition, etc. They may express frustration because they recognize that they cannot express the idea they wish to communicate. These children may become withdrawn socially because they cannot use language to relate to peers.



In a more severely affected child, delays may be evident in early milestones. For example, in typically developing children, a vocabulary of first words is emerging between the ages of 10-18 months, two-word phrases are produced around the ages of 18-24 months, with 2-3 word phrases emerging in their second year of life, and around the age of 3 years, children speak in 3-4 word sentences, engage in simple conversation, and begin asking questions in more adult-like ways (i.e. "Can we go?" instead of "Me go?").

In more mildly impaired children, delays may not be evident until school begins. Issues may be seen in academics or in oral expression for more complicated

language tasks. He may begin to have difficulties as schoolwork becomes more difficult (i.e. writing sentences or short stories, summarizing information, answering questions in class). Older children (i.e. middle, high school) face difficulties with the challenges of their more advanced school work (i.e. taking notes, written or oral reports/essays, etc.).

As mentioned in the section on developmental language disorders, these children may act out in school, or in later school years and reject learning completely without help. Also, as mentioned in the section on developmental language disorders, expressive language disorders do not disappear with time. A speech-language pathologist can best diagnose an expressive language disorder. Parents and classroom teachers are in key positions to help in the evaluation as well as in the planning and implementation of treatment. Other professionals involved in assessment and treatment, especially as related to academics, include educational therapists, resource specialists, and tutors.

Several informative links include the following:

<http://speech-language-therapy.com/>

[www.angelfire.com/nj/speechlanguage](http://www.angelfire.com/nj/speechlanguage)

[www.mankato.msus.edu/dept/comdis/kuster2/splang.html](http://www.mankato.msus.edu/dept/comdis/kuster2/splang.html)

[www.asha.org](http://www.asha.org)

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