



LET'S TALK

... FOR PEOPLE WITH SPECIAL COMMUNICATION NEEDS

Verbal Apraxia in Children

The words *verbal apraxia* are difficult to say for most adults. For children with this problem, they are almost impossible.

While learning to speak, all children pronounce some sounds incorrectly. Certain sounds develop later than others (for example, r, th, l). Verbal apraxia is different from common developmental speech errors, which are consistent and predictable.

Verbal apraxia in children (or childhood apraxia of speech) is defined as the inability or difficulty with purposeful voluntary movement for speech. Children with verbal apraxia will have difficulty positioning and sequencing movements of muscles specifically for speech.

Oral Apraxia

Another problem that may (but not always) occur with verbal apraxia is oral apraxia. Oral apraxia involves difficulty with specific volitional production of nonspeech movement of the articulators (blowing, puffing out cheeks, coughing, lip smacking). Children with oral apraxia will have difficulty imitating such movements or producing them on command.

Associated Problems

The child with verbal apraxia also may exhibit problems in fine and gross motor movements. Some children with verbal apraxia will have other language problems, such as difficulty putting words together to express thoughts and ideas, reading, and spelling.

Characteristics of Verbal Apraxia in Children

When a child with verbal apraxia speaks, he or she has difficulty putting the sounds in the correct order. The child may appear to be struggling or groping to get the word out (for example, stopping and starting, facial grimaces). The words may sound distorted.

The following are some of the characteristics of verbal apraxia in children:

- Difficulty initiating speech movements
- Difficulty putting sounds in the correct order
- Struggling-groping behaviors during speech
- Omission of sounds
- More difficulty with longer words and sentences
- Atypical intonation
- Vowel distortions
- Slow rate of speech
- User of fewer sounds in speech

- Inconsistent mistakes (the child can produce the sound sometimes but not others)

If you recognize these symptoms, early intervention is critical. It is important that a child with such speech and/or language problems be evaluated by an ASHA-certified speech-language pathologist.

Parent involvement is important. Parents need to observe treatment sessions and discuss the child's progress with the speech-language pathologist. The speech-language pathologist can provide parents with supplemental exercises and activities to reinforce treatment goals at home.

If you have concerns about your child's speech or language development, please contact an ASHA-certified speech-language pathologist. Go to ASHA's website at www.asha.org for information and referrals or call 800-638-8255.

Compliments of

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and