Conversation

What the Science Tells Us

When we think about our child's language learning, we often think about words and sentences, but they are learning so many other things too. An important one is **conversation**.

Conversation is an aspect of language that takes a very long time to learn, and it is worth the effort. Being a good conversational partner can make social interactions easier.

It is never too early to introduce our child to the art of conversation, whether we are communicating through words or signs. From birth onward we can model *serve and return*. We can observe something our baby is doing (that is the serve) and then describe the serve or respond to it (that is the return).

CAMEL

Treating our child with respect as a conversational partner shows our child that they are important to us. We do this when we:

- Pay attention to them
- Listen when they talk
- Give them enough time to formulate their response to questions (children need more time to start a "conversation turn" than adults do)

During conversations with our child we both learn. They learn about us and what is important to us, our interests and our values, and we learn about them and what is important to them.



In addition, we are modelling good conversational behaviour that our child will be able to use with others.

Each culture has its own norms around what is considered to be good or polite conversation. When we talk with our child we are helping them learn about this too. For example, they are learning how to:

- Start a conversation
- Continue or change a topic
- Notice that someone has not understood us and that we need to explain again
- Let someone know we want the next turn

Children are picking up on all of these cues in our conversations with them, but sometimes they need extra help learning some things.

When our child is old enough to understand, we can gently explain to them how to be a good conversation partner and why it is not polite to interrupt whenever they want to talk.

Recent research shows that there is a significant relationship between the number of early "conversational turns" a child has and their later language skills.

Conversations with responsive caregivers are also the perfect place to hear and practise using language. It is a time when we can notice our child's use of language and their development.

We may observe that one day our child can pronounce a sound or a word well, yet cannot do it a few days later. This is a natural part of language learning and often happens when our child is moving to a new stage of language development, for example when they are starting to say two words together (*two-word utterances*).

We may also notice and wonder why our child is able to pronounce newer words better than old ones. This might be because our child has said the old one incorrectly for a long time. Then again, they may have more difficulty pronouncing a new word than an old one because they have not yet had enough practice saying it. In other words language development is not always a smooth progression (see Appendix E Speech Sound Development).

One area that can cause us concern is *stuttering* or *dysfluencies*. Many children go through a stage where they repeat sounds, words or phrases such as, "b-but I want...," "But – But I want ...," or "But I But I want." Most typically, this is just a sign of their growing vocabulary and enthusiasm to get their words out. The best thing we can do is not draw attention to this and patiently wait for our child to finish what they have to say. However, if our child does three to four repetitions on average or if we notice that their dysfluencies are getting worse, and last over 6 months, it is good to involve a *speech-language pathologist*.

There are two other dysfluencies where an *SLP* can help. One situation is if we notice that our child does *prolongations* or stretches out sounds, such as "I played in the ssssssssand" or "Wwwwwwwwhere are we going, Mama?" Another is if our child "blocks" or has stoppages that look like they are trying to push out a word. They may say, "I want the PACKAGE." The word comes out as an explosion and we can tell by their facial expression that they are making an effort to get the word out. Speech-language pathologists know how to help our child in both of these instances.

Fluency disorders caught early can be supported, but letting them get worse can have a serious social-emotional impact for our child. (see When and How to Seek Help and Appendix E Speech Sound Development).

It is hard to exaggerate the value of engaging in conversations with our child.

In a natural way, **they** learn:

- That they are important to us
- How to be a conversational partner in our culture
- The vocabulary and grammar used in our community

In a natural way, **we** learn:

- More about who our child is and their interests
- To see the world through their eyes
- How they are progressing with language and other development

Conversations give our child a safe environment in which to practise what they have learned. When we help our child feel safe, and unafraid of making mistakes, they can learn and thrive.

DID YOU KNOW?

The amount of language children hear and USE in conversations is directly linked to their ability to manage their emotions and to their communication skills later in life. Daily conversations with your child give them opportunities to practise using their words and sentences.

This develops their skills as a conversation partner.

What You Can Do

You can have conversations with your child anytime and anywhere, from the time they are born, and at any stage of communication.

Conversations are just back-and-forth turn-taking, often called *serve and return*, where your child often takes the lead.

With a pre-intentional child you can respond to something they do that might not even be "communication." •

- Your baby might:
 - Cry, burp or gurgle
- You respond with:
 - · A smile, a comment or by comforting them
- Later, their "turn" or "serve" may be:
 - · A smile, coo, wave of the arms, or kick of the legs
- You respond or "return the serve" with:
 - Smiles, touch and words, signs, using a sing-song voice as described in *infant-directed speech*. (see Infant-directed Speech and Sign Language)

In all of these situations, remember to leave a space for your child to have their turn again. You may need to wait longer than you expect for them to respond (their response might be a sound or an action).



When your child is using gestures, such as pointing: 2

- Their gesture is the "serve" in the conversation
- You "return" the serve by:
 - Naming what you think is the meaning behind their gesture, and then adding on (see Match + 1)
 - "It's a bird. The bird is flying"
 - "You're looking at the bird? (Pause and follow your child's gaze). That bird is flying. I wonder if it's going to sit on a branch? No, it flew away!"

When your child walks up to you, reaching to be picked up: 2

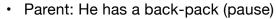
- That is a "serve" or turn
- You can respond by saying:
 - "Up! You want up! Up in Daddy's arms!"

The repetition of key words helps your child link words to their gestures.

When your child is starting to use phrases or early sentences, such as "man on bicycle," you can: 4 5

- Recast the sentence back to them. Naturally model the "correct" way to say it, and then add a new idea to the conversation to keep the conversation going
- You can say to your child, "Yes, the man is on a bicycle." And then add on:
 - Parent: I wonder where that man is going (pause)
 - · Child: "store"
 - Parent: Do you think he is going shopping? (pause)





- Child: "me back-pack"
- Parent: Yes, you do have a back-pack. Do you remember when we put crackers in your back-pack? (pause)
- · Child: nods, "yes"
- Parent: Maybe he is going to the store to buy crackers, and he will ride home with the crackers in his back-pack?" (pause)
- · Child: "me want crackers"

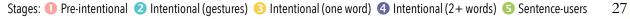
The longer the conversation, the more opportunities your child has to practise and learn. When you pause, as in the above example, you are giving your child their turn. This is a wonderful gift. The research is clear, many "conversation turns" **early in life** help develop language skills that can last a lifetime.

Sometimes it is fun to be silly with language and laugh with your child (not at them, unless you are sure they are trying to be funny).

You can: 0 2 3 4 5

- Add actions and words to your child's movements, gestures, words, phrases or short sentences, using many different words. While it is helpful for children to learn about colours, shapes and numbers, there are **so many other words** you can use to enrich your child's vocabulary
- Your child may say (of their toy monkey with a pretend cup of tea):
 - "Mun-ee turty (monkey is thirsty)"
- You can respond, making slurping noises:





 "Your monkey is thirsty! Look how much it's drinking! Uh-oh your monkey spilled the tea. What a mess! (laughter)" Take a towel and pretend to dry the pretend wet monkey (more laughter)

You are having fun with your child and with language, and teaching them about imaginary play.

You will likely notice that from time to time your child will say something that is different from the way you naturally speak: 4 5

🖔 "He brung it"

Instead of:

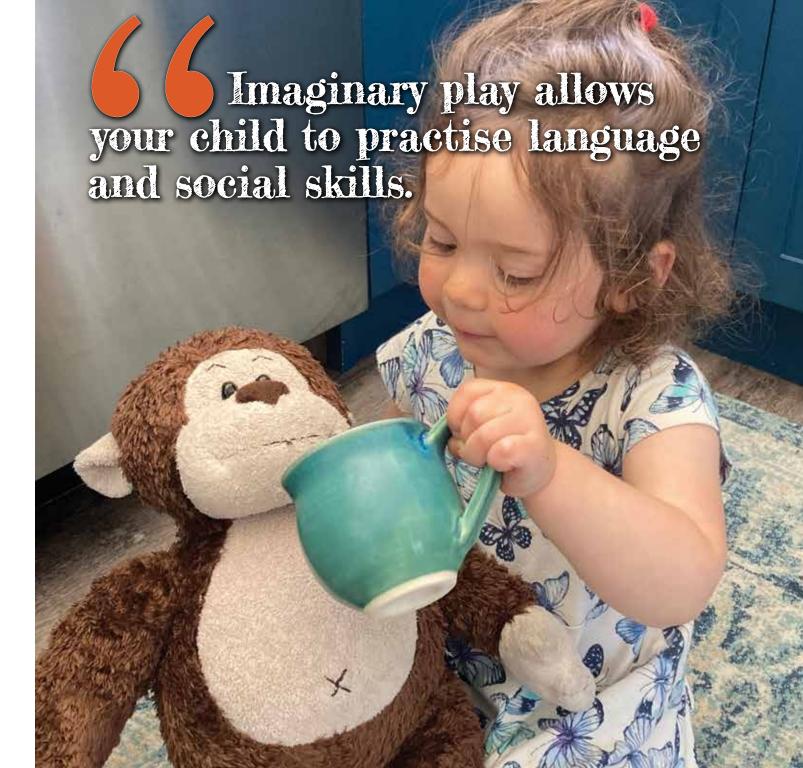
"He brought it"

Don't worry about "correcting" them, just keep the conversation going. You can *recast* their sentence and model the way you speak in your "turn" by saying something like:

* "That's Right! He **brought** it for you"

Another thing you may observe is that your child sometimes *stutters*. A *speech-language pathologist (SLP)* may refer to this as *dysfluencies*. Many children go through a stage where they repeat sounds, words or phrases such as:

- B-but I want...
- But But I want ...
- But I But I want ...
- But I want um I want ...



DID YOU KNOW?

When children are learning language they make *good errors* that show they understand the structure of the language they hear and that is typically used in their community.

Most typically, this is just a sign of their expanding vocabulary and enthusiasm to get their words out, and they will grow out of it. The best thing you can do is:

- Not draw attention to this, or allow any other family members to do so
- Patiently wait for your child to finish what they have to say

However, you may want to seek out an SLP if your child:

- Repeats sounds, words, or phrases more than 3-4 times on average, and does this for over six months
- Does prolongations or stretches out sounds, such as:
 - "I played in the sssssssand" or "Wwwwwwwwhere are we going, Mama?"
- Blocks or has stoppages that look like they are trying to push out a word
 - "I'm going to the ... BEACH" (word comes out as an explosion. Facial expression and/or body show extra effort to get the word out)

If you notice that your child's *stuttering* or *dysfluencies* get worse, this is a good time to have SLP involvement. Fluency disorders caught early can be supported.

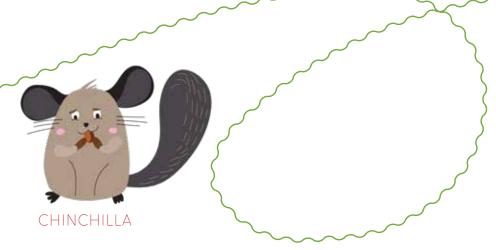
If you notice that your child is *regressing*, that is they have lost the ability to use words, request a referral right away (see When and How to Seek Help).

As your child's language develops, their "turns" will become smoother and more interesting. Listen carefully to what they are saying. It will give you a window into who they are and how they understand the world.

When you listen you:

- Help build the strong relationship between you and your child
- Create a pattern of communicating with your child that:
 - Supports their language development
 - Hopefully, will continue throughout their childhood and teenage years (when they are possibly less enthusiastic about serve and return with you!)

Each day presents many magical face-to-face opportunities for serve-and-return turn-taking (see Face-to-face and Turn-taking). These opportunities are the language building blocks that will help your child have conversations with others as they grow and become adults.



Delay

What the Science Tells Us

Anyone who has observed more than one child in a family already knows that every child is unique. No two kids develop in the same way, not even identical twins! Every child learns and develops a little differently, and all children have different strengths and challenges.

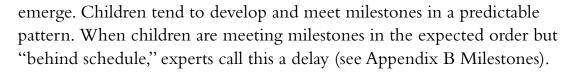
Many things contribute to who our child is. It really is "Nature **and** Nurture." Our child inherits their genetic make-up but this does not fully determine who they are, or will become, as their life experiences influence which genes are expressed and how their brain and body develop. Every time our child learns or does something new it affects their brain. Every relationship they have is unique.

DEER

Nurture is a significant contributing factor and the one we have the most control over. Our job as parents and caregivers is to help our children reach their maximum potential. This means supporting our child to the best of our ability as they develop. It also means paying attention to how they are developing, and noticing if they might need a little extra help.

Not a lot is known about the reasons some children have delays in language development. Fortunately, a lot is known about ways to provide support.

Milestones of typical language development are useful. Language milestones are the general ages at which language experts expect to see certain skills



It can be valuable to know if a child is experiencing some language learning difficulties or has a delay as interventions and treatments can often help.

Some children will learn everything "on time" or earlier than expected, while others may learn skills a little later than other children. Just because a child is a little "late" does not necessarily mean they have a true delay. A true delay will require the input of a professional. However, research shows that when parents are concerned, they are usually right.

We know our child best and if we have doubts about whether our child is meeting their communication milestones, it's best to seek the opinion of a *speech-language pathologist (SLP)*. This is a good time to trust our instincts and have our child evaluated. It gives peace of mind when we learn that either our child is on target or will benefit from the available services. The good news is that when language delays are caught early, many children can catch up. When language delays are missed there can be long-term effects, so the advice from the professionals is, "if in doubt, check it out."

Similarly, if we are concerned about other delays or our child's "obsessive" need for repetition we can consult with a health professional who will be able to reassure us or direct us to the support our child needs (see When and How to Seek Help). Because all children love repetition and need it to learn (see Repetition,) it can be difficult for us to know what is typical and what is atypical repetitive



behaviour. If we are not able to redirect or pull our child's attention away from a repetitive action, movement, play or use of words, that is a good reason to seek out a health professional.

For a long time, at least in North America, people were worried that exposing children to more than one language worsened, or even caused, language problems and delays. But there is no evidence to support this idea. **Exposing a child to more than one language does not cause language delay.**Children with language delays can learn more than one language — they will just be delayed in both, although what the delay looks like can be different for the languages. Learning additional languages can be very beneficial for any child, even those with language delays, as it can connect them to their larger family, help them learn about their family's heritage and culture, or expose them to a new language and culture. Language delay is not a reason to avoid exposing your child to another language.

What You Can Do

You can refer to milestones of language development to see if your child is within the typical ranges. These *milestones* provide the predictable order in which language development takes place. There is a very large range of ages for the acquisition of language milestones and it can be reassuring for parents to know this (see Appendix B).

If your child is meeting the milestones in the expected order but "behind schedule," language experts, such as *speech-language pathologists (SLP)* call this a delay. If you have doubts about whether your child is meeting their communication milestones as they should, it's best to seek the opinion of an SLP.

One of the measures used by experts is the number of words your child can say at different stages of development.

What does an SLP consider to be a "word"?

When SLP's refer to the number of words a child speaks their definition of a word may surprise you. For them, a word is any sound or sign a child uses consistently to refer to the same thing. For a word to "count," it means you must have heard it or seen it used by your child at least a few times to make sure it is being used consistently.

DOLPHIN

Utterances and signals that count as words include:

- Names (mama, Noah)
- Noises that a child makes to refer to objects or animals, such as "choochoo" for **train** or "moomoo" for **cow**
- Word-attempts, or word approximations, that are close but not quite right, for example, "ka" for **cat**
- Word-attempts that do not sound like the word at all, but are used again and again to refer to the same thing, for example, "noo-ee" for **milk**
- Gestures and signs (see Gestures and Sign Language)

Things that are not counted as words include:

- Babbling and vocal play that babies engage in while they are learning to coordinate their muscles for speech
- Jargon, which is a long string of consonant and vowel sounds together, and with sentence-like intonation, that sounds like "nonsense conversation"

If your child has said a word one time, but you have not heard it again, or they have used it again, but in a very different context, this does not count as a word. It may just be a result of babbling

You can count as separate words those words that sound the same but that your child uses to talk about different things.

For example, if your child says "da" to refer to "dad," "that," and "dog," you would count that as three separate words

To learn more about milestones see Appendix B.

Milestones are based on patterns of learning of thousands of children. No milestones are exact, and the age ranges listed are guidelines only.

If your child is missing only one or two milestones, it is likely not a problem.

If they are missing many milestones or if they were meeting them and now seem to be going backwards (*regression*), seek out a referral **right away** for an assessment with a professional.

Similarly, if your child seems to have a very strong *need for repetition* with certain actions, movements, play or use of words, and you have difficulty *redirecting* their attention, or pulling their attention away from the repetition, do seek out a consultation with a health professional.

You may want to request a referral early as there can be a wait list (see When and How to Seek Help).