UNDERSTANDING YOUR DIAGNOSIS

Language Disorder

Also called Language Disorder

Your child has real trouble learning words and building sentences, and the right kind of help can change that.

HOW COMMON	OFTEN STARTS	NOT ABOUT SMARTS	TREATABLE
About 7 in 100 children	Toddler and preschool years	Bright kids have it too	Yes - speech therapy helps

What this is

- A language disorder means learning and using words and sentences is much harder for your child than for other kids their age.
- It is not about how smart your child is. Many children who think and problem solve well still cannot find the words they need.
- This is a difference in how your child's brain built its language system. It is not caused by bad parenting or by laziness.
- Two sides can be affected: getting words out, and taking words in. Trouble understanding is quieter and often missed.

What it can look and feel like

- Your child talked late. There were fewer than **50 words** at age 2, and putting two words together came slowly after that.
- Sentences stay short and simple. Small words like is, the, and was get dropped, and word endings are often left off.
- Your child hunts for words and fills the gaps with thing, stuff, or that one, or simply gives up on the sentence.
- Telling you about their day comes out jumbled. Events arrive out of order and you cannot tell who did what to whom.
- Following directions breaks down. Your child watches other kids or your face for clues instead of using the words.
- Reading comprehension falls behind each school year, even when your child can sound the words out well enough.
- Teens may go quiet, dodge presentations, or act out. This looks like shyness or attitude but it is a language problem.

What is happening in your brain and body

- Language areas on the left side of the brain are wired a little differently, so words and grammar never become automatic.
- Holding a string of sounds in mind is the core weak spot. That is why repeating made-up words is a good test for this.
- Your child's short-term memory for words fills up fast, so a long sentence arrives only half understood.
- So much effort goes into working out the words that little is left over for remembering or answering what was said.
- Ear infections with fluid, being born early, or a low birth weight can add to the difficulty by blurring early sound input.

What can make it more likely

- It runs in families. Brothers and sisters of a child with this are roughly **4 times** more likely to have it themselves.
- Many genes each add a small amount. There is no single gene to test for, and nothing you did brought this on.
- Being born very early, a low birth weight, or repeated ear infections with fluid all add to the chance.
- Speaking two languages at home does not cause it. A true language disorder shows up in both languages, not just one.

What to expect

- This usually does not clear up on its own after age 5, but skills grow steadily with therapy and good support.
- Expect gradual gains. Most programs run about **two sessions a week for 8 to 12 weeks**, then get reviewed and adjusted.
- Reading is the next hurdle, so ask the school to watch reading and spelling closely from kindergarten onward.
- Many adults with this do well at work and in relationships, especially once they can pick tasks that suit their strengths.

What helps

Treatment works. Most people get better.

Talking therapies

- **Speech-language therapy** is the main treatment. It is given one to one or in a small group, usually about twice a week.
- In a session your child plays and talks while the therapist feeds in the target words and sentence shapes over and over.
- **Parent-led therapy** trains you to say your child's words back in a fuller form during play. It works very well in preschool.
- Older children get direct work on vocabulary, telling a story in order, and grammar, plus practice using it in class.
- **Talk therapy** helps with the worry and low confidence that build up over years, but it does not replace speech therapy.

Medicines

- No medicine treats a language disorder. Speech therapy is the treatment, and that is where your effort should go.
- Have hearing tested first, every time. Even mild hearing loss from fluid behind the eardrum can hold language back.
- If your child also has **ADHD**, stimulant medicine can help them focus and get much more out of each therapy session.
- If worry or low mood is blocking school, **antidepressants** plus therapy may help. Dosing is decided with your prescriber.
- Skip supplements, listening programs, and brain training sold for language delay. None of them have been shown to work.

Everyday things that help

- Ask the school in writing for an evaluation. That starts a legal timeline and can lead to an **IEP** with speech services.
- Talk your way through daily routines. Name things, add a few words to what your child says, and give them time to answer.
- Read together every day. Talk about the pictures and ask what might happen next instead of just reading straight through.
- Keep your home language. Children learn best in the language you speak most naturally, and it does no harm at all.
- Cut long directions into short steps. Ask your child to tell you the plan back rather than asking if they understood.

Get help right away if

- Your child talks about dying or hurting themselves. Call or text **988**, or go to the nearest emergency room.
- Your child loses words or skills they clearly already had. Get a medical check right away.
- School refusal, panic every morning, or hopeless talk about themselves. Call your care team this week.

Questions to ask your care team

- *Was my child's hearing tested, and what exactly did the results show?*
- *Is the trouble with getting words out, taking words in, or both?*
- *How many therapy minutes a week will school provide, and who delivers them?*
- *How will we know it is working, and when should we expect a change?*

Where this information comes from

American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). https://doi.org/10.1176/appi.books.9780890425787

American Speech-Language-Hearing Association. (n.d.). *Spoken language disorders* [Practice portal].

Center for Parent Information and Resources. (n.d.). *Individualized Education Program (IEP)*. https://www.parentcenterhub.org/repository/iep/

MedlinePlus. (n.d.). *Language disorders in children*. U.S. National Library of Medicine. https://medlineplus.gov/ency/article/001545.htm

MedlinePlus. (n.d.). *Speech and communication disorders*. U.S. National Library of Medicine. https://medlineplus.gov/speechandcommunicationdisorders.html

National Institute on Deafness and Other Communication Disorders. (n.d.). *Specific language impairment*. U.S. Department of Health and Human Services. https://www.nidcd.nih.gov/health/specific-language-impairment

NOTE

Sources are listed in APA 7th edition style. This handout is general health information, not medical advice, and it does not replace talking with your own doctor, therapist, or prescriber. Medicine choices and doses are decided with your prescriber. If you are in danger or thinking about hurting yourself, call or text 988 in the United States, or go to your nearest emergency room.