

# The role of a speech pathologist

This article diverts away from MJ's usual approach. Instead of writing an article based on this topic, questions were asked to a qualified speech pathologist and are being shared below.

NOTE: The answers to the following questions were kindly provided by speech pathologist Lucy Murphy. She has kindly given permission to share them with MJ's wider community to help parents, carers and anyone who is contact with children to understand the role of a speech pathologist and what they do to support children. In recognition of Lucy's contribution, her details are below.

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## 1. What does a Speech Therapist do?

Speech pathologists work with people of all ages who have communication and/or swallowing difficulties.

Speech pathologists can help children with many areas of their communication including speech, language, early literacy, feeding/swallowing, stuttering, voice and multilingual development.

## 2. At what point might a child need to see a speech therapist?

Speech Pathologists see people from birth age 0- 100+ years old. If a health professional, parent, caregiver or educator identifies that a child may not be meeting developmental or communication milestones it is appropriate to request for an early referral to a speech pathologist.

## 3. What are the advantages of seeing a speech therapist?

- A University trained Professional for qualified input for your child that is personalized to their needs (not a solution that can be found on Google!)
- Intervention that is evidence based and researched so that your child receives the best supports from an early age and in some cases potentially reducing the risk of ongoing language or literacy issues at school.
- A safe and confidential environment for a parent to discuss their concerns or ask questions about their child's development without any judgement or blame.
- A key support professional to work together with parents to achieve the best outcomes for speech, language, literacy and/or social skills in children.

## 4. What outcomes might result if a child does not see a speech therapist early?

It is imperative that parents and caregivers don't take the "wait and see" approach with addressing a child's communication concerns.

Delayed intervention can lead to isolation and behavioural issues. In addition to this, a child left without intervention may have ongoing problems with developing language, literacy, social relationships and mental health. It may also delay the opportunity for the child to receive the correct supports in a childcare facility or at school. Depending on the child's presenting condition, supports may include government funding in the community or in an educational facility.

Supportive early intervention targeting the correct goals can maximize a child's success in establishing social relationships and confidence with communication for life!

Don't delay! See a speechie today! 😊

## 5. What types of behaviors might indicate a child needs to see a speech therapist?

If parents, caregivers or educators notice any of the following please consider early referral to a speech pathologist.

### ***Delayed Speech & Language***

If your child is not meeting speech and language milestones within the expected time frame, such as babbling by 12 months, saying single words by 18 months, or using simple sentences by 24 months, it could be an indicator of a speech delay.

### ***Difficulty Understanding***

Trouble comprehending and following age-appropriate instructions may suggest a receptive language disorder. For example, your child might struggle telling the difference between basic concepts like “in,” “on,” or “under” or not respond appropriately to simple commands.

### ***Limited Vocabulary***

When a child’s vocabulary significantly lags behind that of their peers and they struggle with the acquisition of new words over time, it may indicate a language delay or disorder.

### ***Articulation Issues***

Persistent difficulties in producing speech sounds or pronounced speech errors beyond the expected age range may point to an articulation disorder. For instance, if your child struggles with certain sounds or consistently replaces one sound with another.

### ***Stuttering***

If your child experiences repeated disruptions in their speech flow, such as repetitions of sounds, syllables, or words, prolonged sounds, or blocks where they struggle to produce a sound.

### ***Lack of Social Communication Skills***

Difficulty in engaging in age-appropriate social interactions, like maintaining eye contact, taking turns during conversations, or understanding nonverbal cues such as facial expressions or body language, might indicate a social communication disorder.

### ***Persistent Hoarseness or Voice Problem***

Should your child frequently experience hoarseness, vocal strain, or exhibit unusual vocal quality, it may be a sign of a voice disorder that requires assessment and intervention from a speech pathologist.

REMEMBER: It’s better to have your child screened early if you’re not sure rather than leave it until later where developmental opportunities have passed!

## **6. What milestones are considered developmentally typical for the following age groups?**

There are downloadable posters here on communication milestones:

<https://www.speechpathologyaustralia.org.au/Public/Public/Comm-swallow/Speech-development/Communication-milestones.aspx?hkey=7debc110-9805-4eb6-ab63-db1fd0a97aaf>

There’s also a A3 size poster that summarizes all ages. But each poster can be printed in A4 for individual ages.

- 6mths
- 12mths
- 18mths
- 2 years
- 3 years
- 4 years
- 5 years

## **7. What things help to contribute to speech and language development for example does eating solid foods support speech development?**

There are a lot of factors that contribute to speech and language development in children.

From an early age, letting a child explore foods with a variety of safe textures supports the development of muscles of the face, mouth, jaw and throat.

For example, allowing an infant or child to try and lick their lips when they feel the sensation of food left around their mouth promotes range of movement of the muscles of speech production (lips, tongue, jaw, throat). Messy mealtimes are the ultimate opportunity for promoting oral movements! It's tempting though to grab a wipe quickly and clean up the mess for our little ones! Resist the temptation if you can!

From a language development point of view the most valuable gift you can give a child at any age is....

Drum roll please...

**TALKING and READING together!**

We live in the age of technology being part of our everyday lives. Whilst this has made life easier in some aspects, it also means that our attention as caregivers is more often on a smartphone or tablet instead of face to face with our children.

Encourage "screen free" dinner or outdoor play where you can connect with your children and expose them to verbal language, vocabulary and social connection.

Children learn from their environment and how people around them interact is crucial in their communication development.

### **8. Does thumb sucking and or using dummies affect children speech and if so, is there a recommended age that children stop these things?**

**There's 2 aspects to this question. Dental and Speech.**

Thumb sucking, or the use of a dummy by a baby, is little cause for concern before permanent teeth appear. If the habit persists after permanent teeth appear, the thumb and dummy may force the teeth and jaw out of alignment. This may then need correction by a dental specialist. Source: QLD Health website.

Dr. Elise Baker (Speech Pathologist from the University of Sydney) has completed research into dummy use and speech problems.

"There is a misconception that dummies impact children's opportunities to learn or practise speech, however our study shows no connection between dummy use in the early years and the presence or severity of the most common type of childhood speech problem".

Dr. Baker admits dummies are contentious, with research suggesting both pros and cons to their use. "Dummies may have benefits such as helping premature babies develop sucking skills, reducing pain during medical procedures, reduced risk of developing allergies and possibly even reduce SIDS risk."

"On the flip side they have also been associated with gastrointestinal infections, more ear infections, incorrect bite, bowel obstruction and reduced breast-feeding duration among other issues" (University of Sydney, 2018).

### **9. What activities could be done at home to support speech and language development?**

Talking face to face with your child. Engaging with full attention on everyday routines and using language to explain routine tasks.

Singing familiar songs 🎵🎶

Playing fun games in the car like "spot it!" Or "Something beginning with..."

Playing with your child and talking to them about what they are doing.

Reading to your child every day.

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