## PREVALENCE

- 3-10\% of children
- $3-4 x$ more common in boys than girls


## RISK FACTORS

- Primary hearing deficit
- Secondary hearing deficit (e.g., recurrent acute otitis media, otitis media with effusion)
- Craniofacial abnormality
- Prematurity
- Low birthweight
- Family history
- Multi-lingual environment is not associated with speech/language delay


## ASSOCIATED CONDITIONS

- Autism spectrum disorder
- Cerebral palsy
- Hearing loss
- Intellectual disability


## MANAGEMENT

Refer to speech language pathologist \& audiologist ASAP
$\square$ Caregiver support for child's language development
$\square$ Maintain eye contact with child
Encourage child to focus on caregivers articulating different sounds
$\square$ Encourage child to vocalize their request, as opposed to anticipating their need and offering proactively

## IMPORTANT

- If delay is not properly addressed,
- Higher risk for learning disability
- Difficulty in reading and writing
- Difficulty in school
- Timely intervention is key


## DIAGNOSIS

Failure to meet age-appropriate milestones

| SPEECH | LANGUAGE |
| :---: | :---: |
| - Delay in development of sound production <br> Example <br> - Stuttering <br> - Articulation challenges | - Delay in development or use of language <br> Example <br> - Expressive language delay <br> - Receptive language delay <br> - Difficulty with grammar or vocabulary |

## Milestones

| Age | Speech / Language |
| :---: | :--- |
| 6 mo | Responds to voice <br> Babbles |

1 yo

2 yo

3 yo

4 yo

- 12 mo : not turning to names or words
- 15 mo : no single words

