

SPECIFIC LANGUAGE IMPAIRMENT (SLI) OR DEVELOPMENTAL LANGUAGE DISORDER (DLD)



- **Definition**

The Specific Language Impairment (SLI), also called Developmental Language Disorder (DLD) and formerly Dysphasia, consists of an alteration or delay in the receptive and/or expressive development of oral language. It affects both the acquisition and development of these since its beginning, manifesting significant difficulties and cognitive, communicative and social consequences. In addition, SLI is manifested without the presence of neurological deterioration, sensory or motor deficits, psychopathological or socioemotional difficulties and brain injuries or dysfunctions.

The prevalence of SLI is between 2% and 7% in the child population, being more frequent in boys. To talk about SLI, there has to be an alteration that interferes with the daily life of the subject, either in social development, interpersonal relationships and/or school development and academic learning.

The specific language impairment (SLI) is shown in a very diverse and heterogeneous way, since it does not affect in any case the different components of language (phonetics and phonology, morphology and syntax, lexicon and semantics and/or pragmatics) in the same way or with the same intensity. Thus, all subjects with SLI present different degrees of affectation, since this can do it in different intensity in each component, as well as it can affect all, some or only one of the language components. Therefore, SLI has a heterogeneous character, as heterogeneous are the people that present it. Finally, it is important to emphasize that this fact makes it difficult to detect and establish clear and specific diagnostic criterion.



- **Detection and intervention**

In the case of SLI, early detection and early intervention is important.

On the one hand, and in terms of detection, we must know that this sometimes becomes difficult, since it is difficult to establish clear and specific diagnostic criterion or simply because the symptoms can merge and be confused with those of other developmental disorders (such as dyslexia, attention deficit disorder with and without hyperactivity...). Therefore, a period of evolution is necessary in order to confirm the diagnoses. Thus, the problem usually begins to be clearly seen around 24-30 months, when language does not appear or does not evolve as it should. In this way, when carrying out an evaluation and a diagnosis, it is necessary that skilled professionals in this type of alterations perform them.



On the other hand, and in terms of intervention, this has to be carried out prematurely, intensively and over time. In addition, it also has to be planned and specified by skilled professionals (speech therapists), who must start from the difficulties presented by the subject and base the intervention on adequate assistance to alleviate the difficulties, obtain improvements and avoid the

appearance of consequences, such as difficulties of integration and social relationship, school failure...

Even so, and as we have seen, many times there is a difficulty in detecting SLI. Therefore, it is important to know that the intervention can be performed when there are the presence of symptoms or warning signs (lag in language development, absence of verbal expression, speech errors...), even if the diagnosis is not definitive, with the purpose of guarantee the attention and help that person needs.

The involvement of the family and school is also necessary in the intervention. On the one hand, parents need information, guidelines and guidance about the person with SLI (they need to reinforce their progress, stimulate and strengthen their abilities, give them autonomy...) in order to progress in the intervention. On the other hand, schools require specialized professionals (hearing and language teachers, therapeutic pedagogy teachers...) and adequate materials to provide adequate intervention and assistance, in which educational needs are looked after and the established objectives can be achieved. Thus, a personalized planning of the teaching-learning process of the student will be necessary, as well as the methodology, the evaluation process...

The final objective of the intervention in these people is to alleviate their needs so that they acquire a degree of linguistic competence that allows communication, socialization, learning and personal and emotional development.

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