

Receptive language disorder

Receptive language disorder means the child has difficulties with understanding what is said to them. The symptoms vary between individuals but, generally, problems with language comprehension usually begin before the age of four years.

Children need to understand language before they can use language effectively. In most cases, the child with a receptive language problem also has an expressive language disorder, which means they have trouble using spoken language.

It is estimated that between three and five per cent of children have a receptive or expressive language disorder, or a mixture of both. Other names for receptive language disorder include central auditory processing disorder and comprehension deficit. Treatment options include speech-language therapy.

Symptoms

There is no standard set of symptoms that indicates receptive language disorder, since it varies from one child to the next. However, symptoms may include:

- Not seeming to listen when they are spoken to
- Lack of interest when story books are read to them
- Inability to understand complicated sentences
- Inability to follow verbal instructions
- Parroting words or phrases (echolalia)
- Language skills below the expected level for their age.

The cause is unexplained in most cases

The cause of receptive language disorder is often unknown, but is thought to consist of a number of factors working in combination, such as the child's genetic susceptibility, the child's exposure to language, and their general developmental and cognitive (thought and understanding) abilities. Receptive language disorder is often associated with developmental disorders such as autism. In other cases, receptive language disorder is caused by brain injury such as trauma, tumour or disease.

The process of understanding spoken language

Understanding spoken language is a complicated process. The child may have problems with one or more of the following skills:

- **Hearing** - a hearing loss can be the cause of language problems.
- **Vision** - understanding language involves visual cues, such as facial expression and gestures. A child with vision loss won't have these additional cues, and may experience language problems.
- **Attention** - the child's ability to pay attention and concentrate on what's being said may be impaired.
- **Speech sounds** - there may be problems distinguishing between similar speech sounds.
- **Memory** - the brain has to remember all the words in a sentence in order to make sense of what has been said. The child may have difficulties with remembering the string of sounds that make up a sentence.
- **Word and grammar knowledge** - the child may not understand the meaning of words or sentence structure.
- **Word processing** - the child may have problems with processing or understanding what has been said to them.

Diagnosis methods

Assessment needs to pinpoint the child's particular areas of difficulty, especially when they do not respond to spoken language. Diagnosis may include:

- Hearing tests by an audiologist to make sure the language problems aren't caused by hearing loss and to establish whether or not the child is able to pay attention to sound and language (auditory processing assessment).
- Testing the child's comprehension (by a speech pathologist) and comparing the results to the expected skill level for the child's age. If the child is from a non-English speaking home, assessment of comprehension should be performed in their first language as well as in English, using culturally appropriate materials.
- Close observation of the child in a variety of different settings while they interact with a range of people.
- Assessment by a neuropsychologist to help identify any associated cognitive problems.
- Vision tests to check for vision loss.

Treatment options

The child's progress depends on a range of individual factors, such as whether or not brain injury is present. Treatment options can include:

- Speech-language therapy
- One-on-one therapy as well as group therapy, depending on the needs of the child
- Special education classes at school
- Integration support at preschool or school in cases of severe difficulty
- Referral to a mental health service for treatment (if there are also significant behavioural problems).

Symptoms of expressive language disorder

A child with receptive language disorder may also have expressive language disorder, which means they have difficulties with using spoken language. Symptoms differ from one child to the next, but can include:

- Frequently grasping for the right word
- Using the wrong words in speech
- Making grammatical mistakes
- Relying on short, simple sentence construction
- Relying on stock standard phrases
- Inability to 'come to the point' of what they're trying to say
- Problems with retelling a story or relaying information
- Inability to start or hold a conversation.

Where to get help

- Your doctor
- Child health nurse
- Speech pathologist
- Speech Pathology Australia Tel. (03) 9642 4899

Things to remember

- Receptive language disorder means the child has difficulties with understanding what is said to them.
- The cause of receptive language disorder is unknown, but is thought to consist of a number of factors working in combination. Treatment options include speech-language therapy.

This page has been produced in consultation with, and approved by:

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