What are the main features of children’s language development?

Children face an immense task in developing language, from learning thousands of words and their meanings to mastering the rules of grammar. This essay will explore some of the main theories relating to children’s language development. Only children unaffected by physical or mental impairments will be discussed.

de Villiers and de Villiers (2013) suggest that in learning language, the majority of children pass through the same key developmental stages, including pre-speech babbling and early social interaction. However, Nelson (2013) points out despite these similarities, individual children often vary considerably in their language development. Both authors concur that basic grammar is not acquired until a later stage.

An observational study by Clark and Clark (2014) confirmed that the development of children’s language begins soon after birth before accurate word sounds are produced. From around the age of four months babies start babbling, producing the first sounds similar to speech. Babbling is a series of consonants and vowels vocalised together and often repeated. Clark and Clark (2014) believe that the function of babbling is to allow the baby to gain control of the articulatory tract in preparation for speech. On the other hand, Bloom (2012) suggests that these sounds may be essential for the bonding process with significant adults in the infant’s environment. Both theories may hold an element of truth.

The next stage in a child’s language development is thought to be the production of their first words, which generally occurs between ten and fifteen months. Nelson (2013) reports that a baby’s first ten words tend to include the names of people close to the child, the names of animals and toys, although there are considerable differences from child to child. Awareness of these variations is important for paediatric nurses who must assess whether or not appropriate developmental milestones have been reached. A child beginning to speak tends to slowly increase their
vocabulary until they can say around fifty words. Carey (2012) suggests that from this stage a child’s vocabulary should expand considerably, with around ten new words being added every day. In a survey of the language acquisition of 64 infants, Nelson (2013) was able to identify six children with a hearing impairment. This finding supports the value of regular screening of children’s vocabulary.

A small study by Slobin (2014) showed that the development of language followed cognitive development. He observed that although children from eighteen months use their imagination to pretend items and people are something else, expressing these ideas in language comes much later. This is true regardless of the language they are speaking. For example, in the Russian language, hypotheticals are grammatically simple yet they occur in language at the same developmental stage as English-speaking children.

Braine (2011) suggests that syntactical order is also a significant factor in the monitoring of children’s speech. As children’s vocabulary increases, they begin to combine these words to make sentences. Initially, sentences are made up of two words only and show early grammar awareness in their syntactical order; for example, it is more common for a child to say ‘throw ball’ than ‘ball throw’. These first sentences commonly contain content words (nouns and verbs) without function words, such as ‘the’. Cromer (2011) argues that paediatric nurses should be aware of the steps in this process so that they can increase their diagnostic skills not only for detecting hearing loss but also abnormalities of cognitive development. He believes that early diagnosis can lead to swifter access to treatment and better results in the long term for the children who need extra assistance. On the other hand, Khan (2014) points out that the poor availability of resources to fund that support may result in young children being disadvantaged despite health care professionals’ best efforts.

In summary, the development of children’s language occurs through a number of stages, from social interaction allowing children to learn social
features of languages, to the learning of vocabulary and grammar and the recognition of language as a tool entirely free from its meanings. From briefly reviewing these events, questions arise as to areas for further study: exactly how do children come to learn language? Can it be argued that understanding and cognitive development does not precede language? The further study of children’s language may help in the understanding of children’s cognitive development, which may, in turn, help both able and disabled children and their teachers or carers and may ensure children reach their full potential.

References


