



Is It Childhood Apraxia of Speech or a Phonological Disorder?

According to ASHA, there is presently no validated list of diagnostic features of childhood apraxia of speech (CAS) that differentiates this symptom complex from other types of childhood speech sound disorders, including those primarily due to phonological-level delay. However, here are some general observations on how the child with CAS differs from the child with a phonological disorder (Strode & Chamberlain, 2006).

The child with CAS tends to:

- Have a unique early communication history (e.g., reduced babbling)
- Display a severe speech disorder with inefficiency in sequencing and blending sounds and syllables
- Demonstrate difficulty with increased performance load effects (i.e., the child may lose intelligibility in connected speech)
- Demonstrate inconsistency of productions
- Demonstrate more errors or changes in errors when producing the same word multiple times
- Make greater use of phonetic adjustments, such as voicing errors and nasal resonance errors
- Demonstrate speech performance that may differ from day to day or from situation to situation
- Demonstrate oral apraxia accompanying the speech disorder (Note: Many children with CAS do not have oral apraxia.)
- Demonstrate motor incoordination, awkwardness, and/or groping in the speech mechanism during speech, especially when speech programming demands are increased
- Demonstrate prosodic disturbances, such as difficulty with rate, intonation, or syllable stress
- Demonstrate a significant gap between receptive and expressive skills with near normal receptive skills at younger ages
- Make slow progress in therapy with plateaus in progress
- Demonstrate frustration about his ability to communicate
- Not necessarily follow phonological rules of development (e.g., some children may be able to produce the /l/ sound before they are able to say bilabial sounds)
- Have significant difficulty imitating speech when given auditory-visual cues alone. Children with verbal apraxia need a higher level of cueing (including multisensory cues) than children with a phonological disorder.
- Have more difficulty in stabilizing speech productions and need much more drill than children with phonological disorders



American Speech-Language-Hearing Association. (2007). *Childhood Apraxia of Speech* [Position Statement]. Available from www.asha.org/policy

Strode, R.M., & Chamberlain, C.E. (2006). *The source for childhood apraxia of speech*. East Moline, IL: LinguiSystems, Inc.

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