International Journal of Social Sciences and Humanities
Available online at www.sciencescholar.us
Vol. 6 No. 2, August 2022, pages: 142-150
e-ISSN: 2550-7001, p-ISSN: 2550-701X
https://doi.org/10.53730/ijssh.v6n2.10322

Oral Language Difficulties in Patients Aged 4 to 7 Years at the Chone Type C Health Center

Gema Katherine Cobeña-Morante [a], **Hilda Cruz Bran-Cepeda** [b]

Manuscript submitted: 18 April 2022, Manuscript revised: 09 May 2022, Accepted for publication: 27 June 2022

Corresponding Author [a]

Keywords

emotional;
language disorder;
language therapy;
oral expression;
patients;

Abstract

The latest research shows the importance of early care in children who have difficulties in oral language, this condition has consequences, their socio-emotional development is also affected. of them, causing a negative impact on their relationship with society. The objective is to determine the causes that generate disorders in the use of oral language in patients 4 to 7 years of the Chone Type ¨C¨ Health Center. A sample of 25 patients was taken, 18 boys and 7 girls, who attend this medical unit in search of treatment for their language problem, different factors were analyzed, from the mother's gestation phase, neonatal stage and early childhood correlating them with the development of cognitive ability according to their age. The research has a qualitative approach, in addition the inductive and descriptive method was used. The applied technique was a test that contains a series of oral questions, visual and playful activities to verify the skills and abilities that the patient possesses, according to the evolutionary stage. It was found that children with language disorders also experience social, emotional and interaction problems with other people. According to the results obtained, it is vitally important that patients go to specialized professionals so that they can offer personalized attention that is relevant to their educational needs.

Contents

[a] Maestría en educación básica, Universidad Laica "Eloy Alfaro de Manabí" Extensión Chone, Manabí, Ecuador
[b] Universidad Laica "Eloy Alfaro de Manabí" Extensión Chone, Manabí, Ecuador

1 Introduction

This research seeks to analyze the difficulties in oral expression presented by children aged 4 to 7 years as patients of the Chone Type C Health Center and, at the same time, systematize the results obtained considering a series of factors that affect directly and indirectly in this problem. Taking into account that it is a frequent pathology, with 5 to 8% in preschool children and 4% in schoolchildren, which alter the child's ability to communicate with their parents and society. Verbal fluency is a task of executive functions and involves semantics, lexicon, syntax and phonetics. It consists of the ability to know its meaning to create, produce, express, relate words and ideas.

Worldwide, the difficulties of oral language in the school stage constitute a problem of adaptation to the school and social environment, which must be faced by close relatives and respected by society (Martínez et al., 2019). Due to the lack of interest and lack of knowledge, it has been detected that there is misinformation or lack of motivation on the part of the authorities to adopt methodological strategies that use practical technologies, contributing to the knowledge of children and the opening of their abilities (Díaz et al., 2018). Obviously, this problem is not foreign to Latin American countries, there is extensive literature on the matter. In Colombia, the Ministry of Education, based on established standards, applies tests to students in third, ninth and eleventh grades to assess communication skills that have implicit thinking skills that in turn lead to the use of oral language appropriately. to describe, identify, compare, propose ideas and arguments that demonstrate their development (Vargas Lazo & Vasquez Chiroque 2021).

In Chile, the vision established in the Curriculum Bases document issued by the Ministry of Education declares the holistic approach in the language teaching process and assumes the complexity that this implies, and at the same time manifests the existing disconnection with the lack of guidance to teachers that facilitate the understanding of how to develop oral skills in children (Marder & De Mier, 2018). In Ecuador, language difficulties in young children have become a recurrent problem, which causes them to have problems in learning other areas of knowledge and in the linguistic expressions that they use in their daily lives, which means that specialists such as doctors, teachers, psychopedagogues, therapists, among others, are increasingly attentive to these cases to provide immediate help in order to provide guidance towards the permanent improvement of the academic level of infants (Villa, 2021).

This problem is also evident in the Province of Manabí, in the specific case of the Type C Public Health Center, located 300 meters from the Chone Canton Terrestrial Terminal, where there is a language therapy area that serves male and female people of different ages. This population is mainly made up of boys and girls between 4 and 7 years old who present difficulties in the development of their orality, the most representative being disorders in the articulation of sounds that affects an adequate pronunciation of words, this causes them to omit , substitute or distort phonemes when expressing their ideas (Tapia et al., 2020).

According to (Lenneberg, 1982), they indicate that language difficulties are considered as the cognitive and social process by which human beings acquire the ability to communicate verbally using a natural language; As for the research by López et al. (2008), it describes that language has a social origin, which directly involves the development of people, being used effectively and apparently effortlessly. Children are faced with the task of acquiring language, since they must be well equipped with a set of basic concepts that they have been forming through their non-linguistic interactions with the world, therefore, the child he must learn to translate or reproduce from one representational system to another in order to express his concepts in the mother tongue.

According to the theory of the stages of cognitive development, thinking does not appear; but until when the symbolic function begins to develop, although there are action schemes, which will be the basis for later language learning. Likewise, Vygotsky's theory indicates that thought patterns are not due to innate factors, but are the product of cultural institutions and social activities, which influence the acquisition of intellectual abilities (Mayer & Salovey, 1993; Lukman et al., 2016).

Language appears at a time of transition between intelligence and that which will develop in the preoperative period Bonilla et al. (2013), thanks to the benefits of sensory-motor logic and symbolic function, from their point of view, it is not fortuitous, but rather it would indicate that the formation of the symbolic function that is a derivative of the intelligence of the sensory-motor period and that would be what finally allows the acquisition of language, arguing the process of cerebral maturation applying certain neuronal circuits that make language possible.

Disorders or alterations in oral language are a disturbance that significantly hinders its structure, since it affects a better expression of ideas when sharing them with others, causing problems in social interaction. There are linguistic codes that children use to stimulate, orient and guide themselves in the process of acquisition and development of oral language that are not uniform in this case parents do not have adequate knowledge to train their children in an integral way in the areas of development linguistic (Rueda & Ordoñez, 2019).

All these skills are acquired throughout the growth of boys and girls, but we can always help them to make that precision greater or stabilize as soon as possible, for example for the development of auditory discrimination. It works through facial lip reading to stimulate the articulation of phonemes or graphemes. In this process it is also important to strengthen attention and concentration through recreational activities that consider environmental, psychological and intellectual factors. For this reason, the objective is to determine the oral difficulty in the use of language in patients of the Chone Type ¨C¨ Health Center. Difficulties in the proper development of oral language are becoming more and more common in infants, which explains the need to analyze, reflect and propose various options to counteract the incidence of this problem in the development of cognitive and socio-affective skills (Sarama et al., 2012; Nicolopoulou et al., 2015; Mantra et al., 2016).

2 Materials and Methods

The type of descriptive research includes the recording, analysis and interpretation of the current nature and the composition or processes of the phenomena Tamayo (2006). This research is field research because it allows obtaining information in the field of socio-educational reality, identifying needs and problems in order to describe them, interpret them, and understand the nature of their constituent factors. This research has a quantitative approach, since it corresponds to the criteria of the variables, it is also subject to a statistical process that will help us accept or reject the hypothesis, according to Sampieri (2014), the quantitative approach is based on a deductive and logical scheme that seeks to formulate research questions, and hypotheses to later test them, in this case the oral language difficulty. The study population was 25 patients from the speech therapy area of the Chone Type ´´C´´ Health Center.

3 Results and Discussions

The results of this article are part of an investigation designed to identify and analyze the difficulties in oral language, for the analysis the results of the tests applied to the 25 boys and girls, of the institution that will be analyzed through a descriptive study.

Oral

difficulty Oral language difficulties is a disturbance that permanently and significantly hinders the structure of oral language, in a boy or girl in their evolutionary development of the linguistic stage and whose cause is influenced in academic and social performance, generating insecurity when expressing and developing in the school stage. This is how in the act of reading, it is necessary for the boy and girl to have acquired oral language (Calderon-Astorga, 2004), they provide the initial tools for integration into the social environment that discover the world and integrate; first with their family environment and then with the society where they will carry out various activities in the course of their lives, while (Galvez Hidalgo, 2014), describes language as something innate of the human being. Every person acquires knowledge of their language, where

the system of rules is very rich and complexly articulated, which the speaker dominates. Also. (Flores-Ojeda, 2007), has characteristics of each boy and girl there are some significant factors that allow understanding the development of language that affect the learning of reading and writing, related to the different media in which they operate, in the family, social, and school environment.

Use of language

According to the author (Ansaldo et al., 2008), it involves developing our ability to listen to understand what others tell us. You often hear about good readers, great speakers, and great writers; however, very rarely, if ever, have you heard of a good listener. Indeed, language constitutes the way of representing reality and of communicating, this way of conceiving language has allowed it to be thought of from various approaches as a system that has made it possible to understand the communicative structure and precisely in this plenary session where the reflection of the present is focused. work since they interpret all the normative contents in its development. Language can also be understood as a code in which each of the elements of communication interact and interact with each other to generate the information that is expected to be transmitted (Guevara, 2016). It should be remembered that the main objective of the research was to determine the difficulties in oral language in patients, to establish the correct use of language. Table 1 shows the ages of the 25 patients and their percentage.

Table 1
Ages of the patients studied

Sample	Ages	Percentage (%)
10	4 years	40
7	5 years	28
4	6 years	16
4	7 years	16

The purpose is to observe the characteristics of oral language in a group of patients of the Chone Type "C" Health Center that are treated in the language therapy area, made up of 25 boys and girls from 4 to 7 years old. The selection was random. We sought to determine the incidence of a medical diagnosis that may be related to the speech disorder, the type of feeding during the neonatal stage, and the interaction with the patient through the application of tests that provide the required information, in figure 1, the appropriate moments are shown to establish the causes of disorders in oral language.

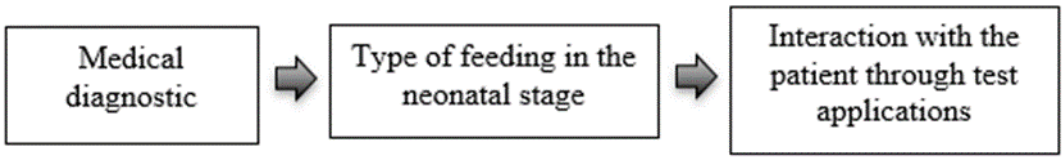


Figure 1. Moments to establish the causes of oral language disorders

According to various documents, the World Health Organization (WHO) delays in the development of oral language can cause slowness and delay in academic progress of students, as well as certain chronic health problems, complications in pregnancy and childbirth, psychological situations that can be generated in the family context. A first step is taken through the patient's treating doctor who issues a probable diagnosis that constitutes the origin or one of the causes of the affectation in the development of orality. It is investigated from health problems in the pregnancy of the mother of the little patient, taking into account situations such as threatened abortion, preeclampsia, consumption of inappropriate medicines or substances for this stage, among others (Durham et al., 2007; Mohammed et al., 2021; Tallal et al., 1985).

The health professional issues a report addressed to the speech therapy department. In this dependency, the process continues through an interview with the mother or family member to determine relevant aspects

such as the type of feeding that the boy or girl had in their neonatal stage, being vital to identify if the patient consumed breast milk, formula or what alterations At the same time, the language therapist inquired about what help or guidance the parents or relatives sought for the patient to overcome the difficulties in oral language. Another fundamental action is the interaction between the therapist and the boy or girl through the application of several tests that seek to determine the knowledge they have in relation to their family environment and at the same time detect the level of phonetic articulation in oral expression.

To collect the required information, techniques such as observation, knowledge test, verbal articulation and object recognition were applied; A survey was also applied to the mother, father or relative close to the patient that contains questions about the performance of their representatives in relation to linguistic expression and the coordination of ideas to form sentences. For the moment of interaction with the boys and girls, playful materials were used: balls, colored cubes, toys, puzzles, among others to observe the behavior, the oral expression that is revealed and thus arrive at determining the difficulties in the language can present this population. In the case of the table related to the medical diagnosis of the children, related to disorders or disabilities, the response proposals are shown in Table 2.

Table 2
Medical diagnosis of the children evaluated

Alternatives	Frequency	Percentage (%)
Autism	1	4
Cerebral palsy (CP)	2	8
Dysarthria	1	4
West syndrome	1	4
Hearing loss	1	4
Speech disorder	17	68
Mental retardation	1	4
Learning disorder	1	4

In the last decade, several investigations have been carried out that analyze the relationship that exists between the state of pre and post natal health and its incidence in the linguistic activity of people. In the same sense, this research analyzes the result of the diagnosis issued by the doctor of the Health Center, so that of the 25 boys and girls evaluated, 17 of them, which corresponds to 68%, present speech disorders as the main difficulty; 2 patients, equivalent to 8%, have infantile cerebral palsy; while the remaining 6 patients, representing 24%, have educational needs such as autism, dysarthria, West syndrome, hearing loss, mental retardation, and learning disorders. At the same time, it is determined that 46% of these patients have health problems derived from pregnancy, such as socio-emotional affectations (falls, abuse, frights), threatened abortion, preeclampsia, and seizures (Shewan & Kertesz, 1984; Dickinson & Snow, 1987; Gopnik & Crago, 1991).

Considering that the type of food that every baby should receive from the first day of birth is essential for their future growth and cognitive development, the mothers were asked about the food provided to these 25 children, with the result that 48% of mothers fed their children with breast milk: 20% with formula milk and 32% with both. The patients were asked about the interaction with the professional in recognition questions, the results of the answers given by the patients can be seen in Table 3.

Table 3
Interaction with the patient through the test

Alternatives	Yes Know	Not Know	Not Want To Talk	Disability Prevents Him From Answering Totally	Total
's your name?	18	0	6	1	25
What are your parents' names?	18	0	6	1	25

Where do you live?	13	0	6	6	25
Is this a cup?	18	0	6	1	25
Is this a ball?	17	1	6	1	25
Is this red?	16	2	6	1	25

Another moment of the investigation occurs in the interaction that is generated with the small patients, through the application of a test of familiar recognition and differentiation of objects used in their daily lives. The result is that more than 70% of the 25 children know their name and that of their parents correctly; 48% do not know their address, while more than 50% do orally express the names and colors of objects in their environment. Table 4 shows the answers selected by the surveyed patients related to the phono articulatory test.

Table 4
Phonetics evaluative test

ALTERNATIVES	YES	NO	TOTAL
Correct pronunciation of phonemes	10	15	25
Correct pronunciation of symphonies or stuck syllables	8	17	25
Correct pronunciation of diphthongs	1	24	25
Does not articulate	6	19	25

Additionally, another aspect to evaluate is the quality of articulation in the pronunciation of syllables and words, through the application of an articulation test, it is thus evident that 60% of the 25 boys and girls incorrectly pronounced the phonemes m/n/ñ/p/j/b/ k/g/f/y/d/l/r/rr/t/c/s/ by substitution, omission or distortion of sounds; 68% could not adequately articulate the stuck syllables or also called symphonies: bl/kl/fl/gl/pl/tl/bt/cr/dr/fr/gr/pr/tr/; 96% do not properly express the diphthongs: au/ei/oe/ie/ua/ue/; while 76% present difficulty in the articulation of phonemes, symphonies, and diphthongs.

According to Jiménez et al. (2016), indicates that it is important to carry out a semantic evaluation of patients who have language problems, the respective and expressive word must be evaluated, for this reason it is essential to discover the subsequent language skills. Children who present language delays at a young age have a very significant problem in terms of expressive language (Espinoza-Santacruz & Flores-Urgiles, 2019), therefore, linguistic abilities can be conceived with autonomous systems interrelated with the language deficit; According to Holly & Carreno (2019), it indicates that as age increases, the lexical and comprehension level also increases; however, there may be differences between people of the same age, causing a negative impact on their intellectual growth, causing them to be less phonetically skilled and have limitations in their oral expression.

In this line of research, Gómez (1996), identify three broad population groups at risk for language disorders, namely:

- Children with obvious organic, neurological or physical conditions that prevent or delay the correct development of language activities.
- Children belonging to groups that presented a health problem, not necessarily dramatic in its consequences, but that can be associated with developmental problems.
- Children belonging to a family, social and economic environment with certain particular and deficient conditions, which can be related to risks of language disorders.

4 Conclusion

It is necessary that boys and girls receive the pertinent medical care from their gestation stage; an adequate diet privileging breast milk; early stimulation through a literacy environment in order to prevent disorders that affect the development of their orality. Infants should be provided with stimulating, flexible and dynamic play corners to interact directly with their peers, expressing their interests, motivations and fears. Offer them suitable learning spaces that stimulate the development of orality in an appropriate affective and cognitive context.

Acknowledgments
We are grateful to two anonymous reviewers for their valuable comments on the earlier version of this paper

References

Ansaldo, A. I., Marcotte, K., Scherer, L., & Raboyeau, G. (2008). Language therapy and bilingual aphasia: Clinical implications of psycholinguistic and neuroimaging research. *Journal of Neurolinguistics*, *21*(6), 539-557. https://doi.org/10.1016/j.jneuroling.2008.02.001

Bonilla, F., Botteri, A., and Vílchez, A. (2013). Learning difficulties. Oral Language Development, 122. Lima, Peru.

Calderon-Astorga. (2004). The process of oral language development. espaciologopedico.com, 5.

Díaz, C., Ribalta, G., Goycoolea, M., Cardemil, F., Alarcón, P ., Levy, R., and Reid, E. (2018). Language development in children with cochlear implants in a tertiary health center: Clinical series.Journal of Otolaryngology and Head and Neck Surgery,78(4), 343-352.

Dickinson, D. K., & Snow, C. E. (1987). Interrelationships among prereading and oral language skills in kindergartners from two social classes. *Early Childhood Research Quarterly*, *2*(1), 1-25. https://doi.org/10.1016/0885-2006(87)90010-X

Durham, R. E., Farkas, G., Hammer, C. S., Tomblin, J. B., & Catts, H. W. (2007). Kindergarten oral language skill: A key variable in the intergenerational transmission of socioeconomic status. *Research in Social Stratification and Mobility*, *25*(4), 294-305. https://doi.org/10.1016/j.rssm.2007.03.001

Espinoza-Santacruz, FJ, & Flores-Urgiles, CH (2019). Application of information technologies in the language development of children with communication difficulties. *Pole of Knowledge* , *4* (5), 116-137.

Flores-Ojeda. (2007). The process of oral language development.

Galvez Hidalgo, G. (2014). Children's poetry program to stimulate the development of oral language in children 03 years of age, at the initial education level.

Gómez, SL (1996). Language assessment in school: needs. *Eduga: revista galega do ensino* , (13), 109-116.

Gopnik, M., & Crago, M. B. (1991). Familial aggregation of a developmental language disorder. *Cognition*, *39*(1), 1-50. https://doi.org/10.1016/0010-0277(91)90058-C

Guevara. (2016). Use of language. Shopia, 20(1), 245-264.

Holly, MEC, & Carreno, KJJ (2019). Human rights and oral language difficulties in children who attend the Fundación Mi Comunidad Preventes. *Iustitia Socialis: Arbitrated Journal of Legal and Criminal Sciences* , *4* (7), 5-20.

Jimenez, GER, Rich , SPO , & Hernandez , YR (2016). Child language deficiencies Type Language Disorder. *Arete* , *16* (2), 133-1

Lenneberg, E. H. (1982). *Fundamentals of Language Development* (Vol. 41). Publisher Alliance.

López, P., Ortega, C., & Moldes, V. (2008). Occupational Therapy in Childhood. Theory and practice. Pan American Medicine.

Lukman, .-., Abdulhak, I., & Wahyudin, D. (2016). Learning model development to improve students' oral communication skill: (a research and development study on english as a foreign language (EFL) subject in all junior high schools in north of lombok, west nusa tenggara province). *International Journal of Linguistics, Literature and Culture*, *2*(2), 147-166. Retrieved from https://sloap.org/journals/index.php/ijllc/article/view/103

Mantra, I. B. N., Kusuma, I. N. W., Suarka, I. N., & Putra, I. B. R. (2016). Exploring the educational values of oral texts of balinese oral tradition. *International Journal of Linguistics, Literature and Culture*, *2*(2), 141-146. Retrieved from https://sloap.org/journals/index.php/ijllc/article/view/102

Marder, E., & De Mier, V. (2018). Relationships between listening comprehension and executive functions in preschool children. Impact of a comprehensive development program.Educational Thought, Journal of Latin American Research (PEL),55(2), 1-16.

Martínez, J. C., Gutiérrez, E., Alvaréz, G., Castillo, Á. D., Portilla, A. Y., & Almanza, V. (2019, November). Video Games to Support Language Therapies in Children with Hearing Disabilities. In *2019 International Conference on Virtual Reality and Visualization (ICVRV)* (pp. 172-175). IEEE.

Mayer, J. D., & Salovey, P. (1993). The intelligence of emotional intelligence. *intelligence*, *17*(4), 433-442. https://doi.org/10.1016/0160-2896(93)90010-3

Mohammed, D., Park, V., Bogaardt, H., & Docking, K. (2021). The impact of childhood obstructive sleep apnea on speech and oral language development: a systematic review. *Sleep Medicine*, *81*, 144-153. https://doi.org/10.1016/j.sleep.2021.02.015

Nicolopoulou, A., Cortina, K. S., Ilgaz, H., Cates, C. B., & de Sá, A. B. (2015). Using a narrative-and play-based activity to promote low-income preschoolers' oral language, emergent literacy, and social competence. *Early childhood research quarterly*, *31*, 147-162. https://doi.org/10.1016/j.ecresq.2015.01.006

Rueda, LPC, & Ordóñez, JEC (2019). The children's story in the development of oral language in children of the first grade of basic general education.Domain of the Sciences,5(3), 697-711.

Sampieri. (2004). The quantitative approach. Athens, 2(34).

Sarama, J., Lange, A. A., Clements, D. H., & Wolfe, C. B. (2012). The impacts of an early mathematics curriculum on oral language and literacy. *Early Childhood Research Quarterly*, *27*(3), 489-502. https://doi.org/10.1016/j.ecresq.2011.12.002

Shewan, C. M., & Kertesz, A. (1984). Effects of speech and language treatment on recovery from aphasia. *Brain and language*, *23*(2), 272-299. https://doi.org/10.1016/0093-934X(84)90068-3

Tallal, P., Stark, R. E., & Mellits, D. (1985). The relationship between auditory temporal analysis and receptive language development: Evidence from studies of developmental language disorder. *Neuropsychologia*, *23*(4), 527-534. https://doi.org/10.1016/0028-3932(85)90006-5

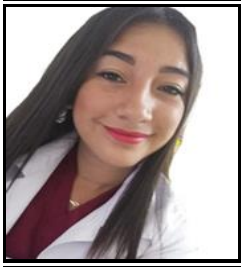
Tamayo , M. (2006). *Dictionary of scientific inquiry* . DO NOT USE.

Tapia, SCG, Torres, MLN, Vistín, MVP, Quintana, ABL, & Morales, GJP (2020). Strategies to reduce dyslalia in children at the initial level. *Talents Research Journal* , *7* (2), 66-73.

Vargas Lazo, D.K., & Vasquez Chiroque, V. (2021). Dimensions of oral language in four-year-old children, a study carried out in an initial educational institution in the district of Chiclayo, 2018.

Villa, MCC (2021). Early stimulation and development of language skills: Neuroeducation in initial education in Ecuador.Social Science Journal,27(4), 309-326.

Biography of Authors



Gema Katherine
Docente, estudio en la Universidad Laica "Eloy Alfaro" De Manabí Lcda. En Terapia De Lenguaje (Fonoaudiologa), estudiante de la maestría en Educación Básica.
Email: gema.cobena@pg.uleam.edu.ec

Hilda Cruz
Docente de la Universidad Laica "Eloy Alfaro" De Manabí, profesora de la Maestria en Educación Básica.
Email: hilda.bran@pg.uleam.edu.ec