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AND TREATMENTS IN CHILDREN'S COMMUNICATION
DEVELOPMENT**

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

(وقوله تعالى: قُلْ هَلْ يَسْتَوِي الَّذِينَ يَعْلَمُونَ وَالَّذِينَ لَا
يَعْلَمُونَ إِنَّمَا يَتَذَكَّرُ أُولُو الْأَلْبَابِ)

[الزمر: 9]

صدق الله العلي العظيم

Dedication

With all my love and gratitude, I dedicate this work to my master, Imam Al-Mahdi (may Allah hasten his reappearance), whose guidance and hope illuminate every step of my journey. To my beloved parents, whose unwavering support and sacrifices have been the foundation of my success. To my dear siblings, whose companionship has been a source of strength and joy. To the companion of my life, who has been my constant support through every step. To my sister by heart, whose loyalty and kindness embody true sisterhood. To my dearest friends, with whom I shared the most beautiful days of my life and whose presence left an unforgettable mark on my heart. And to my esteemed teacher, Ms. Fatima Raheem , whose wisdom, patience, and continuous support have guided me through every challenge. This work is a humble reflection of the love and encouragement I have been blessed to receive from you all.

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Abbreviations

Abbreviations	Full name
ASD	Attention-deficit /hyperactivity disorder
SLI	Specific Language Impairment
SCD	Social Pragmatic Communication Disorders
ASD	Autism Spectrum Disorder
DSM-5	Diagnostic and statistical manual of mental disorders
SLPs	Speech-Language Pathologists

Introduction

Communication is a fundamental nonverbal cues, maintaining conversations, or adapting language to different social situations.

The causes of pragmatic disorders are multifaceted, often involving a combination of genetic, neurological, and environmental factors. Conditions such as autism spectrum disorder (ASD), attention-deficit/hyperactivity disorder (ADHD), and specific language impairment (SLI) are frequently associated with pragmatic language challenges. Understanding the root causes of these disorders is essential for developing effective interventions that support children's communication development.

Treatment approaches for pragmatic disorders are diverse and tailored to the individual needs of the child. Speech and language therapy, social skills training, and parent-mediated interventions are among the most common strategies used to enhance pragmatic abilities. Early identification and intervention are crucial, as they can significantly improve outcomes and help children achieve their full potential in communication and social interaction.

This exploration of pragmatic disorders in children's communication development aims to shed light on the underlying causes, diagnostic considerations, and evidencebased treatments. By understanding these aspects, caregivers, educators, and clinicians can better support children in overcoming communication barriers and fostering their social and emotional well-being.

Chapter One

What is pragmatic disorders?

1.1 What is pragmatic disorders:

In pragmatics and related fields, pragmatics is the study of how context contributes to meaning. Pragmatic encompasses phenomena including implicature, speech acts, relevance and conversation. Theories of pragmatics go hand in hand with theories of semantics, which studies aspects of meaning which are grammatically or lexically encoded. The ability to understand another speaker's intended meaning is called pragmatic competence (Betti, 2021). One of the types of pragmatics is pragmatic disorders.

Pragmatic disorders refer to difficulties in negotiating the pragmatics of verbal and nonverbal communication. These disorders involve misunderstanding, miscommunications, communicative breakdowns that can result in individuals being unable to achieve their communicative goals. People with pragmatic impairments exhibit complex language disorders that are often assessed and treated by speech and language therapists. Also, Pragmatic disorders refer to difficulties in using language effectively in social and communicative contexts. These disorders impact on contributing relevantly to conversations, or recognize the needs of a listener. Pragmatic disorders may arise from developmental conditions, such as autism spectrum disorder, or be required later in life due to injury, illness, or neurodegenerative diseases like Alzheimer's. They can be classified into expressive, receptive, primary, or secondary disorders, each affecting communication differently. (Cummings, L. 2023).

Pragmatic disorders, specifically Social Pragmatic Communication Disorder (SCD), are neurodevelopmental conditions that affect an individual's ability,

especially in children, to use language effectively in social contexts. These disorders are characterized by difficulties in sharing information, understanding implied meanings in communication, and adjusting communication styles according to different situations or conversational partners. Symptoms typically appear in early childhood but may not be noticeable until the child encounters more complex social interactions. Although SCD shares some similarities with Autism Spectrum Disorder (ASD), it lacks key traits such as repetitive behaviors, highly focused interests, strict adherence to routines, and sensory differences.

(Curtis, 2021)

Pragmatic language disorders mean an impairment in comprehension and /or use of a spoken, written and /or other symbol system. The disorder may involve 1) the form of language (phonology, morphology and syntax). , 2)The content of language(semantics) and 3) The function of language in communication (pragmatics),in any combination.(Paul& Norbury, 2012).

1.2 Key symptoms:

One of the most common types of symptoms associated with this disorders:

1) Lacking Eye Contact :One of the most common symptoms of the disorder is a lack of eye contact. If you find yourself peering down or to the side while you speak with someone ,you could very well be suffering from social communication disorders (Ben-Aharon, 2020).

2)Greeting Others Inappropriately :Another symptom of the condition is the tendency to greet others in appropriate ways. For instance ,some people will fail to say “hello” to others who have just said “hello” to them .They might even act as

if they're ignoring the people who initially greeted them. Other individuals might use nonsensical phrases for greetings, confusing those that they're speaking to. At the same time, those individuals might inappropriate hand gestures.(Ibed , 2020).

3)Failing to Alter communication styles :Communication is complex .The style of communication that a typical person might use on a construction site is different from what he or she might use in church. However, in those suffering from social communication disorders , these distinctions often don't exist. In other words, they have one communication style, and it's used for every interaction.(ibed,2020).

4)Talking over others :Another symptom is the tendency to speak over others during conversations. If you're a known chronic interrupter, social communication disorder could be at the root of the problem.(ibed , 2020).

5)Utilizing inappropriate body language :Body language irregularities are a sign of disorder as well. Everything from overly-emphatic hand motions to tendency to stare at the ground while speaking can be tied to this condition .A lack of body language can also be a symptom, particularly if it causes the affected individual to appear rigid or awkward.(ibed, 2020).

6)Telling Stories in a Disjointed :Those with social communication disorder often have trouble with storytelling. While they can usually recall and recite events, they have trouble piecing them together in a straightforward manner. As a result ,their monologues often come across as scatterbrained, disjointed ,and difficult to follow. (ibed,2020).

7)Failing to Stay On Topic :Another symptom is inability to stay on topic. So, if you tend to veer off into other ideas while you're in a discussion, you might have a social communication disorder .It's an important to note, however, that everyone

does this from time to time. As such, it's only a cause for concern if it's a chronic habit. (ibed, 2020).

8)Communicating Awkwardly During Conversations :Essentially any form of awkward communication can be a sign of social communication disorder .This includes saying words that don't make sense in the context of a conversation, failing to make eye contact during a conversation, and looking disinterested during a conversation. (ibed,2020).

1.3 Examples and Case Studies:

A study was conducted by researcher Deborah A. Hwa-Froelich in 2023 on a child to examine the symptoms of language communication disorders. The results showed that the child struggle with answering questions, maintaining topics, and taking turns in conversations. He also had difficulty making inferences from nonverbal behaviors and ambiguous language, leading to challenges in social interactions. His weaknesses were reflected in low receptive and expressive pragmatic language skills. Despite this challenge, the child had adequate cognitive and communicative abilities, which allowed him to learn social communication strategies through early intervention. The intervention focused on teaching the meaning of questions, pragmatic strategies for conversations, and turn-taking skills using visual cues. After a year of intervention, he improved in answering questions, initiating interactions, and organizing his discourse logically. These improvements helped him develop essential social communication skills. (Hwa-Froelich, 2023).

Chapter Two

Causes of Pragmatic Disorders:

(2.1)Causes Of Pragmatic Disorder:

The causes of pragmatic disorders include various factors, such as:

(2.1.1) Environmental Factors:

(2.1.1.1) Influence of early social interactions and exposure to communication-rich environment :

This This disorder is defined by a primary deficit in the social use of nonverbal and verbal communication as manifested by all of following:1)deficits in using communication for social purposes, such as greeting and sharing information, in a manner that is appropriate for a social context. 2) Impairment of the ability to change communication to match context or the needs of the listener, such as speaking differently in a classroom than playground, talking differently to a child than adult, avoiding use of overly formal language . 2) Difficulties following rules for conversation and storytelling, such as taking turns in conversation and storytelling ,rephrasing when misunderstood and knowing how to use verbal and nonverbal to regulate interaction. 3) Difficulties understanding what is not explicitly stated (e.g, making inferences) and nonliteral or ambiguous language (e. g, idioms, humor, metaphors, multiple meanings that depend on the context for interpretation.(Rodes, 2017).

According to Paul and Norbury, one major environmental factor is socioeconomic status which has been linked to differences in language development. Studies show that children from lower SES backgrounds may experience language delays due to limited resources, reduced linguistics exposure, and fewer interactive

opportunities. Additionally, environmental factors are often partially influenced by genetics, as lower education levels and income may reflect parental language difficulties.(Paul & Norbury, 2012).

(2.1. 1.2) Impact of trauma , neglect or limited peer interaction:

Trauma neglect and peer interaction play a crucial role in the development of language skills and can be contributing factors to language disorders or their severity. Children who experience emotional neglect or environmental deprivation often lack the necessary linguistic stimulation required for natural language acquisition, leading to delays in speech or difficulties in expression and comprehension. Additionally, psychological trauma can hinder language development by affecting the brain regions responsible for language processing, as well as impairing memory and attention, which are essential for effective communication. Furthermore, negative peer interaction such as bullying or social isolation, may cause children to withdraw from environments that foster language skills, exacerbating their language difficulties. Therefore, early intervention and psychological and social support are essential to minimizing the impact of these factors and promoting natural language development in at-risk children.(Cummings, L. 2013).

2.2. Genetic and Neurological Factors

. Link between pragmatic disorders and conditions such as autism disorders
:Pragmatic disorders difficulties are a prominent feature of individuals with Autism spectrum disorders (ASD) as the diagnosis itself is based on deficits in social communication. According to the Diagnostic and Statistical Manual of mental disorders (DSM-5), these difficulties manifest in several key areas.

First, individuals with ASD experience impairments in social- emotional reciprocity, leading to abnormal social interactions, difficulty engaging in reciprocal conversations, reduced sharing of interests and emotions, and limited initiation or response in social situations.

Second, they exhibit deficits in nonverbal communication, including poor coordination between verbal and nonverbal cues, abnormalities in eye contact, limited facial expressions, inappropriate or impaired use of gestures.

Third, they face challenges in developing, maintaining and understanding relationships, which is reflected in difficulties adjusting behavior to different social contexts, limited participation in imaginative play, difficulty forming friendships, and a lack of interest in peers. As social interaction demands increase with age, these challenges become more pronounced, affecting individual's personal, educational, and occupational lives while increasing their risk of social discrimination and difficulty integrating into society. This analysis highlights the fundamental role that pragmatic language plays in all forms of social communication in individuals with ASD, underscoring the need to consider pragmatics, social interaction, and language as interconnected elements when assessing their communication abilities.(Paul &Norbury, 2012)

2.3 Research Findings:

case studies that explore correlations between causes and symptoms: There is research, by researcher Roshdi in 2024, involving a study on several children suffering from communication disorders. These disorders include language disorders, speech disorders, and hearing disorders. A language disorder refers to difficulties in understanding or using spoken and written symbol systems.

Language disorders encompass any delay or impairment affecting a child's ability to comprehend (receptive language) or use words and gestures appropriately (expressive language). A language disorder may involve language form (phonology, morphology, syntax), language content (semantics) and language function in communication.

The study was conducted in healthcare institutions in the South Al Sharqiyah Governorate, Sultanate Of Oman, during 2019. It included speech and language disorder treatment clinics at Sur Referral Hospital, Jalan Bani Bu Hassan Hospital and Jalan Bani bu Ali Health complex.

The study was carried out within these institutions to assess children's communication disorders, using a descriptive methodology and analyzing data obtained from specialized clinics. The study revealed a high prevalence of communication disorders among preschool children, with a higher occurrence in males compared to females. It also found that children from unstable family environments, those with hyperactivity, or those with a history of delayed language development were more susceptible to these disorders. Geographically, some regions recorded higher prevalence rates than others.

In terms of disorder types, language delay was the most common, followed by speech fluency disorders such as stuttering, which varied in prevalence across

different age groups. Overall, the findings suggest that social, environmental, and geographical factors play a significant role in the prevalence of these disorders.

Chapter Three

Treatment Approaches

3.1 Treatment Approaches:

Treatment for language disorders focuses on improving communication skills through speech therapy, behavioral strategies, educational support, and social skills training.

3.1.1) Behavioral Therapy :Treating pragmatic language disorders often involves a multifaceted approach that may include behavioral therapy. The primary goal of behavioral therapy is to improve communication skills and social interactions. Some evidence-based treatment approaches for pragmatic language disorder in children include: (Glatt, 2024).

1)Social skills training :This approach focuses on teaching children specific social skills, such as turn- taking, making eye contact, and initiating conversation. Roleplaying and social scripts may be used to help children practice and generalize these skills. (ibed, 2024)

2)Cognitive – behavioral therapy :This therapy helps children identify and modify negative thought patterns and behaviors related to social interactions.It aims to improve social cognition and problem-solving skills.(ibed, 2024)

3)Video modeling and social stories :Visual aids, such as videos or social stories, can be used to teach social skills and appropriate behaviors in different social interactions.(ibed, 2024)

4)Group therapy and peer support : Group therapy sessions provide opportunities for children to practice social skills in a supportive and structured environment. Interacting with peers who face similar challenges can enhance social learning and communication skills. (ibed, 2024).

As well as, , this behavioral treatment and interventions work by adjusting existing behaviors or teaching new behaviors. This is often by identifying positive behaviors, in this case, social skills, and reinforcing those behaviors. Behavioral therapies and approaches can be done in one- on-one or peer group settings. (ibed,2024)

3.2 Speech or language therapy :

Speech therapy is a primary treatment approach for social communication disorders. This therapy is typically provided by a speech-language pathologist and focuses on improving communication skills in various social settings. Speech therapy for SCD may be available in schools for qualifying children and in private practices. During speech therapy sessions, the SLP may employ various techniques to address social communication challenges. These may include:

1)Individual therapy : One-on-one sessions with the SLP allow for personalized attention and tailored treatment plans.The therapy may focus on specific communication goals, such as turn taking, maintaining eye contact, using appropriate body language.(Glatt, C.2024)

2)Group therapy : Engaging in group therapy sessions can provide opportunities for children to practice social communication skills in a supportive and interactive environment. Group therapy also promotes peer interaction and learning from others.

(ibed, 2024).

3)Social skills classes : In addition to individual and group therapy, social skills classes may be beneficial for children with SCD. These classes provide structured activities and instruction to help children develop and practice social communication skills. Speech therapy for SCD aims to improve pragmatic

language skills, enhance social interactions, and foster meaningful communication in various social contexts.(ibed,2024).

Besides all this, there are various strategies that individuals with practice language disorder can practice to enhance their communication abilities and navigate social interactions more effectively.

3.2.1 These strategies include:

1)Enhance Nonverbal Communication:Nonverbal cues such as facial expressions, body language, and eye contact are important aspects of communication. Individuals can work on improving their ability to interpret and use nonverbal cues to enhance their understanding and expression of emotions and intentions. (ibed,2024)

2)Developing Active Listening Skills : Active listening involves playing attention to verbal and nonverbal cues, maintaining eye contact, and demonstrating interest in the speaker. By developing active listening skills, individuals can improve their understanding of conversation and demonstrate their engagement in social interactions. (ibed, 2024)

3)Practicing Turn-Taking and Topic Maintenance : Taking turns during conversation and staying on topic are essential for effective communication. Individuals can practice turn-taking by waiting for their turn to speak and respecting the conversation flow. Additionally, maintaining the topic of conversation helps to ensure clarity and coherence.(Ibed, 2024)

4)Understanding and using Appropriate Body language: Body language play a significant role in communication. Individuals can learn interpret and use

appropriate body language, such as gestures and posture, to convey their messages effectively and understand others better.(Ibed, 2024)

5)Building Empathy and Perspective – Taking Abilities: Empathy involves understanding and sharing the feeling of others, while perspective-taking involves considering other viewpoints.By developing empathy and perspective-taking abilities, individuals can improve their social interactions and build stronger connections.(Ibed, 2024).

Role of speech-Language pathologists (SLPs) play a multifaceted role in treating PLI. They conduct comprehensive assessments to identify the specific areas of difficulty and develop individualized treatment plans.

3.2.2These plans often include:

1)Targeted Exercises :These are designed to address specific social communication challenges.For example,an SLP might work on improving turn-taking in conversation or understanding nonverbal cues.

2)Role – playing : This involves practicing social scenarios in a controlled environment. Role-playing helps individuals how to navigate different social situations, such as greeting someone, asking for help, or joining a group conversation.

3)Structured play Dates :SLPs may organize play dates with peers to provide real-life practice opportunities. These sessions are structured to ensure that the individual can apply the skills they are learning in a supportive setting. (ibed, 2024). In BEN, AHARON opinion, 2021, Speech-Language pathologists (SLPs) play a highly important role in the assessment and treatment of those with social

communication disorders such as SCD. Speech-language pathologists are highly knowledgeable about the milestones and expectations that exist at each phase of a child's social communication development. The SLP always considers family and cultural differences and observes the child as a whole when identifying whether a social communication issue is present. If so, treatment such as therapy will likely be recommended. Speech therapy appointments may include some or all of the following: 1) Learning & Practicing Social Routines. 2) Learning how to establish friendship. 3) Social skills education (greetings, introductions, conversations, humor, etc). 4) Games & Activities that practice skills such as Turn-Taking, Asking questions, etc. 5) Group Programming. 6) Parent & Caregiver Education.

3.3 Social Skills Training :

In addition to speech-language therapy. Social skills training can be highly beneficial. This type of training focuses on teaching explicit social rules and expectations, providing opportunities for practice and generalization, and encouraging self- awareness and self- advocacy.

Examples of Social Skills Training Activities:

- 1) Conversation Clubs : These clubs offer a safe space for individuals to practice conversational skills with peers under the guidance of an SLP or trained facilitator.
- 2) Social Stories: These are short narratives that describe specific social situations and appropriate responses. Social stories help individuals understand what to expect and how to behave in various scenarios.
- 3) Group Activities : Participating in group activities, such as games or collaborative projects, allows individuals to practice turn-taking, teamwork, and communication in a natural setting. (Glatt, 2024).

3.4 Parent and caregiver therapy :

Involving parents and caregivers in the treatment process is essential for reinforcing skills outside of therapy sessions. SLPS often provide training and resources to help parents support their child's progress at home. This might include:

1) Creating Structured Environment: Establishing clear routines and expectations at home to help the child feel more comfortable and confident in social situations. 2) Modeling Social Behaviors: Demonstrating appropriate social interactions and encouraging the child to observe and mimic these behaviors. 3) Providing Social Reinforcement: Using praise and rewards to reinforce successful social interactions and encourage continued practice (Karanam, 2024).

Conclusion

This research explored the concept of pragmatic disorders and their impact on children's communication development. It examined potential causes, including environmental, genetic, and neurological factors, providing a deeper understanding of how these elements influence social communication. Additionally, various effective treatment approaches, such as behavioral therapy, language therapy, and social skills training, were discussed, emphasizing the crucial role of parents and schools in the intervention process.

The findings highlight the importance of early diagnosis and appropriate intervention in enhancing children's ability to interact socially and develop communication skills. This knowledge can contribute to improving early intervention strategies and increasing the effectiveness of treatment. Future research should focus on exploring the role of technology in therapy and examining crosscultural differences in diagnosing and treating pragmatic disorders.

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