Abnormal language development used to define autism, but no longer does. Indeed, language development no longer even figures into contemporary diagnostic criteria, although early delays in language often lead to parents’ concerns. In this chapter, we review recent empirical research on language development in autism. To paint a contemporary picture, we restrict our review to studies published in the 21st century. We conclude that language development in autism is often delayed, but not deviant; that a delay in language development is not unique to autism; and that language development in autism is remarkably heterogeneous.

The diagnostic criteria for autism in the American Psychiatric Association’s most recent Diagnostic and Statistical Manual (2013) are mute with regard to language development. Instead, the most recent diagnostic criteria mention only aspects of socio-cultural communication, such as eye contact, facial expressions, or hand gestures. Language itself – the perception and production of speech or writing – is not referenced; neither is language development.

In contrast, over thirty years ago, when autism first appeared in the Diagnostic and Statistical Manual (1980), “gross deficits in language development” were considered so dispositive of the autistic phenotype that this diagnostic criterion was not only required but was one of only a handful of criteria (Gernsbacher et al., 2005a, b). Seven years later, the focus moved away from how language developed to how language was produced. “Marked abnormalities in the production of speech, including volume, pitch, stress, rate, rhythm, and intonation” and “marked abnormalities in the form or content of speech, including stereotyped and repetitive use of speech” appeared as diagnostic criteria. But these two criteria were among more than a dozen other criteria, and they need not be met to warrant a diagnosis (APA, 1987).

Another seven years passed, and language development recurred in the diagnostic criteria (“delay in, or total lack of, the development of spoken language”), but again as only one of numerous criteria, for which only a subset needed to be met (APA, 1994; 2000). Thus, abnormal language development at one time defined autism, then became an optional means for making a diagnosis, but now no longer figures into contemporary diagnostic criteria.
Other studies, which have examined other expressive language skills, for instance, expressing relations such as big and little, correctly producing grammatical morphemes for plurals and verb tenses, and using rising intonation when asking questions, have also reported that autistic children are less skilled than typically developing children (Fulton & D’Entremont, 2013; Hudry et al., 2010; Sigman & McGovern, 2005; Sutera et al., 2007; Vanvuchelen et al., 2011; Walton & Ingersoll, 2013).

That young, autistic children are often characterized by smaller expressive vocabularies should be of little surprise given that delays in the number of words and phrases children are saying are some of the most notable ‘red flags’ for autism (Baird et al., 2003; Filipek et al., 1999). Delays in early expressive language are also the primary concern that motivates parents to seek diagnostic evaluation of their children (Agin, 2004).

As for receptive language (the ability to understand language rather than produce it), reliable measurements are more difficult to make, particularly for very young children. Consequently, valid conclusions are more difficult to draw. One problem is that measuring receptive language in young children often relies heavily on parent report measures, such as the MacArthur-Bates Communicative Development Inventory (Fenson et al., 1993; 2007), which asks parents to tick off which of a list of words or phrases the parents believe their children to understand.

There are multiple reasons why parents might misestimate the number of words that their children understand (Feldman et al., 2000); for children who respond atypically, such misestimates are more likely (Akhtar & Gernsbacher, 2007; 2008; Bruckner et al., 2007). Nonetheless, many studies using the MacArthur-Bates Communicative Development Inventory have reported that young, autistic children are delayed in their receptive language development (e.g., Charman et al., 2003; Fulton & D’Entremont, 2013; Luyster et al., 2007; Luyster et al., 2008; Maljaars et al., 2012; Miniscalco et al., 2012; Paul et al., 2007, 2008; Vanvuchelen et al., 2011).

Using more objective measures, other studies have also reported that autistic children are delayed in their receptive language development. These studies have used standardized assessments, such as the Reynell Language Development scale (RLDS: Reynell & Gruber, 1990; Miniscalco et al., 2012; Vanvuchelen et al., 2011); the Peabody Picture Vocabulary Test or British Picture Vocabulary Scale (PPVT: Dunn & Dunn, 1997; BPVS: Dunn et al., 1997; Grigorenko et al., 2002; Howlin, 2003; Kover et al., 2013); the Clinical Evaluations of Language Fundamentals (CELF: Semel, Wiig, & Secord, 1992; 1995; 2000; 2006; Aman et al., 2004; Sigman & McGovern, 2005; Wisdom et al., 2007); the Mullen Scale of Early Learning (MSEL: Mullen, 1995; Luyster et al., 2008; Sutera et al., 2007; Swensen et al., 2007); the Preschool Language Scale (PLS: Zimmerman et al., 1992; 2002; Hudry et al., 2010; Jasmin et al., 2009; Walton & Ingersoll, 2013), or the Psychoeducational Profile-3 (PEP-3: Schopler et al., 2005; Fulton & D’Entremont 2013).

However, other studies, which have also measured language abilities at one discrete point in time, have not shown that autistic language development differed from typical language development. For example, autistic toddlers were not reported to differ from typically developing toddlers in the number of words that they produced (Goodwin et al., 2012); autistic teenagers did not differ from typically developing teenagers in the number of words that they understood (Asberg, 2010; Henderson et al., 2011; Paul et al., 2005); and autistic children, teens, and adults did not differ from typically developing participants in the quality or quantity of their written language production, be it number of words, length of words, length of sentences, or complexity of sentences (Troyb, 2011).

To summarize, several contemporary studies have suggested that autistic language development is delayed compared with typical language development. These studies have suggested delays in both expressive (producing) language and receptive (understanding) language. However, other studies have not shown that autistic language development is delayed compared with typical language development. Thus, delayed language development is a common but not a universal characteristic of autism. In fact, there is good evidence that language develops independently from autistic traits. For example, in a recent large-scale study involving 3000 pairs of twins, amount of language development was both phenotypically and genetically unrelated to degree of autistic traits (so called, severity; Taylor, Charman, Robinson, Hayiou-Thomas, Happé, Dale, & Ronald, 2014). The empirically demonstrated independence between language and autism underlies not only the variability in research findings, as reviewed above, but also the variability in autistic language development.

70.2 Heterogeneity and variability in autistic language development

Several studies have reported observing language delays in some subgroups of autistic participants but not others (e.g., Kjelgaard & Tager-Flusberg, 2001). For example, the majority of a sample of autistic children achieved normative size expressive vocabularies, but 15% of that sample were delayed between one and two standard deviations below normal (Jones & Schwartz, 2009). Most of a sample of autistic teenagers did not differ from a sample of typically developing teenagers in their ability to read,
but a third of the sample did (Åberg & Dahlgren Sandberg 2012). Half of a sample of autistic children and teenagers produced scores on the British Picture Vocabulary Scale in the average range, but a quarter of the sample performed one to two standard deviations below average, and another quarter of the sample performed more than two standard deviations above average (McCann et al., 2005).

Autistic language development often demonstrates extreme variability. For example, in a large sample of autistic toddlers, with a wide range of reported IQ scores, more than three fourths of the sample had spoken their first words before 18 months, which is within the range of typical development. However, a bit more than 5% of the sample had still not spoken their first words at six years of age (Wilson et al., 2003), which is far beyond the range of typical development. In two large samples of autistic preschool-age children, some children scored two years below age level on measures of expressive and receptive language, whereas other children scored nearly two years above age level (Fulton & D’Entremont, 2013; Hudry et al., 2010).

In a sample of autistic children and teenagers whose receptive vocabulary was, on average, in the normal range, some autistic children scored as low as four standard deviations below normal, whereas other autistic children scored as high as two standard deviations above normal (Nation et al., 2006). Similarly, in a sample of autistic preschool-age children, their receptive vocabulary ranged from four standard deviations below normal to two standard deviations above normal (Jasmine et al., 2009). In a sample of autistic school-age children, their expressive vocabulary also ranged from four standard deviations below normal to two standard deviations above normal (Joseph et al., 2005), and in a sample of autistic teens, their reading vocabulary ranged from three standard deviations below normal to one standard deviation above normal (Ricketts et al., 2013).

To summarize, several studies have reported observing language delays in some subgroups of autistic participants but not others; autistic language development often demonstrates extreme variability. In large samples of autistic participants, it is not unusual to find scores on various language measures that range from as low as two standard deviations below the norm to as high as two standard deviations above the norm.

70.3 Trajectories of Language Development

Within the first few years of life, autistic children’s language development trajectories have been reported to be flatter than that of typically developing children (or children with other developmental disabilities; Landa & Garrett-Mayer, 2006). However, examining development over a longer period of time sometimes shows that autistic language development trajectories can subsequently become steeper. After an initial delay, there was accelerated growth.

For example, autistic grade-school-age boys began with lower receptive, expressive, and overall language skills than typically developing boys. But over a nine-year period, the autistic boys’ language skills improved, on average, by 10% per annum, whereas the typically developing boys’ language skills improved only 1.6% per annum (Cariello et al., 2011). Autistic children’s language development continued on an upward trajectory at age nine, whereas non-autistic children, who were characterized by other types of atypical development, began to plateau (Anderson et al., 2007).

Vocabulary development continued to improve through adulthood for a sample of autistic adults, first studied during grade school and followed up in their early twenties; however, for a comparable sample of adults with language impairment, vocabulary development stagnated (Mawhood et al., 2000). A steeper trajectory of language development is of course expected, if the starting point is low – but only if the final measurement point also indicates improvement.

Figure 1 (modified with permission from data reported by Dockrell et al., 2010) illustrates the growth of expressive language (Figure 1a) and receptive language (Figure 1b) during a four-year period for a sample of over 100 autistic grade-school-age children. Illustrated alongside the autistic grade-school children is a matched sample of over 200 grade-school children who were not autistic but had language disabilities. The data presented are the two groups’ performance on expressive and receptive measures from the Clinical Evaluation of Language Fundamentals (Semel et al., 2006), presented in z-scores, based on a norms-based mean of zero and a norms-based standard deviation of one.
As Figure 1 illustrates, the older the autistic grade-school children, the better their expressive and receptive language skills. In contrast, for the language disabled children who were not autistic, neither their expressive nor their receptive language skills improved with age. Although these data are cross-sectional, they represent a steep trajectory of increasing language development for the autistic children, such that by the end point of measurement, the autistic children’s language skills did not differ from normal.

However, trajectories of language development in autism, similar to static measures of language ability in autism, show great individual variability. Figure 2 (modified from data reported by Smith, Mirenda, & Zaidman-Zait, 2007) illustrates individual trajectories in expressive vocabulary development for 35 autistic preschool-age children. Each child was assessed (by the MacArthur-Bates Communicative Development Inventory, Fenson et al., 1993) at four time points over a 24-month period. Although children were enrolled into the study only if their expressive vocabulary was smaller than 60 words, the children showed a wide range of vocabulary growth over the subsequent two-year period, as Figure 2 demonstrates.

Some children, indicated by blue lines in Figure 2, showed a steep rate of expressive vocabulary development, with expressive vocabularies of nearly 700 words at the last time point. Other children, indicated by green lines in Figure 2, showed a steady increase in vocabulary development, with expressive vocabularies of 400 to a bit over 600 words at the last time point. Still other children, indicated by gold lines in Figure 2, showed a slow increase in vocabulary development. The remaining children, indicated by red lines, showed a flat rate of vocabulary development, with little change in the number of words they produced over the two-year period.

The four color-coded clusters illustrated in Figure 2 were produced via statistical cluster analysis (Smith et al., 2007), based on the trajectory of the individual children’s vocabulary development. However, the average age of the children within each of the four clusters did not differ; neither did their level of cognitive development nor their degree of autistic traits. Most markedly, all children were undergoing the same therapy. Therefore, these data show just how variable the course of language development can be for autistic children, even when the children are all receiving 15 to 20 hours a week of early behavioral intervention, including speech-language therapy.

Very few studies of autistic language development have followed participants through adulthood; indeed, very few studies have followed autistic participants into adulthood at all, studying any type of development (Dawson, Mottron, & Gernsbacher, 2008). However, one of the few longitudinal studies that have extended through adulthood followed 29 autistic adults who had marked language delays in childhood and 35 autistic adults who did not. In adulthood, the two groups did not differ in either their expressive or receptive vocabulary (Howlin, 2003).

To summarize, within the first few years of life, autistic children’s language development trajectories have been reported to be flatter than that of typically developing children (or children with other developmental disabilities); however examining development over a longer period of time sometimes shows that autistic language development trajectories can also be steeper. After an initial delay, there is accelerated growth. However, trajectories of language development in autism, similar to static measures of language ability in autism, show great individual variability.

### 70.4 Language Delay versus Language Deviance

Evidence suggests that language development can be delayed in autism, but is it deviant? Does it proceed in the same general sequence? Are there qualitative differences? Most studies that have investigated specific nuances of language development, rather than gross measures on standardized tests, have suggested that autistic children’s language development proceeds in the same order and is
qualitatively similar in its developmental course to the
language development of non-autistic children at the same
stages of development.

For example, although autistic toddlers and preschool-
age children might understand fewer words than age-
matched typically developing children, when compared to
younger, typically developing children with the same size
vocabulary, autistic children’s receptive vocabularies con-
tain the same relative proportion of words from different
grammatical categories (e.g., nouns, verbs, pronouns, and
the like) and the same relative proportion of words from
various semantic categories (e.g., people, games and rou-
tines, body parts, sound effects, and the like, Charman et
al., 2003).

Similarly, although autistic toddlers and preschool-age
children might produce fewer words than age-matched
typically developing children, when compared to younger,
typically developing children with the same vocabulary
size, there is substantial overlap in autistic and typically
developing children’s most frequently spoken words
(Wicklund, 2012). Indeed, when autistic toddlers are com-
pared with non-autistic toddlers who are also delayed
in their language development (‘late talkers’), the two
groups are just as likely to produce words from a range of
grammatical and semantic categories, including emotion
terms, and the autistic toddlers did not differ from the
non-autistic late talkers in the complexity of their gram-
matical utterances (Ellis Weismer et al., 2011).

When autistic preschool-age children are compared
with non-autistic preschool-age children who have other
developmental disabilities, the autistic children do not dif-
fer from the non-autistic children in their correct produc-
tion of noun phrases, sentence structures, plurals, sin-
gulars, or past-tense inflections (Park et al., 2012).

Norbury and colleagues have demonstrated in several
studies that when compared to non-autistic grade-school-
age children, autistic children do not differ from non-
autistic children in their sequential achievement of a vari-
ety of language comprehension processes. For instance,
autistic grade-school-age children acquire the understand-
ing of idioms (e.g., “it’s raining cats and dogs”) at the
same time as language-ability matched non-autistic chil-
dren do (Norbury, 2004; see also Gernsbacher & Pripas-
Kapit, 2012).

Autistic children acquire the understanding of meta-
phors (e.g., “[Because] John spent too long in the swim-
mimg pool, he was a prune”) at the same time as language-
ability matched non-autistic children (Norbury, 2005b).
Autistic children acquire the ability to draw inferences
from stories (Norbury & Bishop, 2002; see also Young et
al., 2005); negotiate ambiguities in language (Norbury,
2005a), and structure the stories that they tell (Norbury &
Bishop, 2003) at the same time as language-ability
matched non-autistic children.

Norbury’s studies also illustrate the independence be-
tween language development and autistic traits. In these
studies, Norbury and colleagues typically assemble four
participant groups: autistic children with language im-
pairment and autistic children without language impair-
ment; non-autistic children with language impairment and
non-autistic children without language impairment. By
definition, the autistic participants differ from the non-
autistic participants in their degree of autistic traits. For
instance, in Norbury’s (2005a) study, the difference in de-
gree of autistic traits between the autistic and non-autistic
participants is over two standard deviations (which is be-
ond the effect size of the difference between average
men vs. women’s height). Thus, the autistic children in
these studies clearly have more autistic traits than the non-
autistic children and most likely are ‘autistic enough.’

However, in each of Norbury and colleagues’ studies,
it is the participants’ degree of language impairment, not
their degree of autistic traits, that predicts their ability to
understand idioms (Norbury, 2004); understand meta-
phors (Norbury, 2005b); draw inferences from stories
(Norbury & Bishop, 2002); negotiate ambiguities in lan-
guage (Norbury, 2005a), and structure stories that they tell
(Norbury & Bishop, 2003). Thus, autistic children do not
differ from language-matched non-autistic children in
their sequential achievement of important language com-
prehension processes.

Historically it was assumed that unusual, perhaps ab-
errant, features of language development characterized
autism, such as echolalia (repeating words and expres-
sions verbatim) and pronoun reversal (using you when I is
intended). More recently, some researchers have sug-
gested another aberrant feature might characterize autistic
language development: Expressive language might pro-
cceed abnormally ahead of receptive language (i.e., autistic
children say more than they understand). However, none
of these putatively aberrant characteristics are empirically
reliable or universal among autistic children, as Gerns-
bacher, Morson, and Grace (in press) recently argued.

Another characteristic of autistic language develop-
ment that is sometimes assumed to be specific to autism is
regression, or loss, of language skills. Unfortunately, codi-
fying language loss is complicated (is it a consistent loss
or a fluctuating loss?1), and measuring language loss is dif-
ficult, particularly if measurements are not taken prospec-
tively (Lord, Shulman, & DiLavore, 2004). Despite classi-
fication and measurement difficulties, two patterns appear
to be consistent in the data on autistic language loss.

First, autistic children who seemed to lose language
are those whose early language was developing on time or
with little delay (Baird et al., 2008; Pickles et al., 2009).
For example, autistic toddlers who were coded as having lost language had produced their first words around one year of age, whereas autistic toddlers who were not coded as having lost language hadn’t produced their first words until two years of age (Pickles et al., 2009).

Second, autistic children who seemed to lose language do not progress as quickly in subsequent language development as autistic children who do not seem to lose language. For example, at age six, many of the autistic children who seemed to lose language earlier, were still using single words, whereas other autistic children had advanced to producing sentences (Bernabei et al., 2007).

To summarize, most studies that have investigated specific nuances of language development, rather than gross measures on standardized tests, have suggested that autistic children’s language development proceeds in the same order and is qualitatively similar in its developmental course to the language development of non-autistic children at the same stages of development. Although it has been assumed that aberrant features of language development characterize autism, such as echolalia and pronoun reversal, neither these features nor language loss is unique to autism.

References


