

## Speech and Language Disorders in Children: Implications for the Social Security Administration's Supplemental Security Income Program

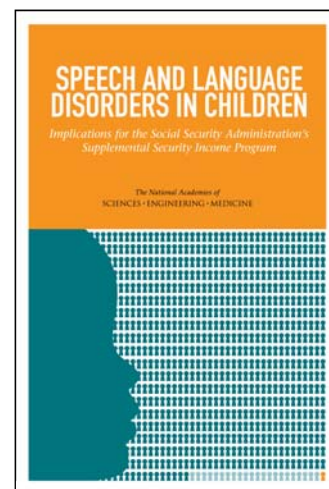
Speech and language disorders—disruptions in communication development—interfere with children's communication and learning. In their most severe forms, such disorders represent serious lifelong threats to children's social, emotional, and employment outcomes and can be expected to persist over a lifetime. If severe enough, such disorders can qualify children from low-income families to receive Supplemental Security Income (SSI).

Over the past several decades, the number of children receiving SSI has risen overall, and the number receiving SSI on the basis of speech and language disorders has increased as well. The Social Security Administration requested that the National Academies of Sciences, Engineering, and Medicine convene a committee to identify trends in the prevalence of speech and language disorders among U.S. children and to compare those trends to changes observed in the population of children who receive SSI.

The resulting report, *Speech and Language Disorders in Children: Implications for the Social Security Administration's Supplemental Security Income Program*, reviews the evidence and identifies factors related to the rising rates of speech and language disorders. The report's findings and conclusions underscore the long-term and profound impact of severe speech and language disorders on children, as well as the degree to which children with such disorders can be expected to be a significant presence in a program such as SSI.

### SEVERITY AND PERSISTENCE OF SPEECH AND LANGUAGE DISORDERS

Severe speech and language disorders, especially when combined with other risk factors such as poverty, can increase risk for a wide variety of adverse outcomes, such as social isolation and mental health disorders; learning disabilities; behavior disorders; poor academic achievement; and chronic underemployment. For children with severe speech and language disorders, treatment improves function; with few exceptions, however, substantial functional limitations will persist. The range of adverse outcomes, coupled with the persistence of severe speech and language disorders, point to the array of needs children with these disorders are likely to have and to the kinds of ongoing support they may require.

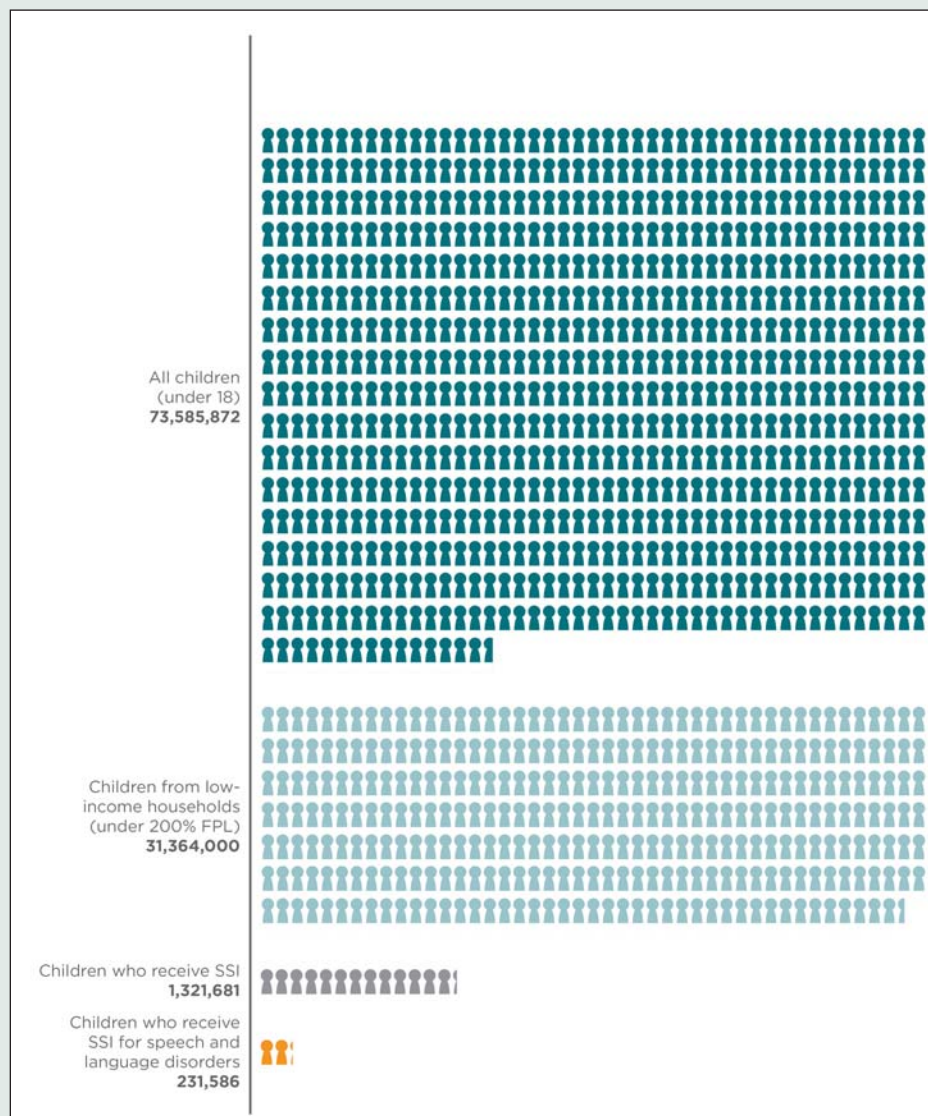


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## PREVALENCE OF SPEECH AND LANGUAGE DISORDERS

Speech and language disorders affect between 3 percent and 16 percent of U.S. children. About 40 percent of these children have additional mental and physical health conditions, such as intellectual disabilities, autism spectrum disorders, and other neurodevelopmental and behavioral disorders.

Within the population of all children with speech and language disorders, a small group have disorders severe enough to meet the standard of disability for the SSI program. Within the latter group, even fewer children will both meet the SSI financial eligibility standard and actually enroll in the program. The figure below shows how SSI recipients with speech and language disorders are a small subpopulation of all U.S. children.



**FIGURE** The number of children receiving SSI for speech and language disorders is a small subpopulation among the general population of children.

NOTES: FPL = federal poverty level; SSI = Supplemental Security Income. All data are from 2013. Scale = 1 symbol to 100,000 children. The Current Population Survey table creator was used to generate numbers of children below 200 percent of the federal poverty level. Parameters used to generate the numbers include get count of persons in poverty universe (everyone except unrelated individuals under 15); years: 2004 to 2013; census 2010 weights; row variable: age; column variable: income-to-poverty ratio; and customized formatting: income-to-poverty ratio percent cutoff of 200 percent. These populations are not mutually exclusive.

**The report shines a light on how an increase in prevalence, an accumulation of individuals in a new impairment category, and the persistence of severe disorders contribute to the overall increase in children with speech and language disorders in the SSI program.**

## **CHILD POVERTY AND THE SSI PROGRAM FOR CHILDREN**

Children of families with low incomes are more likely than the general population to have disabilities, including speech and language disorders. Currently, 0.31 percent of U.S. children receive SSI benefits for speech and language disorders. In December 2014, 16 percent of all children receiving SSI benefits—213,688 children—were receiving them as the result of a primary speech and language impairment.

The majority of children who receive SSI benefits are from families with a household income less than 200 percent of the federal poverty level. Following the 2008-2009 recession in the United States, more children would have met the financial eligibility criteria for SSI. This means that an increase in the number of children on SSI with speech and language disorders may not reflect only an increase in those disorders, but may also arise from an increased number of children with these disorders who meet the poverty threshold for SSI eligibility.

## **AN INCREASE IN PREVALENCE**

No single data source can provide definitive estimates of trends in the prevalence and persistence of speech and language disorders over time among U.S. children. Therefore, the committee reviewed a variety of sources: data from clinical samples; population-based studies; nationally representative surveys; and administrative or service-based data from federal programs. These sources differ substantially on how they define speech and language disorders, collect information, which variables are examined, and the periods of time examined.

The best available evidence shows an increase in the prevalence of speech and language disorders over the past decade in the U.S. child population. The National Survey of Children's Health showed that the prevalence

of speech and language disorders increased from 3.8 percent of children in 2007 to 4.8 percent in 2011—an increase of 26 percent. The National Survey of Children with Special Health Care Needs showed a 56 percent increase in prevalence from 2005-2006 to 2009-2010.

Trends observed in the SSI program for children with speech and language disorders parallel this overall increase. The number of initial SSI allowances for speech and language disorders increased by nearly 40 percent between 2007 and 2011. The total number of children receiving SSI for speech and language disorders more than tripled in the last decade.

In addition to an increase in prevalence of these disorders in the general population, this growth is explained primarily by two factors:

- the introduction of a new impairment code for speech and language disorders in 1994, and
- the continuing eligibility of children whose severe speech and language disorders persist throughout childhood.

Prior to 1994, there were zero initial allowances for the impairment code for speech and language disorders in children. The current total number of recipients reflects both the accumulation over time of new individuals in this impairment category and the very low attrition from the program due to the persistence of severe speech and language disorders.

## **CONCLUSION**

This report represents the National Academies of Sciences, Engineering, and Medicine's first comprehensive study of speech and language disorders in children and provides a foundation for future efforts in policy, practice, and research.

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**Committee on the Evaluation of the Supplemental Security Income (SSI) Disability Program for Children with Speech Disorders and Language Disorders**

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The report shines a light on how an increase in prevalence, an accumulation of individuals in a new impairment category, and the persistence of severe disorders contribute to the overall increase in children with speech and language disorders in the SSI program.♦♦♦

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