



Empowering Children. Supporting Families. Building Brighter Futures.

Resource 019 | Speech and language disorders

Childhood dysarthria

What it means

Childhood dysarthria is a motor speech disorder caused by difficulty controlling the muscles used for speech. It can affect breathing, voice, resonance, articulation, and speech rhythm. It differs from childhood apraxia, which primarily concerns planning speech movements; the two can sometimes coexist. [1]

Causes and risk factors

Possible causes include cerebral palsy, other neurological conditions, brain injury, and some neuromuscular or genetic disorders. The pattern depends on which movement systems are affected. Speech difficulty is not a direct measure of understanding or intelligence. [1,2]

General family education. A concern deserves assessment, but this guide does not diagnose a child or prescribe treatment.



Signs and everyday impact

Speech may sound slurred, weak, strained, unusually quiet, nasal, or uneven in rate. A child may have difficulty coordinating breathing with talking. Drooling or feeding concerns can occur, but should be assessed separately rather than assumed to follow from the speech diagnosis. [1,2]

Assessment and diagnosis

A speech-language pathologist examines speech movement, voice, breathing, resonance, intelligibility, and functional communication. Neurological and medical assessment investigates the cause where needed. Hearing and language are considered. Motor speech assessment helps distinguish dysarthria from CAS and other speech sound disorders. [1,2]

Treatment and therapy

Therapy targets the affected speech systems and practical communication goals. Strategies may support breath and voice use, rate, clarity, or communication partner understanding. AAC can reduce effort and improve access. Medical management treats the underlying condition where possible; there is no single exercise that treats all forms of dysarthria. [1,2,3]

Support at home

Reduce background noise, allow enough time, and ask about the message respectfully when it is unclear. Use the child's preferred communication supports. Follow the therapist's guidance rather than forcing louder or faster speech. Arrange positioning that supports comfortable communication when advised.

When to seek help

New or rapidly worsening dysarthria, facial weakness, loss of skills, or swallowing changes needs prompt medical assessment. Sudden neurological symptoms or breathing difficulty is an emergency.

Questions for your care team

- Which speech systems are most affected?
- Does swallowing need a separate assessment?
- How can AAC and partner strategies reduce communication effort?



Podcast preparation

Use this outline to develop a later podcast script.

Suggested opening

Welcome to Mariel Early Intervention. Today we discuss childhood dysarthria. Childhood dysarthria is a motor speech disorder caused by difficulty controlling the muscles used for speech. This is general education; each child needs individualized care.

Opening: Define the topic and its developmental context.

Understanding: Explain causes and signs without inviting self-diagnosis.

Assessment: Describe evaluation and distinguish screening from diagnosis.

Support: Discuss treatment, therapy, and practical family supports.

Closing: Explain urgent signs and one clear next step.

Misconception to address: Unclear speech does not mean the child has little to say or understands little.

Before recording: update clinical references and local service details, arrange clinical review, and use fully consented or fictional examples.

Terms in plain language

- Dysarthria: speech difficulty from impaired muscle control.
- Resonance: how sound travels through oral and nasal spaces.
- Communication partner: someone communicating with the child.

Sources and further reading

Sources accessed 3 October 2026. Numbered references support the clinical overview. Treatment availability and referral routes vary by country.

[1] A Tool for Differential Diagnosis of Childhood Apraxia of Speech and Dysarthria in Children: A Tutorial

https://pubs.asha.org/doi/10.1044/2022_LSHSS-21-00164

[2] Cerebral Palsy

https://www.ninds.nih.gov/health-information/disorders/cerebral-palsy?Campaign_Content=100006380375789&linkId=100000294187174

[3] Childhood Apraxia of Speech

<https://www.asha.org/practice-portal/clinical-topics/childhood-apraxia-of-speech/>