



Empowering Children. Supporting Families. Building Brighter Futures.

Resource 022 | Speech and language disorders

Resonance disorders in children

What it means

Resonance disorders involve abnormal balance or transmission of sound through the mouth and nose during speech. Speech may sound too nasal, insufficiently nasal, or muffled. This differs from the sound-producing voice system, although voice and resonance concerns can coexist. [1]

Causes and risk factors

Possible causes include differences in the palate or throat, cleft or submucous cleft palate, obstruction, neurological movement difficulties, or learned speech patterns. The mechanism matters because structural, neurological, and learned causes require different management. [1,2]

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



Signs and everyday impact

Families may notice excessive nasal sound, nasal air escaping during speech, weak pressure consonants, reduced nasal sound when congested, or a muffled quality. Feeding-related nasal regurgitation may also prompt assessment. A brief change during a cold does not by itself establish a persistent resonance disorder. [1,2]

Assessment and diagnosis

A speech-language pathologist and appropriate medical specialists assess speech, oral structures, palate movement, hearing, and airway factors. A cleft or craniofacial team may be involved. Instrumental assessment can help investigate the closure between mouth and nose when indicated. The team distinguishes structural problems from learned sound errors. [1,2]

Treatment and therapy

Speech therapy can address learned articulation patterns and some functional speech needs. Structural insufficiency may need surgery or a prosthetic device; exercises alone cannot correct an anatomical gap. Treatment of obstruction or another medical cause is individualized. Follow-up assesses both speech and relevant airway or hearing concerns. [1,2,3]

Support at home

Use supportive communication and follow team advice. Avoid unprescribed blowing, sucking, or mouth exercises intended to 'close' a palate gap. Ask for demonstrations of any appropriate speech practice. Continue accepting the child's messages while the treatment plan is developed.

When to seek help

Breathing difficulty or significant feeding problems requires medical care. Persistent resonance changes, nasal regurgitation, or suspected palate differences should be evaluated rather than treated with generic exercises.

Questions for your care team

- Is the cause structural, neurological, obstructive, or learned?
- Is a cleft or craniofacial team assessment needed?
- Which speech targets are appropriate before or after medical treatment?



Podcast preparation

Use this outline to develop a later podcast script.

Suggested opening

Welcome to Mariel Early Intervention. Today we discuss resonance disorders in children. Resonance disorders involve abnormal balance or transmission of sound through the mouth and nose during 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: Not every nasal-sounding voice can be corrected by speech practice alone.

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

Terms in plain language

- Hypernasality: excessive nasal resonance.
- Hyponasality: reduced nasal resonance.
- Velopharyngeal: relating to the closure between the mouth and nose.

Sources and further reading

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

[1] Resonance Disorders

<https://www.asha.org/practice-portal/clinical-topics/resonance-disorders/>

[2] Voice Disorders

<https://www.asha.org/practice-portal/clinical-topics/voice-disorders/>

[3] Speech Sound Disorders: Articulation and Phonology

<https://www.asha.org/practice-portal/clinical-topics/articulation-and-phonology/>