

The Experience of Parents with Speech Delayed Children in Garut, Indonesia

Andri Nugraha¹

STIKes Karsa Husada Garut
Department of Medical Surgical Nursing
Garut, Indonesia
andrinugraha@outlook.com

Eva Daniati²

STIKes Karsa Husada Garut
Department of Pediatric Nursing
Garut, Indonesia
evadaniati4@gmail.com

Susan Susyanti³

STIKes Karsa Husada Garut
Department of Community Health Nursing
Garut, Indonesia
susan.susyanti@gmail.com

Iin Patimah⁴

STIKes Karsa Husada Garut
Department of Medical Surgical Nursing
Garut, Indonesia
iin.patimah84@gmail.com

Elsy Susani⁵

STIKes Karsa Husada Garut
Department of Pediatric Nursing
Garut, Indonesia
elsysusani@gmail.com

Abstract—Speech delay in children occurs when a child finds it difficult to use and develop the mechanisms required to produce speech. Some of the unfavorable consequences of speech delay in children include poor academic achievement, reduced IQ, and psychosocial problems. Thus, this study aimed to explore the experience of parents with speech delayed children in Garut, Indonesia. A descriptive phenomenological approach was used to explicate the knowledge of parents about speech delay, the experience of parents with children suffering from speech delay and parental support provided to children with speech delay. In-depth audio-taped interviews were conducted with the ten participants who met the inclusion criteria for this study. The transcripts of each participant were analyzed using Colaizzi's approach. The major themes discussed in this study include parenting *Practice* associated with speech delay in children, parents' feeling when they found out that they have speech delay children, and parents' support towards the treatment of speech delay in children. The findings generated in this study confirmed that parents have a key role to play in the development of their children's speaking skills at the early childhood stage. This study also revealed that the immense patience and unwavering support of parents are crucial to the successful treatment of speech delay in children.

Keywords— *Speech Delay; Children; Parents*

I. INTRODUCTION

Speech delay in children can be described as a delay in the use and development of the mechanisms required to produce speech in children [1].

In the United States, 3-10% of pre-school children experience speech delay and 40-60% of pre-school children experience language delay and this condition persists in pre-school children until they reach primary school age [2]. Some of the problems associated with speech delay in children include poor academic achievement, reduced IQ, and psychosocial problems. Boys are three to four times more likely to experience speech delay compared to girls [1], [2]. Speech delay in children is typically characterized by speech disorder and expressive language disorder (the inability to use verbal language) and other effects of speech delay in children include mixed language disorder, phonological disorder, poor vocabulary processing development, limited knowledge of vocabulary, grammatical errors, and difficulty in repeating words and long sentences that are in accordance with the child's age [1], [3]. Children whose speech or language impairment are untreated may exhibit poor communication skills and learning disabilities, if untreated speech delays in children that are 5 years old or younger, may result in reduced reading ability, poor verbal and spelling skills, behavioral problems and psychosocial adjustment disorders [4], [5]. This condition may also result in poor academic achievement and reduced IQ that may persist in the adulthood stage [1], [3]. Speech delay affects the quality of life of children, quality of life can be defined as the perception of an individual's position in life, based on his/her cultural systems and values. Quality of life is a broad concept that is related to the goals, expectations, standards, and worries of an individual [4], [6]. This concept is affected by the individual's physical health, psychological states, personal beliefs, social relationships as well as the relationships of the individual with his/her environment [4],

[6]. The role of nurses is not only to provide nursing care but to also cater for children with special needs, nurses are also expected to educate parents about their child's growth, development and speech stimulation [1], [7], [8]. A nurse should be concerned if a toddler does not babble between the ages of 12 to 15 months, does not understand a simple command at the age of 18 months, does not speak at the age of 2 years, does not make sentences at the age of 3 years, or experiences difficulties in telling a simple story at the age of 4 or 5 years old, these are the signs and symptoms of speech delay in children [1], [7].

II. RESEARCH PURPOSES

This study aimed to explore the knowledge of parents about speech delay, the experience of parents with children suffering from speech delay and parental support provided to children with speech delay. The findings generated in this study contributes to existing knowledge about speech delay and suggests possible solutions to the problems associated with speech delay in children.

III. RESEARCH METHOD

A descriptive phenomenological approach was used to explicate the experience of parents with children suffering from speech delay at Diego clinic, Garut. Thus, the participants of this study were parents with children suffering from speech delay. A purposive sampling technique was used to select the total number of participants for this study. The inclusion criteria for this study include parents of children with speech delay, parents who communicate well with their children, the willingness of parents to participate in this study, and children undergoing speech delay therapy. This research study was conducted for a duration of three months. A total number of 10 respondents met the inclusion criteria for this research study. The data collection technique used in this study was interviewed. The total duration of the interview was 60 minutes; the first 5 minutes of the interview was used to open the conversation and reveal the intent and purpose of the interview, the next 45-55 minutes of the interview was used to obtain information about the experience of parents with children suffering from speech delay while the last 5 minutes of the interview was used to conclude the interview process and analyze the transcripts of participants. The transcripts were analyzed using the 7-step approach developed by Colaizzi (1973) [9]. The researchers interviewed participants by using audio recordings, transcribed, read and extracted important statements. The researcher wrote the theme of the phenomenon and was validated by each participant.

The ethical considerations of this research study include informed consent, anonymity, confidentiality, risk-benefit analysis, conflict of interest and voluntary participation.

IV. RESULTS AND DISCUSSION

A. Parenting Practice Associated with Speech Delay in children

The initial pattern that emerged from the response of participants in this study was their parenting practice. The analysis of the pattern revealed that most of the participants used parenting *Practice* that were not suitable for the growth

and development of their children. For example, a participant said: if my kid is at home, he often watches cartoon on TV that uses English audio so that when he's grown up, he can speak English. If he cries, I give him cellphone to play with so he stops his crying. If he continues to cry, I feel stressed out and tired because I also have something to do to work with. Another participant stated that: I am very busy with my work both at home and office, so I don't have time to play with my child and talk to him because when I get home, it is already late and my child has already fell asleep.

The result of this research study suggests that speech delay may have occurred as a result of the use of unsuitable parenting practice and the low-quality input of parents towards the development of their child's vocabulary [10]. In the early childhood stage (play age), playing and interacting with adults (parents or caregivers) and other children enables them to develop the social, emotional, and behavioral skills of pre-school children and this interaction also reduces the feeling of fear and anxiety in children [11]. playing also increases the self-esteem of children and improving their communication skills [7], [11], [12]. However, children should only be allowed to play games that are suitable for their age, this can be determined by using the Montessori curriculum [13], [14]. Parents should participate in creative speaking activities in order to improve the speaking skills of their children. Children have to learn only one language until they reach the age of five. Children who live in 2 language environment causes them to use 2 mixed language that leads to the decreasing of speaking ability even speech delay [10], [15].

B. Parents' Feeling When They Found Out That They Have Speech Delay Children

All the participants of this study stated that taking care of children with speech delay requires a lot of patience. Some of the participants expressed that they find it difficult to understand their children's body language. One of these participants said: *I have to be extra patient with my child because he cannot speak, only pointing out to the things he wants or when he wants to eat or drink. Even when he tries to speak, my child only speaks gibberish that is not comprehensible just like aaa, eeu, miiuuu.*

Other participants stated that they feel tired and stressed out when they do not understand their children's body language. One of these participants said: *sometimes I don't get what my child wants. He just points his finger, imitating a certain activity and my child is often angry and throws things while he cries on the floor because he cannot get what he wants because I don't understand his wish.*

Based on the information obtained in this study, it can be inferred that a lot of patience is required to parent a child suffering from speech delay. It takes patience for a parent to fully understand the body language of children suffering from speech delay. Speech delayed children often exhibit speech disorders (such as stuttering, articulation disorder, or unusual sound quality) that makes it difficult for their parents to understand what they are trying to say. These children often experience difficulties in learning the arrangement of words in sentences (syntax), the meaning of lexicons (semantics), the rules and systems for speech and sound production

(phonology), the units and meaning of words (morphemes), and the use of language, particularly in the social context (pragmatics) [1], [3]. Children who experience speech delay may become frustrated and experience social anxiety disorder [16]. Parents get worried, anxious and stressed when their children find it difficult to express themselves using vocalizations [14].

C. Parents' Support towards the Treatment of Speech Delay in Children

All the participants of this study stated that they encouraged their children by showing them love and affection. One of the participants said *after I found out that my child has speech delay problem, I improve myself by giving him a better attention and affection than ever before. I encourage him when he is on therapy and I hope that my child is able to talk soon.* Some participants stated that they spent most of their time playing with their children while others stated that they accompany their children to all the speech therapy sessions scheduled by the therapist. The participants also enrolled their children in a playgroup to enable them to socialize with their age mates. One of the participants said *before I found out that my children has speech delay issue, my wife and I often went home late, but now I come home in the afternoon and I don't bring my work home with me. At home, I play with my child and we try to avoid TV when our child is around. I also take my child to therapy at Diego clinic 2 times a week and I enroll my child to playgroup so that he can meet and socialize with other children on his age.* Parents have a crucial role in diagnosis, screening and successful speech therapy of their speech delayed children [3], [17], [18]. There are three major factors that influence parents' willingness to participate in their children's therapy include parents' motivational beliefs, parents' perceptions of invitations to be involved and life context of parents and children [17]. Interventions for children with speech and/or language disorder can be done directly or indirectly at home, a health service center, a pre-school education (PAUD), a school or a private sector and these interventions can be done by health workers, family, teachers or teacher assistants [1]. Direct intervention focuses on individual or group treatment of children, depending on their age, specific needs, type of therapy and facilities needed [3]. It is estimated that children interact and learn from each other in group care. Group care is a traditional method of indirect intervention that involves the facilitation of communication by an adult in the children's inner circle and this approach creates a good communicative environment for children by facilitating the interaction between children and parents. Most often, parents are actively involved in giving intervention to younger children but tend to become less actively involved as children grow older [2], [3]. Indirectly intervention used by occupational therapists example Sensory Integration Therapy and Applied Behaviour Analysis Therapy [19]–[21].

V. CONCLUSION

This study explored the experience of parents with children suffering from speech delay. The findings generated in this study confirmed that parents have a key role to play in the development of their children's speaking skills at the early

childhood stage. Some of the ways in which parents can support their speech delayed children include spending time to play with their children, allowing their children to play with games that are suitable for their age, enrolling their children in a playgroup and accompanying their children to all the speech therapy sessions scheduled by the therapist. Furthermore, the immense patience and unwavering support of parents is crucial to the successful treatment of speech delay in children.

VI. LIMITATIONS OF THE STUDY

The Limitations Encountered In This Study Include The Low Number Of Participants Involved In This Study. Thus, The Results Of This Study Cannot Be Generalized To Fit The Whole Population Of Parents With Speech Delayed Children

REFERENCES

- [1] P. Shetty, "Speech and language delay in children: A review and the role of a pediatric dentist," *J. Indian Soc. Pedod. Prev. Dent.*, vol. 30, no. 2, p. 103, 2012.
- [2] Nelson, Nygren, Walker, and Panoscha, "Screening for speech and language delay in preschool children: Systematic evidence review," *Pediatrics*, vol. 117, no. 2, pp. 1–6, 2006.
- [3] J. Law, D. Ja, C. Jjv, J. Law, D. Ja, and C. Jjv, "Speech and language therapy interventions for children with primary speech and / or language disorders (Protocol)," *Cochrane Database Syst. Rev.*, vol. Art. No.:, no. 1, pp. 1–23, 2017.
- [4] T. Gomersall *et al.*, "Measuring quality of life in children with speech and language difficulties: a systematic review of existing approaches," *Int. J. Lang. Commun. Disord.*, vol. 50, no. 4, pp. 416–435, 2015.
- [5] H. F. Wertzner and Luciana de Oliveira Pagan-Neves, "Differentiating speech delay from disorder: Does it matter?," *Top. Lang. Disord.*, vol. 31, no. 2, pp. 96–111, 2011.
- [6] A. B. Zerbeto and R. Y. Chun, "Quality of Life of Caregivers of Children and Adolescents with Speech and Language Disorders.," *J. da Soc. Bras. Fonoaudiol. CoDAS*, vol. 25, no. 2, pp. 128–134, 2013.
- [7] E. Bazoni, S. Maia, and R. I. Hirooka, "Understanding nurses' awareness as to the use of therapeutic play in child care* Compreendendo," *Rev Esc Enferm USP*, vol. 45, no. 4, pp. 837–844, 2011.
- [8] A. B. Brown and J. H. Elder, "Communication in autism spectrum disorder: a guide for pediatric nurses," *Pediatr. Nurs.*, vol. 40, no. 5, pp. 219–225, 2014.
- [9] P. F. Colaizzi, "Reflection and research in psychology; a phenomenological study of learning." Kendall/Hunt Pub. Co., Dubuque, Iowa, p. xi, 179 p., 1973.
- [10] N. Pancsofar and L. Vernon-Feagans, "Mother and father language input to young children: Contributions to later language development," *J. Appl. Dev. Psychol.*, vol. 27, no. 6, pp. 571–587, 2006.
- [11] K. Koukourikos, L. Tzaha, P. Pantelidou, and A. Tsaloglidou, "The Importance of Play During Hospitalization of Children," *Mater. Socio Medica*, vol. 27, no. 6, p. 438, 2015.
- [12] A. Chinesh, M. Kamalian, M. Eltemasi, S. Chinesh, and M. Alavi, "The Effect of Group Play Therapy on Social-Emotional Skills in Pre-School Children," *Glob. J. Health Sci.*, vol. 6, no. 2, pp. 163–167, 2013.

- [13] A. S. Lillard, "Playful learning and Montessori education," *Am. J. Play*, vol. 5, no. 2, pp. 157–186, 2013.
- [14] K. Love, "Montessori Techniques : Not Just Child ' s Play," no. December, pp. 21–24, 2007.
- [15] M. R. Mclaughlin, "Speech and language delay in children.," *Am. Fam. Physician*, vol. 83, no. 10, p. 1183–1188 6p, 2011.
- [16] A. P. Nicolielo, J. Montenegro, P. Arruda, and S. A. Lopes-herrera, "Speech-language therapy based on behaviorist perspective in pervasive development disorder : case report Intervenção fonoaudiologica baseada na perspectiva comportamental," vol. 16, no. 4, pp. 1351–1360, 2014.
- [17] G. Jane, "Parents and Speech Therapist Perception of Parental Involvement in Kailila Therapy Center , Jakarta , Indonesia," vol. 6, no. 8, pp. 111–118, 2015.
- [18] J. Marshall, J. Goldbart, and J. Phillips, "Parents' and speech and language therapists' explanatory models of language development, language delay and intervention," *Int. J. Lang. Commun. Disord.*, vol. 42, no. 5, pp. 533–555, 2007.
- [19] B. Elenko, "Effectiveness of Occupational Therapy in Early Intervention of Global Developmental Delay: Case Presentation," vol. 3, no. 6, 2016.
- [20] P. Statement, "Sensory Integration Therapies for Children With Developmental and Behavioral Disorders," *Pediatrics*, vol. 129, no. 6, pp. 1186–1189, 2012.
- [21] P. D. Luyben, "Applied Behavior Analysis: Understanding and Changing Behavior in the Community—A Representative Review," *J. Prev. Interv. Community*, vol. 37, no. 3, pp. 230–253, Jun. 2009.