Evaluation of screening for speech/language and non-speech/language outcomes

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Language problems have impact on school success (Beichtman et al., 1996, Nelson et al., 2006), behavior (Coster et al., 1999), and quality of life (Van Agt, 2011). Also the comorbidity with other developmental disorders like dyslexia, ADHD and ASS is high (Gerrits, 2011). Psychological wellbeing depends on the interaction with others (Steenbeek & Geert, 2007), in which speech and language are important tools.

Identification of children at risk for speech and language delays and related problems may lead to appropriate follow-up and interventions at a young age, when chances for improvement are best (Nelson, 2006). Therefore, it is of great importance to monitor the speech and language development and its consequences during early childhood.

In the Netherlands, several protocols exist to detect children with speech and language delay and to guide them to appropriate care. Though, the balance between health benefits, costs, scope and adverse results of these protocols are not evaluated. In 2009, the RIVM and the NCJ formulated a practice based guideline for the screening of children with speech and language delays in Child Health Care (CHC). This position statement is based on consensus in the field.

The goal of this study is to collect evidence for the scientific underpinnings of the current practice-based guidelines of the NCJ. We want to evaluate the improvements of speech and language outcomes as well as non speech and language outcomes a year after CHC-screening 2-year-old children.

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