Monthly alert results: speech sound disorders and others in children, October 2026

Evidence search report

Completed: 5th October, 2026

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Contents

A. Search terms and notes

B. How to access full text

C. Search results

i. Review Articles - click titles below to go to the abstract and link to full text. Results are arranged alphabetically by title:

1. A Systematic Review on Patient and Public Involvement in Research on Childhood Communication Difficulties.
2. Active Ingredients in Quantitative Dosage for Children With Phonological Impairment: A Scoping Review.
3. Augmentative and alternative communication (AAC) interventions that promote commenting: a systematic review.
4. Caregiver-Implemented Early Language Interventions for Latine Children With Language Delays: A Systematic Review.
5. Characteristics of Developmental Language Disorder in Adults: A Scoping Review
6. Children's Rights to the Best Possible Care: Establishing Processes for Data Collection in Routine Care to Address Questions of Intervention Effectiveness for Children With Speech Sound Disorder
7. Does More Speech Therapy Lead to Better Results in Childhood Apraxia of Speech? A Systematic Review and Meta-Analysis of the Available Evidence
8. Effectiveness of Caregiver-Mediated Spoken Language Interventions for Children Under Five at Risk of Developmental Language Disorder: A Systematic Review and Meta-Analysis
9. Evidence for the Treatment of Co-Occurring Stuttering and Speech Sound Disorders in ChildrenA Scoping Review
10. Evidence-Based Interventions for Young Dual Language Learners With or at Risk of Language Impairment: A Scoping Review.
11. EXPRESS: Progress and perspectives on developmental language and reading disorders
12. Immediate Effects of Delayed Auditory Feedback on Stuttering: A Systematic Review and Meta-Analysis of Literature Published 2000-2024.
13. Labelling, Defining and Classifying the Active Ingredients in Oral Language Interventions for Children With or at Risk of Developmental Language Disorder: A Systematic Review and Qualitative Synthesis.
14. Language Sample Analysis in Bilingual Children: A Meta-Analysis of Diagnostic Accuracy.
15. Morphological awareness intervention in children with Developmental Language Disorder: A systematic review.
16. Preterm children's early language development: Language-specific and domain-general child-related precursors.

17. Shared Decision Making Interventions for Parents of Children on the Autism Spectrum: A Systematic and Scoping Review.
18. Social-Emotional Development of Young Children Who Stutter: An Overview of Empirical Studies
19. The relationship between bullying and stuttering in schoolchildren: scoping review.

ii. Original Research and Other Journal Literature

1. Vowel duration spelling in children with developmental language disorder: More errors, but affected by similar cues
2. "To the Children, We Are Not Invisible": Roles and Practices of Early Intervention Interpreters
3. 'What Do You Mean by That? What Should I Do? What Should We Practice at Home?' Parental Perspectives on Multilingual Communication and Collaboration in Speech and Language Therapy.
4. A multidimensional investigation of the oral language abilities of Australian school entrants.
5. A nonrandomised feasibility evaluation of a home-based intervention for parents of adolescents with learning disabilities, with or without autism.
6. AAC narrative intervention for children with autism.
7. ABRACADABRA literacy instruction delivered by speech-language pathologists to children with autism during the COVID-19 pandemic.
8. Altered gray matter network segregation and disrupted interregional connectivity in children with persistent developmental stuttering: a graph-theoretical morphometric study
9. An Early Lexical Screening Tool for British English: Psychometric Properties and Clinical Utility.
10. An Intelligent Multimodal Framework for Personalized Autism Spectrum Disorder Assessment and Therapeutic Support
11. An Investigation into Referrals Placed Following Positive Screening With the Modified Checklist for Autism in Toddlers, Revised With Follow-up
12. Analysis of neural coding of speech in monaural and binaural conditions in children with speech sound disorder.
13. Application of machine learning techniques to automate speech mispronunciation detection in children and adolescents.
14. Applying the "Neurospeech Therapy" Approach to the Organization of an Adaptive-Preventive Environment for Children with Early Speech Delay
15. Assessing Communication in Children with Complex Communication Needs: Development of the Italian IVCAA Structured Interview
16. Assessing the Reliability of Telehealth Geriatric Screening in Older Adults Undergoing Surgery
17. Assessment of pragmatic language in Turkish-speaking children: Development and psychometric evaluation of the PLSAS scale.
18. Association between auditory processing and behavioral problems in preschool children with developmental language disorder
19. Association Between Screen Time and Expressive Language Delay Among Toddlers in Urban Rourkela, India: A Cross-Sectional Study
20. Association of Access Challenges and Family Support With Language Development for Children With Hearing Loss.
21. Associations between self-rated stuttering severity and multidimensional stuttering impact.
22. Atropine for the treatment of paediatric sialorrhea: a retrospective case series
23. Babble Boot Camp© for Preterm Infants: A Trial of a Proactive Speech/Language Intervention
24. Bilingual Exposure Does not Delay Language Development in Preterm Toddlers: Findings From 24 to 30 Months
25. Characterizing Caregiver-Child Interactions Through a Transactional Lens: A Baseline Analysis of a Caregiver-Implemented Intervention.
26. Clarifying Neuroplasticity Claims in Parent-Led Early Stuttering Intervention: A Response to Onslow et al. (2026)...Onslow M, Hearne A, Yu K et al. How Simple Can a Treatment for Early Stuttering Be? A Proposed Two-Factor Early Intervention. American Journal of Speech-Language Pathology. 2026;35(2):422-430.
27. Clinical characteristics and outcomes of referrals for speech and language delay to the Speech Therapy and Audiology department at a district hospital in Gauteng, South Africa

28. Clinical usability and utility of a French dynamic assessment tool of speech stimulability for children with speech sound disorders: a survey of speech-language therapist's opinions.
29. Cognition and language of 2-year-old very preterm children measured using brief validated parental report instruments: a cross-sectional study.
30. Combining Nonword and Sentence Repetition to Identify Developmental Language Disorder.
31. Communication and feeding skills in Rett syndrome: Case report
32. Comparison of learning text vs. picture symbol AAC representations for young children on the autism spectrum.
33. Conceptualisation of a culturally responsive speech and language assessment for Ghanaian-English speaking children.
34. Contemporary clinical conversations about stuttering: Telling parents why their child began to stutter.
35. Corrigendum to The role of temperament in stuttering frequency and impact in children under 7 Journal of Communication Disorders 97 (2022) 106201...Delpeche S, Millard S, Kelman E.
36. Cortical auditory response and language development in children with microcephaly by Zika virus.
37. Cultural, familial, and technological factors influencing AAC implementation for non-speaking autistic children in the Arab community in Israel
38. Deconstructing the Diet-Language Myth in Autism: A Divergent V-Type Model
39. Defining Language Profiles in Young Autistic Children Across Verbal, Speaking, and Generative Dimensions.
40. Development and Pilot Testing of Virtually Simulated Intervention for Patients Having Stuttering
41. Developmental stuttering with common and complex phenotypes
42. Discharge of children with developmental language disorder by Croatian speech-language pathologists: A qualitative study of influential factors.
43. Does Auditory Stimulation Matter? A Single-Subject Design Examining the Active Ingredients Within a Modified Cycles Approach.
44. Does the Sequencing Between a Verb and an Action Impact Learning for Children With Developmental Language Disorder? A Feasibility Study of a New Experimental Paradigm
45. Dyslexia with and without developmental language disorder: Profile analysis
46. Early Identification of DLD in Paediatric Practice: A Pilot Validation of the CLAP Screening Tool in Italian Outpatient Settings.
47. Early Mobile Screen Exposure and Developmental Trajectories: Pathways from Device Use to Speech Delay and Co-occurring Psychological Difficulties in Children Aged 1-4 Years
48. Early Screening for Developmental Language Disorder: Predictive Validity of German Parent Reports.
49. EEG microstate reconfiguration across cognitive states in preschool children with developmental language disorder
50. Effectiveness of Virtually Simulated Intervention for Patients Having Stuttering
51. Effects of group-based music therapy combined with speech therapy on language and social skills in preschool children with autism spectrum disorder: An exploratory randomized controlled trial.
52. Efficacy of Low Glycemic Index Diet Versus Modified Atkins Diet and Gluten Free Casein Free Diet as add-on Therapy With Standard of Care in Children With Autism Spectrum Disorder - A Randomized Controlled Trial
53. Effortful Control and Perceptual Sensitivity in Relation to Social Communication Skills in Preschoolers With Developmental Language Disorder
54. Engaging Spanish-Speaking Families From Low-Income Households With Children With Language Delays: Recruitment Strategies and Costs
55. English-Language Autism Terminology Preferences of Autistic People and their Parents in the United States: Clustering Illuminates Diverse Views.
56. Enhancing the Prospective Acceptability of a Paediatric Speech and Language Therapy Intervention With Parents From Under-Represented Communities.
57. Epilogue: language abilities in persons with dyslexia
58. Estimated Prevalence of Developmental Language Disorder Risk in West Virginia Schools
59. Evaluating caregiver satisfaction with speech and language teletherapy: a comprehensive survey on effectiveness and accessibility.

60. Evaluating Phonological Short-Term Memory in Children with SLI: A Comparative Analysis of Serial Order, Item Information and Nonword Repetition Tasks.
61. Evaluating the Diagnostic and Concurrent Validity of the DREAM-IT in Mandarin-Speaking Toddlers With Autism Spectrum Disorder and Developmental Language Disorder.
62. Examining Percent Consonants Correct Produced by Preschool Children With and Without Cleft Palate Using the American English Phrase Sample
63. Executive Functions in Children with Speech Sound Disorders: A Qualitative Content Analysis of Studies Conducted in Turkiye
64. Expanding the Phenotypic Spectrum of NUS1-Related Disorders: A Case of Childhood-Onset Parkinsonism
65. Exploring diagnostic language assessment practices in South Africa: A national survey
66. Exploring parental and caregiver knowledge, reactions, and reported practices toward childhood stuttering in Egypt: a cross-sectional study
67. Exploring the relationship between auditory processing characteristics and cognition in preschool children with developmental language disorder based on fNIRS
68. Factors Impacting Treatment Decisions in Caregivers of Autistic Children
69. Foundations for pediatric vocal biomarkers: age-aware phoneme recognition and latent-space error analysis
70. Honoring Children's Communication Rights: Listening to the Perspectives of Children Who Stutter Using Drawings, Self-Report Measures, and Interviews
71. How changes to frequency of treatment and mode of treatment improved paediatric speech-language pathology services: A pragmatic clinical trial.
72. Immune response and stuttering: the potential link between cytokines and stutter.
73. Impact of Consanguineous Marriage on Hearing Loss and Subsequent Speech and Language Delay in Under-Five Children: A Focused Case-Control Analysis
74. Impact of Immunotherapy Addition on Dose Density and Clinical Outcomes of Neoadjuvant Chemotherapy for Triple-negative Breast Cancer: A Retrospective, Real-world Study From Multiple Centers in London, UK
75. Impact of Maternal Postpartum Depression on Developmental Outcomes in Children up to Three Years of Age: A Retrospective Cohort Study in Japan.
76. Interactive Effects of Executive Function and Language Ability on Children's Cross-Situational Word Learning.
77. Investigating the Effects of Adding Explicit Teaching and/or Signing to Story-Based Vocabulary Intervention for School-Aged Children With (Developmental) Language Disorder
78. Language Adaptation of Young Bilingual Autistic Children During Semi-Naturalistic Interactions With Their Caregivers.
79. Let's read together: An examination of augmentative and alternative communication supported interactive reading in the classroom
80. Listener Ratings of Stuttering: Evaluating Two Auditory-Perceptual Scales.
81. Longitudinal Analysis of Developmental Trajectories in Children With Language Delay.
82. Longitudinal case study of syntactic, lexical and articulation rate development at stuttering onset in a young Japanese child.
83. Many Moving Parts: A Motor-Based Perspective on Developmental Speech and Language Research in Neurodevelopmental Disorders.
84. Morphemes matter: A small scale randomised control trial of vocabulary intervention focusing on affixes for adolescents with (developmental) language disorder.
85. Morphological skills among native Arab kindergarteners with developmental language disorders
86. Multimodal Language Processing in Children With Developmental Language Disorder: The Influence of Verbal and Visuospatial Memory
87. Multimodal predictors of spoken vocabulary development in autism: the role of early childhood brain and behavior.
88. Narrative performance and working memory performance in Saudi children with speech sound disorder
89. Narrative production in English speaking children aged 5-7 years with typical language development and developmental language disorder: Development of a reference data set
90. Narrative Tell and Retell in Mandarin--English Bilingual Children.
91. Navigating Mixed-Neurotype Dialogue: Environmental and Affective Influences on Autistic Speakers.

92. Network Models for Assessing the Co-occurrence Between Stuttering and ADHD.
93. Neuropsychological and Emotional-Behavioral Profiles in Pediatric Duchenne Muscular Dystrophy: A Single-Center Clinical Study
94. Not So Simple, and Not So Fast: The Limits of Speech Rate and Turn-Taking Modifications for Treatment of Early Stuttering. A Response to Onslow et al. (2026)...Onslow M, Hearne A, Yu K et al. How Simple Can a Treatment for Early Stuttering Be? A Proposed Two-Factor Early Intervention. American Journal of Speech-Language Pathology. 2026;35(2):422-430.(9p).
95. Novel Proactive Speech-Language Intervention Is More Effective Than Usual Care: Randomized Controlled Trial of Babble Boot Camp for Infants With Classic Galactosemia
96. Oral language acquisition difficulties in patients with early-onset schizophrenia or bipolar disorder.
97. Parent perspectives on services available to autistic children in Canada: A mixed methods survey study
98. Parent-Mediated Home-Based Behavioural Intervention for a Preschool Child with Autism Spectrum Disorder: A Single-Case Intervention Study
99. Parent-reported benefits, barriers, and experiences of augmentative and alternative communication use among children with autism in Nablus, Palestine: a cross-sectional study
100. Parental contributing factors in school placement decisions for children with autism spectrum disorder in South Kerala.
101. Parental Perspectives and Experiences of Working With Speech and Language Therapists to Support Home Practice for Their Child With a Speech Sound Disorder: A Qualitative Study.
102. Personal Narrative Assessment to Guide Clinical Practices in the Assessment and Support of Children With Developmental Language Disorder: A Tutorial
103. Phenotypic and Genetic Insights Into CNOT3-Related Intellectual Developmental Disorder of Speech Delay, Autism, and Dysmorphic Faces (IDDSADF) From the First Two Japanese Cases
104. Phonological Awareness and Nonword Repetition in Children With and Without Speech Sound Disorders: A Comparative Analysis.
105. Phonological Processing Skills in Arabic-Speaking Children Who Stutter.
106. Play-Based Naturalistic Augmentative and Alternative Communication (AAC) Intervention: Educator Fidelity and Effects on Communication and Peer Interactions
107. Practices and perspectives of speech-language pathologists in the assessment of multilingual children: A survey of clinicians working in the Republic of Ireland.
108. Predicting early intervention outcomes in autism via individual participant data mega-analysis
109. Predictors of Word Learning With and Without Retrieval Practice in Children With Developmental Language Disorder.
110. Preliminary findings into speech inconsistency in dialectal Cypriot-Greek speaking children: A comparison between children with typical development and speech sound disorders
111. Preoperative Speech Impairments as Precursors of Posterior Fossa Syndrome in Children with Brain Tumours.
112. Preschool teachers' use of embedded learning opportunities to support young children with disabilities in inclusive settings
113. Prologue: language abilities in persons with dyslexia.
114. Psychotropic medication use in school-aged children in foster care and residential care within child protective services
115. Quality of Life and Societal Cost in Autistic Children: An Exploratory Comparative Study Pre- and Post-Diagnosis
116. Rapid syllable transition treatment (ReST) in children with speech motor delay: case studies
117. Re-Evaluating the Role of Statistical Learning: Domain-General Predictors of Language in Typical and Atypical Development
118. REAL-WORLD ECONOMIC BURDEN AND HEALTHCARE UTILIZATION DRIVERS IN AUTISM SPECTRUM DISORDER: A LONGITUDINAL ANALYSIS OF EHR AND CLAIMS DATA (2017-2025)
119. Recovery from semantic prediction violations during sentence processing in preschoolers with and without developmental language disorder
120. Response to the Letters by Chang and Bernstein Ratner...Bernstein Ratner N. Not So Simple, and Not So Fast: The Limits of Speech Rate and Turn-Taking Modifications for Treatment of Early Stuttering. A Response to Onslow et al. (2026). Am J Speech Lang Pathol. 2026 Sep 8;35(5):2493-2495.

121. Rhotic Generalization Is More Rapid in Biofeedback Than Motor-Based Treatment for Residual Speech Sound Disorder: Secondary Outcomes of a Randomized Controlled Trial.
122. Sentence repetition as a potential indicator of broader language difficulty in students with dyslexia: A pilot study
123. Severity-Coded Self-Disclosure Cues and Adult Listener Perceptions of an Adolescent Who Stutters: An Exploratory Study
124. Social Disadvantage and Language Disorder: Is Dissociating Possible?
125. Social Isolation in Adults Who Stutter: A Mixed-Methods Investigation of Risk and Correlates.
126. South African Speech-Language Therapists' Perceptions of Youth Offenders and Youth Offender Rehabilitation.
127. Speech Perception Profiles in Korean-Speaking Children With Speech Sound Disorders.
128. Speech-Language Intervention in a 12 years Old Child with Autism Spectrum Disorder: A Clinical Case Report
129. Spoken language delay in toddlerhood predicts late childhood language outcomes in dyslexia: evidence from retrospective parent-report
130. Structural Brain Correlates of Speech Disfluency in Early Childhood: A Dimensional Analysis in a Population-Based Cohort.
131. Study protocol of the Speech of children After Neonatal Encephalopathy (SANE): a single-centre prospective cohort study.
132. Stuttering Stroke: Postvaricella Arteriopathy in a Toddler
133. Supporting a child with cerebral palsy associated with autism spectrum disorder: Clinical issues and adaptations in care
134. Temperament Profiles and Their Association With Stuttering-Related Outcomes in a Clinical Cohort
135. The contribution of maternal sensitivity to children's behavior problems: A longitudinal study of Arab-speaking children with speech and language conditions
136. The effect of teacher education supported through consultation on acquisition communication skills in children with autism spectrum disorder.
137. The effectiveness of teletherapy for developmental language disorder in India
138. The efficacy of group language training combined with picture exchange communication system for children with autism spectrum disorder
139. The experience of stuttering among adolescents in Iran: A cross-cultural study
140. The Impact of Hospitals on Language Learning: A Case Study of a 3-Year-Old Boy With Developmental Delay Who Needed Augmentative and Alternative Communication.
141. The Relationship Between Dynamic Assessment of Analogical Reasoning and Syntax in French-Speaking Children With and Without Developmental Language Disorder
142. The Use of a Visual Scene Display for the Acquisition of Manding in Young Children with Complex Communication Needs
143. The use of AAC by children with autism in special education classrooms in Malaysia: perspective of special education teachers and parents
144. The Utility and Robustness of Sentence Repetition as a Marker of Developmental Language Disorder: An Analysis of the Surrey Communication and Language in Education Study Project Data.
145. Understanding social anxiety in adolescents who stutter: A multi-informant study of the roles of stuttering severity, parenting styles, social participation and speech avoidance.
146. Uptake and Evaluation of a Crosslinguistic Nonword Repetition Test in Clinical and Research Contexts.
147. Using latent profiles to evaluate response to a language-based intervention
148. Validating the Screening Tool for Autism in Toddlers and Young Children (STAT) in children aged 24-36 months in a low- to middle-income setting
149. Variability of Preschool Stuttering During a Day.
150. Verbal Mediation During Shifting in School-Aged Children With Developmental Language Disorder
151. Virtual adaptation of Camp Dream. Speak. Live.: Clinical outcomes of an intensive CARE Model intervention for children who stutter.
152. Virtual Reality Attention Tasks in Attention Deficit Hyperactivity Disorder: I. Behavioural Responses.

153. Visual Perspective Taking Training Improves Theory of Mind in Autistic Children
154. Vocabulary Breadth and Depth in Adults With Developmental Language Disorder
155. Vocabulary performance of Malay school-age children in Malaysia: Starting points to developing language assessments for older children with developmental language disorder (DLD)
156. What do they say and how? A comparative syntactic characterization of children with and without Developmental Language Disorder in European Portuguese.
157. When Silence Masks Autism: Delayed Autism Diagnosis in an Adolescent With Deafness

D. Search strategy

E. Disclaimer

A. Search terms and notes

Sources searched (number of results in brackets):

CINAHL (28)
Embase (68)
Ovid Emcare (23)
Ovid MEDLINE (57)
Articles published in month of September 2026 only.
For full search strategy see Section D below.

B. How to access full content

Links are given to full text resources where available. For some of the papers, you will need an **NHS OpenAthens Account**. If you do not have an account you can register online.

You can then access the papers by simply entering your username and password. If you do not have easy access to the internet to gain access, please let us know and we can download the papers for you.

C. Search results

i. Review Articles

1. A Systematic Review on Patient and Public Involvement in Research on Childhood Communication Difficulties.

Yang Zhixing Ho Quynh Brooke Bernard Ria Barrett Liam Howell Peter. *International Journal of Language & Communication Disorders* 2026;61(4): e70281.
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More details

BACKGROUND: The proposal to involve patients and the public (Patient and Public Involvement; PPI) in research is increasingly recognised as important in research concerning speech, language, and hearing and communication difficulties. Whilst there is extensive guidance about PPI involvement by national agencies such as the National Institute of Health Research in the UK, little information is currently available concerning whether these expectations are met in any area of healthcare provision., AIMS: This systematic review aimed to identify, describe and evaluate how PPI has been implemented and reported in research concerning childhood speech, language, hearing and communication difficulties., METHODS: Six electronic databases were systematically searched for eligible studies reporting PPI in these fields. Records were screened against predefined eligibility criteria. Data were extracted on study characteristics, PPI contributors, stages

and methods of involvement, reported impacts, and quality of PPI reporting. The methodological and PPI quality were assessed using MMAT and GRIPP2 Short Form, and findings were synthesised narratively., RESULTS: Twenty-one studies were included. PPI was reported variously across speech, language, hearing and communication topics, the implementations varied considerably. Parents, carers and professionals were more commonly involved than children and young people themselves. Most studies used consultation-based approaches, often during early stages (e.g., study design or material development), while fewer reported involvement in later stages (e.g., dissemination, implementation or evaluation). Reporting was inconsistent, particularly regarding contributor characteristics, accessibility adaptations, decision-making influence, and the impact of PPI., CONCLUSIONS: The systematic review showed that PPI in childhood speech, language, and hearing difficulties has advanced significantly, with the growing interest and number of publications, particularly in the past five years. The review also highlighted challenges such as confusion and heterogeneity of PPI concepts, representativeness issues, tokenistic practices, lack of support given to lay contributors, and limited impact evaluation. Future research should distinguish PPI from research participation, involve children and young people more directly where appropriate, report contributors' roles and influence more transparently, and consider accessibility and communication support throughout the involvement process., WHAT THIS PAPER ADDS: What is already known on the subject Health service providers and research funders now require attention to Patients and Public Involvement (PPI) in healthcare research. PPI highlights the need to work jointly with stakeholders at all steps involved in research to allow them to take governance over their health conditions. Whilst emphasis on PPI applies to health issues in general, there is no specific review of PPI considerations in research on health factors that affect hearing and communication difficulties. This omission is particularly noteworthy when considering issues that arise in early development. What this study adds to existing knowledge A systematic review was conducted to assess current progress with respect to PPI for hearing and communication research in childhood and adolescence. The review identified research involving PPI that met quality requirements. Challenges related to PPI were highlighted in further analyses that revealed confusion and heterogeneity in PPI concepts, representativeness issues, tokenistic practices, a lack of support given to lay contributors, and a limited evaluation of the impacts of PPI. What are the clinical implications of this work? PPI involvement in clinical research for communication and hearing difficulties should have a positive impact on the well-being of children and adolescents. Four challenges were highlighted when considering the current state of research on PPI in this domain: shallow involvement of the public and patients, conflicting expectations between groups participating in research, lack of clarity of research outcomes as they relate to PPI and variable standards of reporting PPI findings across studies. Tentative recommendations concerning how each of these matters could be addressed are offered. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

2. Active Ingredients in Quantitative Dosage for Children With Phonological Impairment: A Scoping Review.

Titterington Jill Rudd Sarah Stringer Helen Pagnamenta Emma Robinson Tomos Harding Sam. *International Journal of Language & Communication Disorders* 2026;61(6): e70339.
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BACKGROUND: Speech Sound Disorder (SSD) reduces speech intelligibility, affecting a child's ability to make themselves understood. If SSD is not resolved in the early years it will negatively impact children's education and general well-being. Effective and efficient speech and language therapy is known to resolve SSD and mitigate these risks. Intervention for SSD is often provided in inadequate dosages to be effective or efficient. Quantitative dosage is an overarching term for the different aspects of intensity of intervention which may impact outcomes. Existing literature on quantitative dosage indicates that more intensive therapy approaches for SSD appear to be more effective and efficient than less intensive delivery. A scoping review of current research in this area will serve to clarify evidence-based knowledge and understanding about quantitative dosage, how it works, and how different components potentially interact to contribute to outcomes for children with phonological impairment (PI) (a sub-type of SSD), informing future service developments and research., AIMS: This scoping review investigates quantitative dosage elements in interventions for 3-8-year-olds with PI within speech and language therapy-led contexts to identify preliminary evidence and inform reflections for practice and future research. It is registered on the Open Science Framework (OSF) registry (https://osf.io/b3as4/)., METHODS: The review followed the Population, Concept, Context framework (Joanna Briggs Institute) and is reported in line with PRISMA guidance for Scoping Reviews. Key information sources were searched, including MEDLINE, CINAHL, PsycInfo, EMBASE. Grey literature searching included the COSMIN, PROSPERO, FigShare and Open Science Framework, Google scholar (advanced search), and SpeechBite. Data extraction included intervention approach, quantitative dosage of intervention delivery, outcome measurement tools, and context. The PAGER framework was used for analysis and synthesis of the identified patterns., MAIN CONTRIBUTION: Seventy-six papers were extracted for the synthesis. Only four studies specifically investigated the impact of quantitative dosage on outcomes. Three patterns developed across the 76 papers:

quantitative dosage is an active ingredient; issues reporting quantitative dosage; characteristics of the evidence base and are discussed in relation to advances in the field, gaps, evidence for practice and research recommendations. Preliminary evidence for practice highlights that aspects of quantitative dosage make an important contribution to effective and efficient intervention for children with SSD. However, rigour and consistency in reporting quantitative dosage should be improved to support translation of evidence to practice and replication of research. The importance of using benchmarked study designs and appropriate methodologies to support robust research to better-inform evidence-based practice is highlighted., CONCLUSIONS/IMPLICATIONS: This scoping review provides preliminary evidence for quantitative dosage in children with PI. The findings are promising, (with evidence of some stronger research designs for example, randomised controlled trials, multiple baseline SCEDs with multiple participants, and replication of findings). However, further robust research, reporting all aspects of quantitative dosage and considering the potential costs and benefits of more efficient, evidence-based quantitative dosages is urgently needed., WHAT THIS STUDY ADDS: What is already known on this subject General findings about quantitative dosage for children with SSD show that reporting on dosage is often absent. When dosage is reported it is often under specified or different aspects of dosage are conflated. Reporting standards for dosage need to be agreed. Further research is required about the specific levels of quantitative dosage optimally required before children with SSD are discharged. Previous reviews have mainly extracted evidence about session numbers, session frequency, session length, and dose of practise items per session, across subtypes of SSD. What this study adds to the existing knowledge This paper specifically considers how all aspects of quantitative dosage are reported on and explored in the literature with a focus on children with phonological impairment (PI). A novel approach following the PAGER framework synthesized the data extracted from the papers to identify Patterns and relate these to clinical practice and research. The key patterns that emerged in this scoping review were: quantitative dosage is an active ingredient; issues reporting quantitative dosage; and characteristics of the evidence base. Advances, Gaps, Evidence for practice and Research Recommendations (the AGER of PAGER) are reported for each Pattern. What are the clinical implications of this study? For children with PI, intervention delivered two to four times weekly is likely to be more cost- and clinically effective than once weekly. More sessions delivered over time with a higher dose of production trials per session are likely to be more effective and efficient than fewer sessions delivered with a lower dose (although an upper threshold may exist). Potentially, more timely intervention is more effective over the longer term, than less timely intervention. Further high-quality research is needed because study design, reporting of quantitative dosage, and exploring the cost benefits of more efficient dosages are weaknesses in current literature. Copyright © 2026 Royal College of Speech and Language Therapists.

3. Augmentative and alternative communication (AAC) interventions that promote commenting: a systematic review.

Spencer Trina D. Tönsing Kerstin Dada Shakila. *AAC: Augmentative & Alternative Communication* 2026;42(3): 285-298.
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Augmentative and alternative communication (AAC) can be used effectively by persons with speech or speech-related disabilities to accomplish a variety of communicative functions. However, the majority of AAC interventions reported in the literature focused on requesting. While it is important to initially teach requesting skills, commenting should not be neglected. As AAC emerges, commenting is essential for social engagement, social closeness and information transfer. The purpose of this systematic review (INPLASY protocol 3160) was to describe and critically appraise the existing research on AAC interventions for commenting. A systematic search and application of inclusion criteria yielded 14 single case design studies that examined the effect of an AAC intervention on commenting of children with communication disabilities. A quality appraisal indicated that the rigor of most studies was acceptable. However, there are areas in which research can be improved, especially around the number of points per phase, blinding of personnel, and clear reporting of procedures. Interventions fell into three types of teaching procedures, including prompt hierarchies, aided modeling and direct prompting. Likewise, three teaching contexts (i.e., book reading, play/toys/preferred activities, intensive teaching) and four types of commenting behaviors (i.e., one-symbol utterances, two-symbol utterances, sentences frames and grammatically correct utterances) were identified. Findings suggest the strongest evidence exists to support the use of least-to-most prompt hierarchies that include aided modeling in the context of book reading. However, there are too few studies to recommend their use with certainty.

4. Caregiver-Implemented Early Language Interventions for Latine Children With Language Delays: A Systematic Review.

López González Ada C. Garcia Nancy Gross Megan C. Andrianopoulos Mary. *American Journal of Speech-Language Pathology* 2026;35(5): 2397-2416.
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Purpose: Empowering caregivers with tools to support their children with language delays can potentially increase access to services for families from diverse backgrounds. The purpose of this systematic review was to describe the outcomes and characteristics of caregiver-implemented early language interventions studied or implemented with Spanish-speaking or bilingual Latine children with language delays. We also examined the extent to which these interventions were culturally and linguistically adapted. Method: Six search engines were used to identify articles published between 1990 and 2024. We completed a hand search of reference lists within eligible articles. We completed data extraction with an emphasis on the intervention's characteristics, outcomes for caregivers and children, and cultural and linguistic adaptations. Results: Ten articles were included in this review. Eight caregiver-implemented early language interventions have been studied with Latine children aged 18-47 months from Spanish-speaking families who exhibit language delays. All studies showed improvements in children's receptive language, expressive language, or both, as well as positive effects on caregivers' behavior. Overall, caregivers were satisfied with the interventions, and few offered suggestions for improvement. Studies using adaptation frameworks reported more comprehensive considerations for cultural and linguistic adaptations. Conclusions: The body of research summarized in this review shows how interventions support Spanish-speaking or bilingual Latine caregivers in using language facilitation strategies, leading to positive outcomes for children's language development. Further research measuring effectiveness is necessary, as is increasing representation from different ethnic backgrounds. Developing and using adaptation frameworks is an important next step for this type of research.

5. Characteristics of Developmental Language Disorder in Adults: A Scoping Review

Morken F. Jones L.O. Helland W.A. *Journal of speech, language, and hearing research : JSLHR* 2026; 1-21.
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PURPOSE: This scoping review aimed to map existing research on characteristics of developmental language disorder (DLD) in adults and describe this body of research. Furthermore, assessment practices used to identify adults with DLD in the included studies were investigated. METHOD(S): A broad search was conducted across three international research databases to identify all peer-reviewed studies on DLD in adults from 1990 onward. The identified studies were collated and presented through numeric and thematic analyses. The numeric analysis comprised the categories publication period, location and language, research groups, main topic, and DLD terminology. The thematic analysis covered group identification, characteristics of language ability, domain-specific and domain-general cognitive characteristics, and biological characteristics. RESULT(S): Though the search was inclusive and spanned 35 years, only 53 studies were identified. Results supported that DLD persists in adulthood and is associated with difficulties in language ability, as well as cognitive and biological characteristics, often recognizable from child studies. There are concerns related to diversity and geographical spread in the research community. Research output over time is modest. CONCLUSION(S): There is considerable heterogeneity in the research base, making it difficult to draw firm and specific conclusions, illustrating a clear need for further research on DLD in adults.

6. Children's Rights to the Best Possible Care: Establishing Processes for Data Collection in Routine Care to Address Questions of Intervention Effectiveness for Children With Speech Sound Disorder

Wren Y. Burr S. Cleland J. Stringer H. Harding S. *Language, speech, and hearing services in schools* 2026; 1-10.
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PURPOSE: The United Nations Convention of the Rights of the Child (CRC) recognizes that all children have a right to the best possible care, CRC Article 24 (health, water, food, environment). For children with speech sound disorder, this is vital in order to protect their rights to CRC Article 13 (sharing thoughts freely), CRC Article 19 (protection from violence), and CRC Article 28 (access to education). Determining what constitutes best possible care for this population is challenging because much evidence for intervention takes place outside of routine care. This review article provides an overview of Phase 1 of the Maximising the Impact of Speech and Language Therapy for Children with Speech Sound Disorder (MISLToe_SSD) program of research, which ultimately aims to establish a process for using data collected in routine care to investigate best possible care for children with speech sound disorder. The purpose of Phase 1 was to obtain consensus on a diagnostic pathway, a defined list of interventions, and a core outcome set. METHOD AND RESULTS: An umbrella review was carried out to provide information on existing evidence. Participatory workshops with speech and language therapists were used to determine the content of the diagnostic pathway, and a card sorting exercise was used to provide a list of interventions currently in use and agree on their definitions. Finally, the core outcome set was agreed through a Delphi

process. Patient and public involvement activities were used throughout the program of work to ensure that the aims and activities were in line with the preferences of those with lived experience of speech sound disorder. CONCLUSION(S): Consensus was reached on the three core aims of agreeing a diagnostic protocol, a core outcome set, and a list of defined interventions. Phase 2 of MISLToe_SSD will establish the feasibility of implementing these within routine care, and Phase 3 will extend the work to multiple services, leading to the large data set required for future analyses. This work has been carried out in the United Kingdom, but work is underway to replicate this work in Brazil, Sweden, Portugal, and other countries and in other languages to establish an international diagnostic pathway, a defined list of interventions, and a core outcome set.

7. Does More Speech Therapy Lead to Better Results in Childhood Apraxia of Speech? A Systematic Review and Meta-Analysis of the Available Evidence

McCabe P. Thomas D.C. Choo J.X.M. Heard R. Ng D. *International journal of language & communication disorders* 2026;61(6): e70337.
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BACKGROUND: In recent years there has been a significant increase in the number and quality of childhood apraxia of speech (CAS) treatment research published. Much of this research has focussed on establishing treatment efficacy and identifying treatment components. A smaller subset of the literature has looked at treatment intensity, such as comparing therapy delivered twice per week with four times per week, however this literature has not been compared across interventions. AIMS: This systematic review and meta-analysis examines cumulative intervention intensity and its components (dose per session, dose frequency, intervention duration-number of weeks) and reported treatment effects to understand whether there is a relationship between dose and effect in specific treatments or overall. METHOD(S): A systematic search and review was registered with Prospero (CRD420251107259). Twelve electronic databases were searched supplemented by handsearching references lists. Included studies were coded for CAS diagnosis confidence, methodological quality, dose characteristics, and treatment outcomes. Standard mean difference (SMD), an effect size metric equivalent to Cohen's d, was calculated for 25 included papers and weighted Pearson's correlations performed to identify relationships between dose characteristics and treatment outcomes. MAIN CONTRIBUTION: This paper is the first to (1) create omnibus standard effect sizes across diverse interventions and (2) show the relationship between intensity and treatment outcome in children with CAS. The omnibus SMD across studies with three or more participants for treated items was 1.22 (confidence interval 0.76-1.67), a large effect, and for generalisation items was 0.66 (confidence interval 0.46-0.85) which is a moderate effect. These results show that CAS treatment works in well-controlled studies when delivered at least twice per week for at least 45 min per session. The relationship between intensity variables and generalisation SMD was less clear with weeks of therapy being moderately correlated (r = 0.39) and none of the other variables showing any relationship with study SMD. These results should be interpreted carefully as there was significant missing data and limited range in some variables. Researchers need to include more standard intensity information in reporting their results. CONCLUSION(S): Treatment for CAS is effective and leads to moderate generalisation; more weeks of therapy leads to stronger gains than fewer weeks of therapy. WHAT THIS PAPER ADDS: What is already known on this subject CAS is a neurological-based motor speech disorder that originates in childhood for which there are a number of effective treatments. For this population, high intensity treatment is recommended-over 100 production trials per session, 2-5 sessions per week, across an extended period. In studies which directly compare intensity of variables, more therapy (e.g. 20 sessions) results in greater improvement than less therapy (e.g. 10 sessions). There are no previous meta-analyses of intensity variables-dose, dose frequency, treatment duration, or cumulative intervention intensity in CAS What this study adds to the existing knowledge This study compiles data from 25 studies with a low risk of bias and high CAS diagnostic confidence in a meta-analysis of the dose effects of CAS treatment. The meta-analysis shows that CAS treatment in general works. Most studies had 2-4 sessions per week across 3-12 weeks. Within this narrow band of intensity, a significant correlation was shown between the number of weeks of therapy and outcome. There is no significant evidence for CAS therapy less frequently than twice per week at this time. Eight different treatments demonstrated efficacy for improving speech outcomes in children with CAS. What are the clinical implications of this study? Provided they are delivered at least twice per week for at least 12 sessions, with greater improvements when treatment extends over more weeks, selection of any of the included treatments should result in improved speech where the child being treated is similar to children in the research. The following treatments were shown to be effective for CAS: Integral stimulation treatments including Dynamic Temporal and Tactile Cueing, Kaufman-Speech to Language Protocol, Motor Speech Treatment Protocol, Nuffield Dyspraxia Programme-3rd Edition, Rapid Syllable Transition Treatment, Speech Motor Chaining and Ultrasound Biofeedback alone and the combination of Speech Motor Chaining with Ultrasound Biofeedback. PRACTITIONER POINTS: Therapy must be sufficiently frequent and sustained: Evidence shows that CAS treatment is effective when therapy is provided at least twice per week, over a minimum of 12 sessions, for 45 min per session with total weeks of therapy being the only intensity variable consistently associated with treatment outcomes.

Dose matters, both within and across sessions: Clinicians should prioritise the number of production trials and ensure adequate cumulative intervention intensity. Sessions with low active practice time or insufficient trials are unlikely to produce meaningful change. Eight treatments are effective for CAS: Integral Stimulation including Dynamic Temporal and Tactile Cueing (DTTC), Kaufman Speech to Language Program (K-SLP), Motor Speech Treatment Protocol (MSTP), Nuffield Dyspraxia Programme (3rd ed; NDP3), Rapid Syllable Transition Treatment (ReST), Speech Motor Chaining (SMC), Ultrasound Biofeedback, and SMC + Ultrasound Biofeedback combined. Clinicians should consider the client's speech needs and overall profile when selecting from the treatments that have demonstrated effectiveness.Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

8. Effectiveness of Caregiver-Mediated Spoken Language Interventions for Children Under Five at Risk of Developmental Language Disorder: A Systematic Review and Meta-Analysis

Johnstone-Cooke V. Rutherford M. Sheripkanova A. Hutcheson R. Hodson A. *International Journal of Language and Communication Disorders* 2026;61(5): e70304.
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Background and Aims: Caregiver-mediated interventions are commonly used by Speech and Language Therapists to support early language development. Developmental Language Disorder (DLD) is associated with reduced quality of life throughout the lifespan. Understanding factors that predict intervention success is essential for developing appropriate, cost-effective therapy provision for the approximately 12% of preschool children who present with early markers for Developmental Language Disorder (DLD). This systematic review and meta-analysis examined the effectiveness of caregiver-mediated spoken language interventions for under-fives at risk of DLD, and factors influencing intervention effectiveness. Method(s): A systematic review following PRISMA guidelines was conducted. Five electronic databases were searched to identify experimental studies comparing caregiver-mediated spoken language interventions to control conditions in under-fives presenting with risk factors for DLD. Risk factors included prematurity, socioeconomic factors, caregiver language development concerns, and formal or informal language screening or assessment scores. Twenty-six experimental studies with 1407 child participants were included in qualitative synthesis. Meta-analysis was performed on nine Randomised Controlled Trials involving 947 children. Result(s): Effectiveness was examined for outcomes including child language gains, child wellbeing, inclusion and attainment. Meta-analysis indicated a significant effect of caregiver-mediated spoken language interventions on language outcomes compared to treatment-as-usual, non-language intervention or waitlist control conditions. Non-language outcomes were evaluated via qualitative synthesis. Interventions significantly improved language development trajectories for under-fives presenting with risk factors or early markers for DLD. Conclusion and Implications: This review contributes to the growing evidence base demonstrating that caregiver-mediated interventions can positively impact language development and wellbeing outcomes for children under five at risk of DLD. These findings support the implementation of caregiver-mediated environmental language interventions in clinical practice to maximise accessibility and cost-effectiveness while delivering optimal outcomes for vulnerable populations. WHAT THIS PAPER ADDS: What is already known on this subject Previous research on caregiver-mediated spoken language interventions has highlighted gaps in the evidence regarding the impact of risk factors, demographic characteristics, dosage and intervention components on child language outcomes. Developmental Language Disorder has relatively high population prevalence, estimated at 7%. Prevalence is associated with risk factors including low household socioeconomic status (SES), prematurity and late language emergence. In contrast to its prevalence, there is low public and professional awareness of DLD and a low diagnostic rate. Therefore, a strengthened evidence base and additional insights into the factors affecting success of family-based interventions is important in order to increase the effectiveness of service provision and care planning for this underserved population. Timely and effective intervention with young children presenting with early markers for DLD has the potential to offer lifelong improvement to their wellbeing, inclusion and attainment outcomes. Recent systematic reviews of the effectiveness of caregiver-mediated language interventions had differences in population age range and diagnostic inclusion criteria. What this paper adds to existing knowledge Our review examines the effectiveness of caregiver-mediated early spoken language interventions on child language, attainment and wellbeing, and on caregiver self-efficacy and adherence to language support strategies. Our population was children under five presenting with risk factors for Developmental Language Disorder, in the absence of other neurodevelopmental or genetic conditions such as intellectual disability or autism. This review adds depth and detail to the evidence base supporting the effectiveness of caregiver-mediated spoken language interventions in improving outcomes for this population of young children, and factors that influence their success. What are the potential or actual clinical implications of this work? The high prevalence of Developmental Language Disorder, estimated at around 7% of the population, and the strong association with risk factors including low SES, prematurity and late language emergence, coupled with the low awareness of DLD and low diagnostic rate, mean that a strengthened evidence base and additional insights into the factors affecting success of family-based interventions can increase the effectiveness of service provision

and care planning for this population. Timely and effective intervention in this group of young children has the potential to improve wellbeing and attainment outcomes across the lifespan. This review contributes to our understanding of how to implement cost-effective, socially valid and maximally engaging partnership working with families of young children at risk for DLD.Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

9. Evidence for the Treatment of Co-Occurring Stuttering and Speech Sound Disorders in ChildrenA Scoping Review

Collins J. Harrison E. Walters J. Unicomb R. *American Journal of Speech-Language Pathology* 2026;35(4): 1868-1885.
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Purpose: This review article aimed to providen overviewa of the information available to guide speech-language pathologists (SLPs) regarding treatment of co-occurring stuttering and speech sound disorder (SSD) in children aged 0-18 years. Method(s): Systematic searches of 10 databases, gray literature sources (e.g., text-books, ProQuest dissertations), and nontraditional sources (e.g., websites, social media) were conducted. The search was limited to sources that were (a) published in 1990 or later, (b) published in English, (c) referenced children (0-18 years old) with co-occurring stuttering and SSDs, and (d) described intervention strategies that targeted either stuttering, SSD, or both disorders concurrently. Result(s): Thirty-four items were identified and extracted. This review article highlighted that there is limited empirical research and information/advice for children with co-occurring stuttering and SSD, with six intervention studies, three survey studies, and two qualitative studies identified. Results revealed 23 sources of expert opinions, including book chapters, journal articles, and websites. Conclusion(s): This review article provides usefula summary of information that is available to guide SLPs managing children within this population. While expert opinions and frameworks offer valuable clinical advice, the review article highlighted gaps in the literature, especially a lack of intervention studies involv-ing children with co-occurring stuttering and SSD.Copyright © 2026 American Speech-Language-Hearing Association.

10. Evidence-Based Interventions for Young Dual Language Learners With or at Risk of Language Impairment: A Scoping Review.

Song Yanling Ohi Sarah. *International Journal of Language & Communication Disorders* 2026;61(5): e70332.
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BACKGROUND: Early intervention professionals, including speech-language pathologists, teachers, and policymakers, face significant challenges in understanding and supporting young dual language learners who have or are at risk of language impairment. The existing research evidence base is fragmented and relatively sparse, and the overall extent and depth of interventions available for different language pairings (the home language and English) remains largely unknown., PURPOSE: This scoping review maps language interventions for dual language learners aged 3 to 9 years with, or at risk of, language impairment, with attention to intervention type, cultural responsiveness, and evidence of cross-language transfer., METHOD: Guided by PRISMA-SCR, four key databases were searched, yielding 29 eligible articles for full-text review., RESULTS: The included articles were comprised of 15 child-based language intervention studies, four caregiver-based intervention studies, six information and communication technology-based intervention studies, and six research reviews. Twenty-one studies focused on Spanish-English dual language learners in the United States. Ten studies incorporated cultural considerations, including home language use, family values, familiar materials, personal narratives, and caregiving routines, while nine reported evidence of cross-language transfer., CONCLUSIONS: Transfer was most consistent for vocabulary, cognates, semantic knowledge, and narrative skills, particularly when interventions incorporated children's first language or targeted shared linguistic features across languages. In contrast, English-only interventions showed limited evidence of spontaneous transfer to children's home languages. The findings identify promising principles related to bilingual intervention, caregiver involvement, culturally involvement, culturally responsive practice, and cross-language transfer, while highlighting an urgent need for language-specific intervention research relevant to Australian multilingual contexts., WHAT THIS PAPER ADDS: What is already known on this subject A review of prior research demonstrated the clear lack of intervention research focused on young dual language learners with learning difficulties. English and Spanish were the most commonly studied language pairings. The overall extent and depth of existing interventions for common home languages in Australia (Mandarin, Arabic, Vietnamese, Cantonese, and Italian) and English dual language learners remain unknown. What this paper adds to the existing knowledge This scoping review provides a map of existing interventions for 3-to-9-year-old dual language learners who are with, or at risk of language impairment, highlighting cultural considerations and cross-language transfer in language interventions. The search revealed that there were no interventions targeting bilingual children whose language pairings are common home

languages in Australia and English for that age-group across the period 2012-2025. What are the clinical implications of this study? This study identified three types of interventions that can serve as a valuable reference for educators and speech-language pathologists working with Spanish-English dual language learners with or at risk of language impairment. Collectively, the evidence underscores the value of culturally responsive intervention and bilingual delivery; suggests that language pairings be carefully considered in intervention design, and that languages with a high degree of lexical overlap can benefit from the use of cognates in intervention. Future research should extend this work by systematically incorporating culturally responsive elements across a wider range of language pairings to better reflect population diversity. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

11. EXPRESS: Progress and perspectives on developmental language and reading disorders

van Bergen E.V. Dawson N. James E. Krishnan S. *Quarterly journal of experimental psychology (2006)* 2026; 17470218261486347.
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Why do some children learn to read or talk more easily than others? We review recent advances in genetics, neuroscience, cognition, and intervention research. About half of the variation in language and reading outcomes is explained by genetic differences. Yet genes and environments are intertwined - for example, children's early language exposure is partly shaped by their parents' genetically influenced traits. Neuroimaging studies show that language and reading disorders involve not only domain-specific brain regions but also subcortical systems supporting learning in general. In cognition, a move beyond identifying core deficits toward understanding how children actively learn offers new insights into diverse developmental pathways. We highlight how interventions not only draw from but also contribute to theory, by revealing the mechanisms that drive change. Throughout, we emphasise how longitudinal and intervention studies have helped us distinguish which neural and cognitive characteristics are stable traits versus those that are responsive to intervention. We advocate for developmentally sensitive, large-scale studies and open, interdisciplinary collaboration among researchers and practitioners to advance our understanding of reading and language disorders and improve children's outcomes.

12. Immediate Effects of Delayed Auditory Feedback on Stuttering: A Systematic Review and Meta-Analysis of Literature Published 2000-2024.

Iimura Daichi Yamamoto Takuma Ishida Osamu. *International Journal of Language & Communication Disorders* 2026;61(4): e70283.
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PURPOSE: This systematic review and meta-analysis evaluated the fluency- enhancing effect of DAF alone in individuals with developmental stuttering., METHODS: Following PRISMA 2020 guidelines, we searched multiple databases for studies published between 2000 and 2024. Eligible studies examined DAF conditions applied to speech tasks with stuttering-related outcomes. Meta-analyses were conducted using a random-effects model, with subgroup analyses by disfluency type, delay time, speech task, stuttering severity, and participant age., RESULTS: Of the 194 records screened, eight studies involving a total of 98 participants in total met the inclusion criteria, and five studies involving 61 participants were eligible for quantitative synthesis. Each study included 8-20 participants ranging from school-age children to adults. Most participants were male, and stuttering severity ranged from mild to severe. DAF conditions were evaluated using oral reading and spontaneous speech/monologue tasks. Meta-analysis revealed no significant overall benefit of DAF compared with normal auditory feedback (NAF; mean difference = -1.46, 95% CI [-4.83, 1.91])., CONCLUSION: DAF alone does not consistently reduce disfluencies; however, specific populations and conditions may derive greater benefits from it. Larger, well-controlled studies are needed to clarify its therapeutic potential and clinical applications., WHAT THIS PAPER ADDS: What is already known on this subject Delayed auditory feedback (DAF) has been reported to improve fluency in people who stutter and is used in several assistive devices. However, its independent effect remains unclear because DAF is often combined with other altered auditory feedback conditions. What this study adds to existing knowledge This systematic review and meta-analysis evaluated the exclusive effect of DAF on stuttering. The results indicate that DAF alone does not consistently reduce disfluency compared with NAF, although certain conditions (e.g., shorter delays or reading tasks) may show greater benefits. What are the potential or actual clinical implications of this work? Clinicians should interpret the fluency-enhancing effects of DAF cautiously when used alone. Further well-controlled studies are needed to determine which individuals and speech contexts may benefit most from DAF-based interventions. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

13. Labelling, Defining and Classifying the Active Ingredients in Oral Language Interventions for Children With or at Risk of Developmental Language Disorder: A Systematic Review and Qualitative Synthesis.

Frizelle Pauline Murphy Doris Murphy Lenora Fletcher Leonard O'Leary Norma Kerrisk Norma Lyons Imogen Buckley Ana E adie Patricia Ebbels Susan Ferk-
Dornstauder Melanie Jessenitschnig Johanna Fricke Silke Kelic Maja Kunnari Sari Leitao Suze McKean Cristina McGregor Ka rla Munro Natalie Murphy Carol-Anne Horne Amanda Owen Van. *International Journal of Language & Communication Disorders* 2026;61(4): e70271.
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BACKGROUND: In recent years, there has been an increase in studies reporting on effective child language interventions for people with or at risk for (Developmental) Language Disorder ((D)LD). However, the translation of this evidence into practice has been impeded by under-specified intervention reporting, specifically on what the active ingredients of therapy are and how they are defined. This systematic review forms part of a larger research programme conducted by the Intervention Consensus for Language Disorder group., AIM: To identify, summarise, and synthesize how the active ingredients of oral language interventions for children with or at risk for (D)LD have been labelled, defined, described, and classified in empirical and clinical literature., METHODS: This registered review (PROSPERO ID CRD42024541407) adhered to PRISMA guidelines. Search terms were included in seven electronic databases. Included literature comprised peer-reviewed oral language intervention studies (published in English, German, Portuguese, Croatian, Italian, or Finnish; between January 2019 and May 2024; and reporting on participants who were <= 18 years, with/at risk for (D)LD); intervention-focused taxonomies; intervention manuals (published in the last 10 years); and textbooks used to teach child language interventions in pre-registration Speech and Language Therapy/Pathology courses (identified through the Whatworks database and a social media survey, respectively). Data extraction was guided by the TIDieR checklist with additional items deemed relevant for this review., RESULTS: 9576 articles were identified and screened; 619 were included for full text screening; and 243 articles were included in the review. Significant reporting inconsistencies were evident, including identical labels masking different mechanisms, as well as similar mechanisms operating under different labels; conflation of discrete techniques and procedures; the application of common labels in multiple ways; the use of unfamiliar terminology to refer to familiar techniques; and the use of broad terms masking multiple active ingredients. These inconsistencies do not align with what is considered well-specified active ingredients and consequently, significantly impede intervention replication and cross study comparisons., CONCLUSION: This review highlights the need to develop consensus on (1) how active ingredients of intervention are labelled and defined so that they are consistent, precise and non-overlapping and (2) a comprehensive integrative taxonomy for ease of understanding and use, when reporting on oral language interventions for children with or at risk for (D)LD., WHAT THIS PAPER ADDS: What is already known on this subject Oral language interventions contain numerous proposed 'active ingredients', but these are reported with substantial inconsistency across studies, textbooks, and intervention manuals. In addition, different taxonomies classify similar elements in divergent ways. What this paper adds to the existing knowledge We have provided the first comprehensive analysis demonstrating the extent of inconsistency, ambiguity, and conceptual overlap in how active ingredients are labelled and described in the oral language intervention literature. There is misalignment across current taxonomies and we lack an internationally agreed framework that integrates discrete active ingredients along with dosage and contextual active support ingredients. What are the potential or actual clinical implications of this work? Without clear, shared definitions of active ingredients, clinicians cannot reliably interpret research, replicate interventions, or implement evidence-based practices with fidelity. A unified internationally agreed lexicon and taxonomy would enable clinicians to understand precisely what constitutes a given technique, how it should be delivered, and what child behaviours it is intended to influence, strengthening the quality and consistency of intervention delivery. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

14. Language Sample Analysis in Bilingual Children: A Meta-Analysis of Diagnostic Accuracy.

Ortiz Jose A. Chow Jason C. Nolasco Jessica M. Huang Yi Ting. *American Journal of Speech-Language Pathology* 2026;35(3): 1304-1321.
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PURPOSE: Language sample analysis (LSA) is a common approach in the identification of developmental language disorder (DLD) in bilingual children. Because LSA is often recommended as a less biased assessment method, a better understanding of its diagnostic accuracy is needed to ensure appropriate decision making in clinical applications. This

systematic review and meta-analysis synthesized the existing literature on the diagnostic accuracy of LSA in DLD identification for bilingual children., METHOD: We conducted a comprehensive literature search of electronic databases along with supplementary strategies and applied abstract and full-text screening procedures to identify eligible studies. We extracted relevant metrics from all studies to derive pooled estimates of sensitivity and specificity. We then conducted moderator analyses to examine the effect of elicitation language (first or second language) and the performance of integrated measures that included LSA with other methods as well as a risk of bias evaluation for each study., RESULTS: The search yielded nine articles that met the inclusion criteria. Studies included participants ranging from 2 to 7 years of age. Across studies, diagnostic accuracy in DLD identification ranged from poor to good. The pooled sensitivity was 70%, and the pooled specificity was 83%. Several LSA measures exhibited fair sensitivity and specificity, most of which consisted of combinations of multiple LSA metrics. Language of elicitation was not associated with variation in diagnostic accuracy. Integrated measures exhibited the highest diagnostic accuracy., DISCUSSION: LSA is a useful approach in the assessment of language for bilingual children, but the variability in diagnostic accuracy suggests that not all metrics may perform with the same degree of precision. Integrated measures, which include LSA along with other assessment methods, likely provide the most representative characterization of language ability. These results indicate that LSA is best used as part of an assessment battery that includes multiple methods of measurement., SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.31592305.

15. Morphological awareness intervention in children with Developmental Language Disorder: A systematic review.

Penaherrera Esteban Andreu Llorenc. *International Journal of Speechlanguage Pathology* 2026;28(5): 999-1018.
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PURPOSE: This systematic review examined the effectiveness and instructional characteristics of morphological awareness interventions for children aged 3 to 12 diagnosed with Developmental Language Disorder, in English- or Spanish-speaking contexts. It aimed to determine the outcomes of MA interventions and identify the instructional components most supported by evidence., METHOD: Following PRISMA guidelines, a systematic search was conducted across five major databases (PsycINFO, PubMed, SCOPUS, Web of Science, and ERIC) between September and November 2024. Ten studies published between 1980 and 2024 met the inclusion criteria. The review synthesised results concerning both intervention outcomes and instructional features, using Frizelle and McKean's (2022) Dose Form Framework., RESULT: Only four studies reported statistically significant improvements in morphological awareness, with large effect sizes, indicating potential benefits of morphological awareness interventions for children with Developmental Language Disorder. However, many studies lacked rigorous methodology or failed to disaggregate outcomes for children with Developmental Language Disorder, limiting generalizability. Interventions with the strongest evidence base were those using explicit, clinician-directed instruction targeting affix identification and word construction., CONCLUSION: The findings suggest promising but limited evidence supporting the effectiveness of morphological awareness interventions for children with Developmental Language Disorder. Further high-quality, controlled studies with detailed statistical reporting and consistent diagnostic labelling are needed. Structured, explicit instruction appears to be a critical feature of effective programs and should be prioritised in clinical and educational practice.

16. Preterm children's early language development: Language-specific and domain-general child-related precursors.

Yilmaz Begum Akkan Ibrahim Demir-Lira O Ece Goksun Tilbe. *Advances in Child Development & Behavior* 2026;71 121-147.
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In the dynamic and complex process of language development, some populations, like preterm-born children, are at risk of developing language delays. This review addresses possible language-specific (i.e., prosody, word recognition, gesture) and domain-general (i.e., motor, visual perception and attention, joint attention, EFs) child-related precursors to language development of preterm children in the first three years of life. We examine how each factor can contribute to the development of language in this population. We end our review by providing suggestions for future theoretical frameworks and empirical research. Copyright © 2026. Published by Elsevier Inc.

17. Shared Decision Making Interventions for Parents of Children on the Autism Spectrum: A Systematic and Scoping Review.

Khaikin Shely Pfeiffer Beth Davidson Amber Pomponio Shipper Andrea Goldstein Roth Stephanie Nicholson Joanne Mccormick Bryan Fiks Alexander G. Mandell David S. Zisman-Ilani Yaara. *Community Mental Health Journal* 2026;62(6): 1054-1066.
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Parents of children on the autism spectrum face challenging treatment-related decisions, often with limited knowledge about available options. Shared Decision Making (SDM), a process where clinicians, patients, and families collaborate to make decisions based on evidence and preferences, can assist parents in navigating these choices. However, little is known about the use of SDM interventions for autism-related parental decisions. A systematic and scoping review was conducted across four databases (PubMed, Embase, Web of Science, and PsycInfo), and grey literature in two clinical trial registries. Study selection was conducted in two phases: title and abstract screening and full-text screening. From 7,610 records identified, two studies were included from Australia and Italy, describing multicomponent SDM interventions for parents of young children (< 18 years) on the autism spectrum. Both interventions demonstrated improvements in SDM-related outcomes, including parents' knowledge of autism treatments (such as speech pathology services and Early Intensive Behavior Intervention) and parents' involvement in treatment discussions. This review reveals a critical gap in SDM intervention research for autism parental decision-making. Despite the critical role parents play in autism treatment decisions, evidence-based SDM interventions remain scarce. This finding is significant given the well-established benefits of SDM in other healthcare populations and underscores the urgent need to develop and rigorously evaluate SDM interventions tailored to autism care contexts that support parents in making informed decisions about their children's care.Systematic review registration: A protocol was registered on PROSPERO. Copyright © 2026. The Author(s).

18. Social-Emotional Development of Young Children Who Stutter: An Overview of Empirical Studies

Jokar A.H.R. Tehran H.F. Brophy-Herb H.E. Scott Yaruss J. *Journal of Speech, Language, and Hearing Research* 2026;69(8): 3718-3736.
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Purpose: Developmental stuttering typically emerges between 2.5 and 6 years, the period during which emotion processes, peer competence, and self-system processes also become more consolidated. This scoping review synthesized evidence on how social-emotional development (SED) intersects with stuttering in early childhood and how the literature conceptualizes their associations. Method(s): Guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews, PubMed, APA PsycInfo, Scopus, ERIC, and Google Scholar were searched for peer-reviewed studies published in English (2000-June 2025) that included majority of children =2-6 years of age who stutter and measured at least one SED domain. Thirty-five studies met the inclusion criteria. Data were charted and narratively synthesized across three domains: Emotion processes, social competence, and self-system processes. Result(s): In general, the review of empirical studies indicated that preschool-age children who stutter showed greater emotional reactivity and weaker regulation across neurophysiological, behavioral, and caregiver reports. Early childhood stuttering was also associated with risks of social withdrawal, victimization, and school adjustment challenges, despite often-intact prosocial skills. Likewise, the review indicated that preschoolers also demonstrated earlier, more negative communication attitudes, although overall self-concept is typically comparable to that of peers who do not stutter. Reviewed evidence appeared to support bidirectional associations. That is, arousal and social stress may exacerbate disfluency, and stuttering experiences may intensify negative affect and reticence. Conclusion(s): Assessments should consider pairing stuttering behavior metrics with brief, developmentally appropriate SED measures when there are concerns about a child's social-emotional functioning. Any subsequent intervention, therefore, should target both stuttering behaviors and SED difficulties.Copyright © 2026 American Speech-Language-Hearing Association.

19. The relationship between bullying and stuttering in schoolchildren: scoping review.

Folha Gislaine Aparecida Barbosa Gabrielly Lemos Felix Caio Rodrigues Baptista Hadassa Bighi Lima. *Codas* 2026;38(5): e20250428.
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More details

PURPOSE: to map and synthesise scientific evidence on the relationship between bullying and stuttering in schoolchildren. The following specific aims will be investigated: (1) the impact of the co-occurrence of both; (2) strategies for identifying bullying in children who stutter; and (3) approaches to tackling bullying in this population., RESEARCH STRATEGIES: Scoping

Review was conducted following the Joanna Briggs Institute methodology. The PubMed, Scielo, CAPES, and Web of Science databases were consulted using specific descriptors., SELECTION CRITERIA: Full-text articles in English or Portuguese were included, with no time limit. Opinion articles, letters to the editor, and studies that did not meet the objective of the study were excluded., DATA ANALYSIS: The data extracted included author, title, objectives, methodology, results, and conclusions, culminating in a PRISMA-ScR flowchart for organising the findings., RESULTS: The studies analysed point to a higher prevalence of bullying, anxiety and low self-esteem among children and adolescents who stutter, especially in the school environment. Weakened social relationships and lack of awareness increase the risk of exclusion. Speech therapists play an essential role in guidance and prevention, although there is still a need for more robust research on effective interventions., CONCLUSION: This study confirmed the relationship between stuttering and the experience of bullying, highlighting the impacts on the mental health and socialisation of people who stutter. In addition, although scarce, the main intervention strategies identified to date were gathered, such as educational programmes and prevention activities, still in the school environment and in conjunction with the academic staff and family members.

ii. Original Research and Other Journal Literature

1. Vowel duration spelling in children with developmental language disorder: More errors, but affected by similar cues

Bliekendaal W. van den Boer M. Hakvoort B. de Bree E.H. *Journal of Experimental Child Psychology* 2027;274 106649.
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Relatively little is known about the specific characteristics of the spelling abilities of children with developmental language disorder (DLD). This concerns knowledge about spelling patterns and the item characteristics contributing to spelling performance. It has been found that vowel duration spelling in multisyllabic words is challenging for typically developing (TD) children and that this performance is influenced by implicit cues, including semantic familiarity, orthographic frequency, and morphology. We investigated outcomes on long and short vowel duration spelling in Dutch and the potential impact of implicit cues in Dutch Grade 5 children with DLD (n = 74). We did so by comparing spelling dictation outcomes of this group of children to that of Grade 3 TD children (n = 47) and Grade 5 TD children (n = 63). The dictation task consisted of items differing in semantic familiarity, orthographic frequency, and morphology. We found that children with DLD made more errors on long and short vowel duration patterns than both TD peers and younger TD children, indicating severe difficulties. The influence of implicit cues was similar for children with DLD and younger TD children, though results varied slightly per pattern: In the consonant doubling pattern, morphology affected the spelling performance of younger TD children, but not that of children with DLD, whereas morphology affected the performance of all groups in vowel degemination. Semantic familiarity also affected the spelling accuracy of children with and without DLD, while frequency did not. The contributions of semantic familiarity and morphology can help shape spelling instruction.Copyright © 2026 The Author(s).

2. "To the Children, We Are Not Invisible": Roles and Practices of Early Intervention Interpreters

Feiner H. Lee J. Sanchez B. Sanchez D. Roberts M.Y. *Journal of Early Intervention* 2026;
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Speech-language pathologists (SLPs) frequently work with language interpreters during early intervention (EI) sessions, given the increasing number of families who speak non-English languages in the home and a scarcity of multilingual SLPs. SLPs and linguistically diverse caregivers report their language mismatch as an obstacle to provider-family collaboration, and SLPs describe low confidence in working with interpreters. Little is known about interpreters' contributions to EI family-centered services and interpreters' perceptions of their role in the EI setting. We conducted focus groups and semi-structured interviews with 22 EI interpreters and applied qualitative content analysis to investigate how they conceptualize their role during EI speech sessions with Spanish-speaking families. We identified 50 unique interpreter practices representing seven different roles: conduit, clarifier, cultural-linguistic educator, family advocate, relationship facilitator, clinical facilitator, and professional. These findings inform the development of implementation strategies for effective SLP-interpreter collaboration that address the unique challenges, priorities, and family-centered goals of EI. Copyright © 2026 SAGE Publications

3. 'What Do You Mean by That? What Should I Do? What Should We Practice at Home?' Parental Perspectives on Multilingual Communication and Collaboration in Speech and Language Therapy.

Twilt Sione Neijenhuis Karin de Graaff Rick Thije Jan Ten. *International Journal of Language & Communication Disorders* 2026;61(4): e70285.
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BACKGROUND: Collaboration with parents is essential in speech and language therapy to achieve therapeutic goals for children. However, linguistic and cultural differences can complicate communication and collaboration with multilingual parents. This study

offers insight into the perspectives, experiences, and needs of multilingual parents who share little or no common language with the Speech and Language Therapist (SLT) supporting their child., AIMS: This study aims to provide an in-depth understanding of the perspectives of multilingual parents on the perceived communication and collaboration with SLTs., METHODS: Individual in-depth interviews were conducted with 12 multilingual parents whose children were involved in SLT. The oral interviews were supported by a visual and tactile method, the Yucel method, which had not previously been applied in this context. The data were analysed using reflexive thematic analysis., RESULTS: Reflexive thematic analysis revealed six key themes: 1) Language barriers affect the equity within parent-SLT partnerships, 2) Inclusive communication in speech and language therapy is not self-evident, 3) Child-centred communication simplifies the complexity of the message, 4) There is a discrepancy between the desire and the possibilities for collaboration in therapy, 5) Contextual factors influence the interaction between parents and SLTs and 6) Empowerment of multilingual children and their parents enhances through speech and language therapy CONCLUSION: This study provides a unique view into the perspectives of multilingual parents regarding communication and collaboration with SLTs. The identified themes underscore the importance of increasing awareness of the complex multilingual interactions between SLTs, parents, and children. The findings highlight the vulnerable position of parents and advocate for the conscious and appropriate use of inclusive communication strategies in SLT practice. Furthermore, the study emphasizes that the impact of SLT extends beyond child empowerment, contributing to the broader support and inclusion of multilingual families., WHAT THIS PAPER ADDS: What is already known on this subject Speech and language therapists (SLTs) often face challenges when collaborating with multilingual parents due to linguistic and cultural differences. While some previous studies have explored parental perspectives on partnership with SLTs, little research has focused specifically on multilingual parents and their views on communication and partnership in speech and language therapy. What this study adds to existing knowledge This study offers a unique perspective of parents who share little or no common language with the SLTs supporting their children. It provides insight into the experiences, needs, and viewpoints of multilingual parents, a group often underrepresented in research. The findings emphasise the importance of raising awareness among SLTs of inclusive communication and collaboration with multilingual parents. What are the clinical implications of this study? This study underscores the importance of increasing awareness of the complex multilingual interactions between SLTs, parents, and children. It highlights the vulnerable position of parents and advocates for the adequate and conscious use of inclusive communication strategies when language barriers are significant. Moreover, speech and language therapy hold substantial value for multilingual families, contributing to their communicative self-efficacy., KEY POINTS: There is a discrepancy between parents' willingness to act as partners and the actual opportunities to collaborate in an equitable way in the absence of a shared language. Despite language differences, parents report increased empowerment in their family's communicative participation through speech and language therapy, underscoring its broader value. The use of complementary visual and tactile methods, such as Yucel, enables a more inclusive approach in both research and practice by facilitating access to parental perspectives that might otherwise remain underexplored. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

4. A multidimensional investigation of the oral language abilities of Australian school entrants.

Taylor Anna Boyes Mark E. Smart Sharon Wheldall Robyn Claessen Mary Gray Nicole Leitao Suze. *International Journal of Speechlanguage Pathology* 2026;28(4): 836-850.
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PURPOSE: A multidimensional assessment of oral language evaluates abilities across different tasks and contexts to provide a comprehensive view of language abilities and functioning. This research aimed to apply this assessment approach to investigate language profiles of children at school entry., METHOD: In this cross-sectional study with stratified sampling, we assessed 126 school entrants using assessments of oral language and teacher and parent surveys. A latent profile analysis was used to identify groups with similar language abilities and a multivariate analysis of variance to compare them on outcomes of early academic and psychosocial functioning. Hierarchical regression was used to evaluate the link between individual language measures and variability in functioning., RESULT: Four distinct oral language profiles emerged: High, average, low, and very low. The two lower profiles (28% of the cohort) displayed language difficulties. Children within higher profiles significantly outperformed those in lower profiles in early academic and psychosocial functioning. Measures of communicative participation and discourse uniquely predicted both outcomes., CONCLUSION: A multidimensional assessment profiled using latent profile analysis offers a parsimonious approach to classifying language abilities. It may identify children with discourse-level difficulties that narrower approaches overlook. Communicative participation should be evaluated independently to capture its unique contribution to functioning.

5. A nonrandomised feasibility evaluation of a home-based intervention for parents of adolescents with learning disabilities, with or without autism.

Absoud Michael Rush Carla Mackey Lisa Waters Amy Forbes Gordon Pratt Karen Liew Ashley Strudwick Katy Slonims Vicky. *European Journal of Pediatrics* 2026;185(8):
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This study aims to determine the feasibility and acceptability of delivering ACHIEVE-a home-based, parent-coached OT/SLT intervention-in everyday UK practice and to describe recruitment/retention, data completeness, working alliance, delivery logistics, and exploratory changes in parent-reported functional, behavioural, communication and stress outcomes. Single-arm, non-randomised feasibility study aligned with CONSORT pilot/feasibility guidance. Thirty-six families of adolescents (11-19 years) with moderate-severe

learning disabilities (many also autistic) were recruited via three special schools. Individually tailored OT/SLT sessions focussed on parent-nominated goals in self-care/daily living, communication, and behaviour. Hybrid delivery (home visits + secure video); feasibility and acceptability were primary outcomes; exploratory secondary outcomes included DBC, HSQ, APSI, COPM, and GAS. Recruitment via schools was via a convenience sample (36 families). Attendance was high (159/190 sessions; 83.7%) with 99 home and 59 video sessions. Endpoint data were obtained for 22 families. Parents reported strong alliance (WAI median 89.5, IQR 73.0-91.0). Exploratory signals suggested improvement: DBC T-score - 3.90 (p = 0.004; n = 19); HSQ mean severity - 0.71 (p = 0.018; n = 19); APSI total - 6.80 (p = 0.046; n = 20). COPM median change + 3.0 (performance) and + 4.0 (satisfaction) (both p < 0.001; n = 17). GAS modelling suggested dose effects: ~ 7 sessions linked to ~ 80% probability of achieving expected goals, and ~ 10 to exceeding them (n = 31)., CONCLUSION: ACHIEVE was feasible and acceptable in UK practice with high engagement and manageable data collection. Dose-response signals and alliance strength support a minimum session count and continued coaching emphasis. Findings inform outcome selection, dose, and schedules for a definitive trial; clinical changes remain exploratory., WHAT IS KNOWN: * Adolescents with learning disabilities (often with co-occurring autism) and their families struggle to access practical home-based support; robust evidence is limited. * Family-centred, parent-coached allied-health interventions are promising but under-studied for adolescents and in home/hybrid formats., WHAT IS NEW: * ACHIEVE-a home-based Occupational therapy/Speech & Language Therapy, parent-nominated goal programme-proved feasible and acceptable with strong therapeutic alliance for families of adolescents with learning disabilities with or without autism. * Exploratory improvements and a dose signal (~7-10 sessions) guide scheduling and outcomes for a future comparative trial. Copyright © 2026. The Author(s).

6. AAC narrative intervention for children with autism.

Almubark Norah M. Spencer Trina D. Foster Matthew E. *AAC: Augmentative & Alternative Communication* 2026;42(3): 218-231.
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More details

In research, augmentative and alternative communication (AAC) interventions have primarily focused on teaching children to make requests; however, AAC intervention should not stop there. There is a dearth of AAC intervention research targeting other communicative functions, despite there being a significant need to enhance children's communication competence in a variety of social and educational contexts. The purpose of this study was to examine the initial efficacy and feasibility of an AAC narrative intervention on the picture-supported retelling skills of three children with autism, aged 6–9 years old. This multiple baseline across participants design study was preregistered at Open Science Framework (). We measured the effect of the intervention on children's inclusion and complexity of story grammar elements and the variety of symbols used to retell untrained stories during a baseline condition, just before each intervention session, immediately following each intervention session, and three weeks after the last intervention session. Parents completed a feasibility questionnaire and documented their children's generalized use of AAC. The AAC narrative intervention improved children's AAC retells, with ascending trends in the intervention condition and scores elevated above baseline after 3 weeks. Parents reported that they perceived the intervention to be appropriate, effective, enjoyable, and planned to use it themselves after the study. Generalized use of AAC outside of intervention sessions was documented for all three participants.

7. ABRACADABRA literacy instruction delivered by speech-language pathologists to children with autism during the COVID-19 pandemic.

Murphy Annemarie Bailey Benjamin Savage Robert Parrila Rauno Arciuli Joanne. *International Journal of Speechlanguage Pathology* 2026;28(5): 1173-1186.
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More details

PURPOSE: This feasibility study explored literacy instruction for children with autism in an area of socioeconomic disadvantage during the COVID-19 pandemic., METHOD: Fifty-nine autistic children (5-12 years) participated in a baseline assessment before being assigned to one of two instruction conditions or a control group. The first instruction group participants received a total of 13 weeks of literacy instruction using ABRACADABRA (a free online web application), delivered by a speech-language pathologist. The second instruction condition also received a total 13 weeks of ABRACADABRA literacy instruction, supplemented with shared book reading. The control group continued their business-as-usual school and other activities over the 13 weeks., RESULT: Children who participated in instruction made statistically significant gains in their nonword reading skills from pre- to post-instruction with a large effect size. There were no other statistically significant results at the conservative alpha level utilised. However, effect sizes for all reading outcome measures were similar to previous research using ABRACADABRA with autistic children (with medium to large effect sizes observed across various reading accuracy and reading comprehension skills)., CONCLUSION: Further research on literacy instruction delivered via via in person sessions and telepractice for children with autism is greatly needed. These findings contribute to the scarce knowledge base of literacy instruction for children with autism and the impact of the COVID-19 pandemic on this group.

8. Altered gray matter network segregation and disrupted interregional connectivity in children with persistent developmental stuttering: a graph-theoretical morphometric study

Liu W. Ma D. Cao C. Liu S. Ma X. Jia F. Li P. Zhang H. Hua Y. Liao Y. Qu H. *Brain Imaging and Behavior* 2026;20(5): 125.
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More details

Developmental stuttering is a neurodevelopmental speech disorder characterized by speech disfluency and variable persistence into adolescence. While white matter and functional connectivity abnormalities have been widely reported, the topological organization of gray matter (GM) networks in affected children remains unclear. This study investigated GM morphological network alterations in children with persistent developmental stuttering (CWS) and examined their relationships with stuttering severity. Thirty-three CWS and thirty age- and sex-matched healthy controls underwent T1-weighted MRI. Individual GM morphological networks were constructed using Kullback-Leibler divergence of voxel-based morphometry data across 90 brain regions. Graph-theoretical analyses quantified global and local topological properties, and network-based statistics (NBS) were used to identify alterations in morphological connectivity. Both groups exhibited small-world topology; however, CWS showed significantly higher clustering coefficient(Cp), local efficiency (Eloc), and modularity (Q) ($P < 0.05$), indicating a hyper-segregated GM organization. NBS revealed reduced morphological connectivity within a subnetwork encompassing the default mode, sensorimotor, basal ganglia-thalamic, and visual regions. Greater network segregation (Cp, Eloc, Q) was positively correlated with stuttering severity, whereas reduced subnetwork connectivity was negatively correlated with stuttering severity (FDR-corrected $P < 0.05$). These findings suggest that children with persistent stuttering exhibit excessive local specialization and decreased interregional integration, reflecting a network-level imbalance that may underlie the persistence and severity of stuttering. Altered GM network topology may represent a potential neurostructural biomarker for early identification and targeted intervention.Copyright © The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature 2026.

9. An Early Lexical Screening Tool for British English: Psychometric Properties and Clinical Utility.

Cattani Allegra Bianchi Dora Floccia Caroline. *International Journal of Language & Communication Disorders* 2026;61(4): e70287.
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BACKGROUND: Existing direct measures of vocabulary for ages 2-3 years are insufficient as vocabulary increases to include nouns, verbs, adjectives and adverbs, reflecting qualitative changes that support emerging grammatical abilities., AIMS: The present study aims to establish the psychometric properties and validate a lexical screening tool for 19-36-month-old British English-speaking children, the WinG (Words in Game) test. Specifically, it examines gender differences in internal consistency, concurrent validity and predictive gender invariance across comprehension and production tasks. In addition, the study evaluates the diagnostic accuracy of the tool by establishing clinical cut-off scores to distinguish children with typical versus at-risk language development. Finally, it presents developmental trends in toddlers' aggregate lexical comprehension and production scores, reported in percentiles and stratified by gender., METHODS AND PROCEDURES: Participants were 336 English-speaking children aged 19-36 months. Sub-set of 85 children were screened with the Words in Game (WinG) test and the Preschool Language Scale (PLS-4). The PLS-4 scores were used as reference tests to ascertain psychometric properties and estimate the sensitivity and specificity of the WinG comprehension and production tasks., OUTCOMES AND RESULTS: Girls outperformed boys on both comprehension and production tasks. The WinG comprehension and production tasks showed strong concurrent validity, with scores positively and highly correlated with the PLS-4 reference measures. Predictive gender invariance was also demonstrated, as both WinG dimensions predicted PLS-4 scores equivalently across genders. Using the 15th percentile as a cut-off, the WinG test demonstrated fair sensitivity for comprehension and good sensitivity for production, though specificity was below the desirable threshold for both tasks., CONCLUSIONS AND IMPLICATIONS: The tool provides a valuable starting point for identifying early receptive and expressive lexical difficulties through direct assessment by speech and language therapists (SLTs). Clinical implications and limitations are also discussed., WHAT THIS PAPER ADDS: What is already known on this subject Lexical receptive and expressive abilities emerge and expand rapidly in the second and third years of life. Clinicians and Speech and Language therapists (SLTs) need a systematic, reliable tool to observe the early lexical skills of toddlers. What this study adds to existing knowledge This study established the psychometric properties and validated the Words in Game (WinG) test from a large sample of 19-36-month-old British English learning children to measure the receptive and expressive nouns and predicates (verbs, adjectives and adverbs). The PLS-4 scores were used as a reference standard test. The WinG comprehension and production tasks showed strong concurrent validity, with scores positively and highly correlated with the PLS-4 reference measures. The developmental trends in toddlers' lexical comprehension and production scores are reported in percentiles and stratified by gender. The diagnostic accuracy of the WinG test was ascertained, performing receiver operating curves (ROC) on comprehension and production WinG tasks, entering the 15th percentile clinical cut-off scores, as indicated by the PLS-4 reference measures. What are the clinical implications of this study? The WinG test is a valid tool designed to screen the comprehension and production of words of British English children in the second and third years of life. The WinG test is a tool to be administered by professionals with expertise in language development, such as SLTs. Thanks to its systematic, direct observation approach and validation against established measures, the WinG test demonstrates fair psychometric properties. It provides SLTs with a reliable tool for early screening of toddlers' lexical skills to identify language delays or disorders. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

10. An Intelligent Multimodal Framework for Personalized Autism Spectrum Disorder Assessment and Therapeutic Support

Ghosh D. Singh D. Das S. Koley S. Acharjee K. Mondal D. *Natural Resources for Human Health* 2026;6(7S): 679-690.

More details

The disorder of autism spectrum disorder (ASD) is a complex neurodevelopmental condition that involves various abilities and variations, such as difficulties with specific skills or repetitive tasks, as well as verbal and non-verbal communication. They cannot increase or decrease sensitivity to sensory input such as sound, touch or smell. This includes recognising the diversity of experience

and ability across the spectrum and fostering an inclusive and supportive environment for people with autism. The study examines the relationship between certain behavioural signals, such as eye movements and tongue protrusions, that children show during and after exposure to vivid stimuli. The observation was made under controlled conditions of a group comprising children with ASD and developmental peers. Where their reactions to the cartoons were recorded. The analysis showed clear patterns: while typically developing children had a variety of facial expressions and actively engaged in content, children with ASD often had a limited emotional response, including a minimal or delayed response, and characteristic behaviours such as repeated eye movements (up-down). gaze) and occasional tongue protrusions. These findings highlight the potential of using subtle behavioural indicators captured by video-based assessments to aid in the early screening and detection of ASD. It faces challenges in understanding and responding to social cues, building relationships, and expressing empathy, delayed speech development, difficulties in understanding and using language, or a complete lack of non-verbal communication. Copyright © 2026, Visagaa Publishing House. All rights reserved.

11. An Investigation into Referrals Placed Following Positive Screening With the Modified Checklist for Autism in Toddlers, Revised With Follow-up

Abbas K. Steingass K. Abrams M.A. Brown C.M. Levine A. Klamer B.G. Barnhardt E. *Journal of Developmental and Behavioral Pediatrics* 2026;
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More details

Objective: - The objective of this study was to examine referral practices after positive autism spectrum disorder screening with the modified checklist for autism in toddlers, revised with follow-up (M-CHAT-R/F) for potential variability based on demographic factors focusing on language and patient-reported need for interpretation. Method(s): - This was a retrospective cohort study. The study population consisted of 776 patients (mean age 25 months) with a positive M-CHAT-R/F (367 high risk, 409 moderate risk). Data collected included self-reported race, ethnicity, preferred language, interpreter need, screening results, and referrals placed at the time of screening. Patients with a prior autism spectrum disorder diagnosis were excluded. Data were analyzed using Pearson's chi2 test of independence and logistic regression to determine if demographic factors, focusing on preferred language and need for an interpreter, were associated with placement of recommended referrals. Result(s): - Among children with a positive M-CHAT-R/F screen, 69% were referred to developmental behavioral pediatrics, 76% to behavioral health, 83% for early intervention, 93% for speech therapy, and 91% for audiology. In unadjusted stratified analysis, no significant differences were found in rates of referral to recommended services in relation to race, language spoken, or interpreter need. After a logistic regression analysis, no factors were predictive of higher or lower rates of referral to any service studied. Conclusion(s): - We found no disparities in referrals after a positive M-CHAT-R/F in relation to preferred language or interpreter need. Further research could examine what factors can help prevent disparities in referral placement to recommended services.Copyright © 2026 Wolters Kluwer Health, LLC. All rights reserved.

12. Analysis of neural coding of speech in monaural and binaural conditions in children with speech sound disorder.

Carlos Marciana da Costa Souza Thais Nobre Uchoa Costa Ranilde Cristiane Cavalcante Carnauba Aline Tenorio Lins. *Codas* 2026;38(5): e20250421.
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More details

PURPOSE: To analyze whether children with phonological disorder present alterations in the neural coding of speech, using Frequency Following Response (FFR) under monaural and binaural conditions., METHODS: This is an analytical, observational, cross-sectional study with a sample of 21 children with phonological disorders and 21 with typical development. They underwent the following procedures: medical history survey, phonological assessment, inspection of the external auditory canal, and audiological and electrophysiological evaluation, performed in one or two sessions. FFR was performed with the speech stimulus /da/, in two sweeps of 3000 stimuli at 80 dB HL, with a rate of 10.9 stimuli/second, a duration of 40 ms, and an analysis window of 74.677 ms., RESULTS: Children with phonological disorders presented higher latency values in all conditions than those with typical development, with statistical significance in the latency of wave V, and lower amplitudes than those with typical development, although without statistical significance. In terms of stimulus presentation, the binaural condition showed significantly larger amplitudes than the monaural conditions, suggesting the presence of a binaural summation effect., CONCLUSION: Children with phonological disorders present alterations in speech encoding, evidenced by delays in FFR responses under both monaural and binaural conditions.

13. Application of machine learning techniques to automate speech mispronunciation detection in children and adolescents.

Ameli Nazila Ravesh Mahshid Nik Dalmazo Luan Matheus Trindade Pollock Karen DeSantis Daniel Lagravere Manuel Lai Hollis. *Journal of Applied Oral Science* 2026;34 e20260078.
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More details

INTRODUCTION: Speech sound disorders (SSDs) are common in children and can affect academic and psychosocial outcomes. Clinical identification relies on expert auditory-perceptual assessment, which is time-intensive and may vary across raters. Automated screening tools could support triage when access to specialists is limited., OBJECTIVE: This study aimed to develop and evaluate a deep learning (DL) classifier for detecting mispronunciation errors in standardized pediatric speech recordings obtained using a structured fricative-focused word elicitation protocol, using expert-adjudicated labels as the reference standard., METHODOLOGY: In this cross-

sectional study, we analyzed 100 participants (6-18 years) providing 1,800 standardized word recordings. Two expert speech-language pathologists (SLPs) labeled recordings as mispronunciation present vs. absent; disagreements were adjudicated by a third SLP. Inter- and intra-rater reliability were assessed. Audio was denoised and standardized to 16 kHz. A pretrained transformer speech model (WavLM Base+) was fine-tuned for recording-level binary classification. Class imbalance was addressed using augmentation, weighted sampling, and focal loss. Performance was assessed on a held-out test set at the recording level using accuracy, sensitivity, specificity, precision, F1-score, and area under the ROC curve (AUC)., RESULTS: The overall recording-level prevalence of speech sound errors was 16.15%, with the "th" category (/theta/ + //) being the most frequently mispronounced phoneme group. No significant differences were observed by sex, age group (6-9, 10-13, 14-18 years), or malocclusion status ($p > 0.05$). Labeling showed strong agreement (Cohen's kappa = 0.84; intra-rater reliability 0.89-0.92). On the test set (253 recordings), the model achieved 90.9% accuracy, 77.8% sensitivity, 98.2% specificity, 95.9% precision, and AUC = 0.936., CONCLUSIONS: Fine-tuned pretrained speech representations demonstrated promising performance for screening pediatric mispronunciation errors under standardized recording conditions using expert labels. The high-specificity profile supports its use as a screening and triage decision-support tool, while future studies are needed to validate performance across broader clinical and real-world settings.

14. Applying the "Neurospeech Therapy" Approach to the Organization of an Adaptive-Preventive Environment for Children with Early Speech Delay

Danilavichiutie E. Arkadieva O. Doroshenko O. Nahorna O. Trofymenko L. *Natural Resources for Human Health* 2026;6(1S): 724-741.

More details

The purpose of the study was to theoretically substantiate the adaptive-preventive environment of early support for children with speech delay based on the neurospeech therapy approach, neuro-psycho-linguistic-synergetic basis and the International Classification of Functioning, Disability and Health. The study is of a theoretical-analytical nature and is based on the analysis, systematization, comparison and theoretical modeling used to process sources, compare scientific approaches, determine the structural components of support and build the author's model. The results obtained showed that early support for children with delayed speech development should not be built around individual speech manifestations, but taking into account the individual profile of the child's functioning. It was determined that such a profile includes speech, sensory, motor, cognitive, regulatory and communicative characteristics that affect the child's activity in play, everyday life, interaction and educational situations. It was substantiated that an adaptive-preventive environment should combine early intervention, dynamic observation, family-centered support, interdisciplinary interaction, functional description of difficulties and personalized adaptations. It was shown that the neurospeech therapy approach specifies the mechanism of speech difficulties through the interrelation of neurological, psychological, linguistic, synergetic and environmental factors. The psychological component is associated with higher mental functions of various modalities, and the synergetic component is associated with the child's spontaneous adaptations to their own characteristics. The proposed model reflects the sequence of transition from the individual profile of the child to the selection of speech, sensory, visual, spatial, regime and communicative adaptations. Thus, the obtained data confirm the feasibility of using a neurospeech therapy approach for personalized design of the early support environment. The practical significance of the results lies in the possibility of their use by speech therapists, special educators, psychologists, educators of inclusive groups and support teams in preschool educational institutions for planning personalized early support for children with delayed speech development.Copyright © 2026, Visagaa Publishing House. All rights reserved.

15. Assessing Communication in Children with Complex Communication Needs: Development of the Italian IVCAA Structured Interview

Rinaldi S. Gazzola S. Maggiulli C. Visentin S. Cane E. Scotto S. Sarti D. Andreoli L. Granocchio E. *Children* 2026;13(8): 1051.
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More details

Background: Individuals with complex communication needs (CCNs) require comprehensive communication profiles to guide effective interventions, yet the clinical literature offers limited tools to support this process. To address this gap, the "Italian CP & Language Network"-a multidisciplinary group of speech-language pathologists, psychologists, and child neuropsychiatrists-developed a novel, comprehensive clinical instrument specifically designed to evaluate the communication skills of children and adolescents with CCNs. Method(s): The development process was informed by an initial preliminary survey conducted across participating clinical centres to map out the observation tools routinely used in daily practice. Result(s): Based on these insights, the network designed a structured clinical interview named the Italian IVCAA (Intervista sulla Valutazione delle Competenze e delle Abilita Comunicative). The instrument was structured to systematically assess four core areas: core communication abilities, communicative behaviours, communicative functions, and communicative modalities (vocal, gestural, graphic/symbolic, and written). The Italian IVCAA provides a structured framework that successfully describes an individual's unique communication profile. It maps out specific strengths and weaknesses across diverse modalities, establishing a standardized baseline for clinical use. Conclusion(s): The Italian IVCAA serves as a valuable clinical tool for identifying communication profiles in individuals with CCNs. It offers a practical starting point for setting tailored goals in augmentative and alternative communication (AAC) interventions and establishes a reliable framework for monitoring changes in communicative competence over time. Copyright © 2026 by the authors.

16. Assessing the Reliability of Telehealth Geriatric Screening in Older Adults Undergoing Surgery

Canales C. Ivanson H.C. Brooks R. Smith J. Boulos N.M. Grogan T. Singh S. Sarkisian C. Cannesson M. Whittington R. *Anesthesiology* 2026;145(4): 1047-1050.

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More details

17. Assessment of pragmatic language in Turkish-speaking children: Development and psychometric evaluation of the PLSAS scale.

Keles-Karasahin Cigdem Ozaydin Latife. *Cortex* 2026;203 297-306.
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More details

The scarcity of locally developed assessment tools for understudied languages remains a significant issue in research on language disorders. This study aimed to examine the validity and reliability of the Pragmatic Language Skills Assessment Scale (PLSAS), developed to assess pragmatic language skills in Turkish-speaking preschool children aged 36-72 months. PLSAS, represents the first original pragmatic language assessment tool specifically designed for this population and seeks to address an important gap in the literature. Data were collected face-to-face from 121 preschool teachers in Turkey regarding 519 children enrolled in preschool education. Separate subsamples were formed to examine criterion validity, discriminant validity, and test-retest reliability. Criterion validity was assessed using the Social Communication Skills Checklist. Structural validity was evaluated through Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA). EFA revealed a three-factor structure (Communicative Intentions, Discourse Management Skills, and Context) comprising 23 items and explaining 69.49% of the total variance. CFA findings indicated good model fit. Internal consistency coefficients demonstrated excellent reliability (Cronbach's alpha = .96; McDonald's omega = .96). Test-retest results supported temporal stability. Criterion validity analysis showed a strong positive correlation with the Social Communication Skills Checklist ($r = .717$, $p < .001$). Furthermore, discriminant validity analysis indicated that the scale significantly differentiated between typically developing children and children with developmental disabilities (ASD and intellectual disability) ($t = 17.508$, $p < .001$). PLSAS is a valid, reliable, and sensitive instrument for assessing pragmatic language skills in Turkish preschool children. Copyright © 2026 Elsevier Ltd. All rights reserved.

18. Association between auditory processing and behavioral problems in preschool children with developmental language disorder

Dong T. Liu P.-T. Sun Y.-Y. Yu X.-Y. Zhou J. Li T.-Y. Chen Y.-Q. Qian J. Chi X. Hong Q. *Chinese Journal of Contemporary Pediatrics* 2026;28(7): 848-855.
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Objective To investigate associations among auditory processing (AP), working memory, and language function in preschool children with developmental language disorder (DLD), and to analyze the mediating role of working memory. Methods A prospective cross-sectional design was adopted. Forty-two children with DLD (DLD group) and 45 typically developing children (normal control group) were enrolled. The Diagnostic Receptive and Expressive Assessment of Mandarin-Comprehensive (DREAM-C), Preschool Auditory Processing Assessment Scale (PAPAS), Wechsler Intelligence Scales (Fourth Edition), and Conners Parent Symptom Questionnaire (PSQ) were used for evaluation. Correlations among scales were analyzed. The relationships among auditory decoding, working memory, and overall language function, as well as the mediating effect of working memory, were examined. Results Scores on all PAPAS dimensions and the proportion of children at risk for AP abnormalities were significantly higher in the DLD group than in the control group ($P<0.001$). In all children, DREAM-C dimension scores were negatively correlated with PAPAS dimension scores ($P<0.05$). In the DLD group, working memory was negatively correlated with total PAPAS score and scores for auditory decoding, auditory attention, and communication ($P<0.05$). PSQ scores for conduct problems, learning problems, and hyperactivity index were positively correlated with total PAPAS score and scores for auditory decoding, auditory attention, communication, and hyperactivity-impulsivity ($P<0.05$). The impulsivity-hyperactivity score was positively correlated with total PAPAS score and scores for auditory attention and hyperactivity-impulsivity ($P<0.05$). The anxiety score was positively correlated only with the communication score ($P<0.05$). After controlling for confounders, the auditory decoding score ($b'=-0.431$, $P=0.009$) and the working memory score ($b'=0.437$, $P<0.001$) were independently associated with the DREAM-C overall language score. Working memory partially mediated the association between auditory decoding and overall language ability, accounting for 40% of the total effect. Conclusions Auditory processing in preschool children with DLD is closely associated with language, cognitive, and behavioral problems. Auditory decoding directly affects language function and indirectly influences it through working memory. PAPAS may serve as a convenient screening tool for clinical use.Copyright © 2026, Central South University. All rights reserved.

19. Association Between Screen Time and Expressive Language Delay Among Toddlers in Urban Rourkela, India: A Cross-Sectional Study

Sethi S.K. Patel S. *International Journal of Pharmacy Research and Technology* 2026;16(2): 4991-5003.
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Background: Toddlerhood represents a sensitive developmental window for acquiring linguistic competence; however, disproportionate digital media consumption threatens to crowd out essential dyadic caregiver interactions alongside linguistic

stimulation. Empirical literature addressing these dynamics across Indian contexts remains sparse. Accordingly, this investigation evaluated the frequency of deficits in expressive speech and evaluated how daily duration of device usage correlates with these deficits among young children presenting to an urban clinic located in Rourkela, Odisha. Method(s): We designed an outpatient-centered, cross-sectional comparative evaluation involving 100 young children divided equally based on documented daily monitor utilization: greater than 2 hours daily (n = 50) and under 2 hours daily (n = 50). Expressive speech milestones were evaluated via the Language Evaluation Scale Trivandrum (LEST 0-3), whereas signs suggestive of autistic spectrum vulnerability were captured using an adapted autism screening tool. Investigators systematically documented household sociodemographic, device engagement habits, feeding-time screen viewing, and the presence of shared adult viewing. Relationships across discrete metrics were computed using Chi-square or Fisher's exact statistics, generating prevalence ratios paired with 95% confidence intervals. Result(s): Across the entire cohort, 25 toddlers (25.0%) met the threshold for delayed expressive speech. The burden proved markedly elevated among toddlers logging greater than 2 daily screen hours relative to their peers exposed to under 2 hours (36.0% versus 14.0%; prevalence ratio roughly 2.57). Media engagement during feeding occurred in 68.0% of the elevated-usage cohort compared to 36.0% in the comparison cohort, while consistent adult joint engagement proved notably rarer (34.0% versus 58.0%). In total, seven participants (7.0%) yielded positive flags for autism-associated developmental concerns. Conclusion(s): Elevated daily screen utilization correlated with an increased rate of expressive communication within this urban clinical cohort. These observations underscore the necessity of incorporating screen usage histories and parent-child interactive quality into pediatric developmental monitoring. Prospective cohort investigations remain essential to delineate causal directions, control for residual covariates, and verify if curbing extreme media consumption can rehabilitate communicative development.Copyright © 2026, Advanced Scientific Research. All rights reserved.

20. Association of Access Challenges and Family Support With Language Development for Children With Hearing Loss.

Rashidi Neema Patel Evan Garrett Shari Kearns Joy M. Lazar Ann A. Bostrom Alan Ou Henry Stephans Jihyun Tebb Kathleen P. Chan Dylan K. *Ear & Hearing* 2026;47(5): 1326-1332.
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OBJECTIVES: To assess the association between access challenges, measured by the Access Challenge Index (ACI), and baseline language performance in young children with hearing loss. Children with hearing loss are at increased risk of language delays, which can be influenced by access to specialized care. However, the impact of access challenges on these disparities requires further study to develop targeted interventions., DESIGN: An analysis of two prospective cohort studies' (NCT04928209) baseline assessments conducted at enrollment. This is a multicenter study, including four tertiary children's hospitals in California and Washington, with the cohort including 182 children, aged 0 to 27 months, with bilateral hearing loss, from diverse sociodemographic backgrounds. Language performance was measured using the Preschool Language Scales and Receptive-Expressive Emergent Language Scale, with scores analyzed against ACI. Expressive, receptive, and total language outcomes were included for analysis., RESULTS: Of the 182 children who met inclusion criteria, 117 (64.3%) were lower income (defined as below the 266% of the federal poverty level), 85 (46.7%) were assigned female at birth, 99 (54.4%) had public health insurance, 45 (24.7%) identified as non-Hispanic White, and 71 (39.0%) used a language other than English primarily at home. Higher ACI scores were associated with worse total language scores in both PLS (-1.25, 95% confidence interval [CI]: -2.00, -0.50, $p = 0.0012$) and REEL (-2.31, 95% CI: -3.36, -1.26, $p < 0.0001$) after inverse probability weighting of the propensity score. Subsequent analysis with ACI subscales indicated Family Support to be a strong predictor of PLS total language outcome (-4.63, 95% CI: -7.48, -1.79, $p = 0.0016$) and for REEL total language (-9.01, 95% CI: -12.89, -5.12, $p <= 0.0001$)., CONCLUSIONS: Family support appears to be a key modifiable factor influencing language disparities for children with hearing loss. Targeted interventions to support families may improve language outcomes. Copyright © 2026 The American Auditory Society.

21. Associations between self-rated stuttering severity and multidimensional stuttering impact.

An Ran Ma Yan Bin Jia Cheng Yan Yaruss J Scott. *Journal of Fluency Disorders* 2026;89 106237.
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PURPOSE: Prior research examining stuttering severity and the impact of stuttering has revealed inconsistent findings, partly due to differences in how severity is defined and measured. This study examined bivariate and covariate-adjusted associations between a global self-rated severity (SRS) measure and multidimensional stuttering impact measured by the Overall Assessment of the Speaker's Experience of Stuttering (OASES) among Chinese adults who stutter., METHOD: Data were collected via an anonymous online survey from 346 adults who stutter in China. Participants completed the Simplified Chinese OASES-Adults (OASES-A-SC) and a single-item 7-point SRS. Pearson correlations were used to test bivariate associations; multiple linear regression models examined whether SRS was associated with OASES outcomes after controlling for age, gender, speech therapy history, and support-group participation., RESULTS: SRS was positively associated with the OASES Overall Impact Score and all four section scores (rs =.49-.67), with the strongest associations for the Overall Impact Score and Section III (Communication in Daily Situations). In adjusted models, SRS remained significantly associated with all OASES outcomes. Support-group participation was also associated with lower impact scores for most outcomes., CONCLUSION: SRS was moderately to strongly associated with multidimensional stuttering impact, indicating that the two measures are related but should not be treated as interchangeable. Brief SRS measures may capture clinically meaningful aspects of lived experience and serve as a practical, speaker-centered complement to the OASES, especially in large-scale surveys and cross-cultural settings where clinician-administered severity assessment and calibrated listener-based estimates are less feasible. Copyright © 2026 Elsevier Inc. All rights reserved.

22. Atropine for the treatment of paediatric sialorrhea: a retrospective case series

Sloof N. Strychowsky J. Dzioba A. Chen B.A. *Paediatrics and Child Health (Canada)* 2026;31(5): 462-466.
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Objectives: This retrospective case series examined the efficacy of sublingual atropine drops for paediatric patients with sialorrhea followed at the multidisciplinary sialorrhea clinic at Children's Hospital, London Health Sciences Centre. Method(s): A retrospective review of patients seen for management of sialorrhea at the multidisciplinary sialorrhea clinic between January 1, 2015 and September 30, 2023 was completed. Patient demographics, comorbidities, interventions, frequency and severity of sialorrhea, and adverse effects were recorded. Drooling frequency and severity scale (DFSS) scores were collected to examine the effectiveness of atropine sublingual drops. A descriptive analysis and Wilcox signed-rank tests were conducted to compare pre- and post-treatment DFSS scores. Result(s): Twenty-one patients were included in the final analysis. The median DFSS score pretreatment was 4 for frequency and 4 for severity. Post-treatment, the median DFSS score decreased to 3 for both frequency (P = 0.006) and severity (P = 0.003), representing a statistically and clinically significant change. Conclusion(s): Atropine sublingual drops demonstrated efficacy for decreasing both drooling frequency and severity in a paediatric patient population. Copyright © The Author(s) 2026. Published by Oxford University Press on behalf of the Canadian Paediatric Society. This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs licence (https://creativecommons.org/licenses/by-nc-nd/4.0/), which permits non-commercial reproduction and distribution of the work, in any medium, provided the original work is not altered or transformed in any way, and that the work is properly cited. For commercial re-use, please contact reprints@oup.com for reprints and translation rights for reprints. All other permissions can be obtained through our RightsLink service via the Permissions link on the article page on our site-for further information please contact journals.permissions@oup.com.

23. Babble Boot Camp© for Preterm Infants: A Trial of a Proactive Speech/Language Intervention

Anonymous. *clinicaltrials.gov* 2026;

More details

Brief Summary, Babble Boot Camp focuses on early speech and language development, environmental enrichment and supporting parent-infant interaction with the aim of improving communication outcomes and parental well-being in at risk children. The goal of this clinical trial is to learn if this parent-coaching speech therapy intervention delivered via telehealth helps to support babies born very preterm with their earliest stages of communication. The main questions it aims to answer are: Does Babble Boot Camp increase language outcomes in infants born very preterm? Is Babble Boot Camp able to be successfully completed by caregivers, and do caregivers believe Babble Boot Camp is possible to implement at home? What is the family impact of Babble Boot Camp? Participants will: Be randomly assigned into either a "treatment group" or a "usual care group." If allocated into the treatment group using Babble Boot Camp, participants will attend weekly 15-minute therapy sessions with a speech pathologist for 6 months. Both groups ("treatment group" or a "usual care group") will complete questionaries at enrollment and when the child participant is 6, and 12 months old (corrected age)., Detailed Description, Babble Boot Camp (BBC) is an evidence-based proactive, systematic, and longitudinal speech/language intervention for babies ages 2-24 months of age to infants and toddlers at risk of communication impairment (Peter et al., 2020). The approach was designed to prevent or minimize speech and language disorders in infants at predictable risk by fostering precursor and early communication skills via parent training (Potter et.al, 2023). BBC is parent or caregiver implemented to reinforce functional, practical, and developmentally appropriate prelinguistic and early speech skills (Peter et al., 2020). Specifically targeted treatment routines include a "word bath" with infant directed prosody, facial expressions, responding to infant vocalizations, modeling and reinforcing babbling, labeling objects, modeling word productions, and recasting/expanding upon the child's utterances (Peter et. Al., 2021; Peter et.al.,2025). BBC has been trialed with great success in Classic Galactosemia, and with feasibility for children with Down Syndrome (Peter et al., 2021; Peter et al., 2025). During the weekly 15-20-minute speech therapy sessions, the speech pathologist follows a Teach-Model-Coach-Review-Questions format based on the teach-model-coach-review instructional approach (Robert et.al., 2014). Parents are then to implement learned strategies and routines daily including the addition of watching videos of babies babbling and joint picture book reading. All routines are targeted on what the child can access with support to account for the Zone of Proximal Development (Vygotsky, 1979). BBC researchers were able to show the intervention was feasible for families in the original trial group containing children with Classic Galacosemia (Finestack et. al, 2022). This suggests that BBC could potentially be possible to use with other populations. In this trial, the intervention program commences at 6 months corrected age and continues via telehealth up to 12 months' corrected age. The intervention is delivered by a speech pathologist. This randomised controlled trial (RCT) of BBC compared with usual care, will evaluate the efficacy of BBC intervention which is delivered earlier than traditional health service models provide, at a more developmentally appropriate time, and unrestricted by geographical location, for infants born preterm and their families. The primary goal of this trial is to examine the efficacy of BBC with children born preterm. Additional secondary outcomes include parent compliance, parent views of the trial, and describing the participants with highest attendance. A further exploratory outcome to be measured will include family impact of treatment on depression/anxiety/stress.Copyright © 2025 clinicaltrials.gov

24. Bilingual Exposure Does not Delay Language Development in Preterm Toddlers: Findings From 24 to 30 Months

Vaughn K.A. Guttentag C. Zucker T. Vannucci M. Berlanga A. Tobon D. Valles G. Izaguirre K. Herrera E. DeMaster D.M. *Journal of developmental and behavioral pediatrics : JDBP* 2026;
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OBJECTIVE: The goal of this research was to compare language growth from 24 to 30 months of age among English monolingual toddlers, Spanish monolingual toddlers, and Spanish-English bilingual toddlers who were born preterm. Previous research has led to inconsistent findings about the relationship between bilingual exposure and language development for children born preterm. Based on research from other populations of children at-risk for language difficulties, we hypothesized that bilingual exposure would not worsen language difficulties among children born preterm. METHOD(S): Between August 2023 and March 2025, we collected measures of parent-reported vocabulary and experimenter-administered language assessments from 37 toddlers (54% female) across 3 language groups (n = 16 English monolingual toddlers; n = 16 Spanish-English bilingual toddlers; and n = 5 Spanish monolingual toddlers). We compared the 3 language groups using a Bayesian approach, which allowed us to quantify the strength of the evidence for and against our hypothesis. RESULT(S): We found substantial evidence that Spanish-English bilingual children's language skills were comparable with those of English monolingual toddlers at 24, 27, and 30 months of age. CONCLUSION(S): This study adds to a growing body of evidence across multiple populations of children at-risk for language difficulties showing that when language skills are measured appropriately, there is no evidence that bilingual exposure worsens language outcomes relative to monolingual exposure. We strongly encourage clinicians to support families' decisions about their child's language exposure without fear that bilingual exposure will worsen language outcomes, even for children at-risk for language difficulties.Copyright © 2026 Wolters Kluwer Health, LLC. All rights reserved.

25. Characterizing Caregiver-Child Interactions Through a Transactional Lens: A Baseline Analysis of a Caregiver-Implemented Intervention.

Harrington Emily K. Kaiser Ann Roberts Megan Y. Hadley Pamela A. *Journal of Speech, Language & Hearing Research* 2026;69(9): 4391-4404.
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Purpose: This study was motivated by the transactional model of development and examined the reciprocal influences that children and caregivers have on caregiver-child interactions (CCXs) prior to a caregiver-implemented intervention. We tested whether child communication characteristics were associated with caregiver strategy use and whether these strategies, in turn, influenced children's communication to understand how caregivers and children mutually shaped the language learning environment. Method: Caregiver-child dyads (N = 105) were participants in a randomized controlled trial. CCXs were collected when children were approximately 30 months of age, transcribed, and coded for four caregiver language facilitation strategies and child communication variables. Results: Least Absolute Shrinkage and Selection Operator regression and post-selection inference indicated that child communication characteristics in CCXs were associated with both the frequency and type of strategies caregivers used. Children's overall communication acts were significantly associated with caregiver use of vocabulary strategies, whereas children's vocabulary diversity was significantly associated with caregiver use of sentence strategies. Mixed-effects logistic regression demonstrated that all four caregiver strategies significantly increased the likelihood of spontaneous lexical overlap in subsequent child turns. Conclusions: Prior to the intervention, caregivers and children reciprocally shaped the language environment. This supports a transactional perspective and warrants further consideration of reciprocal influences when assessing the impact of caregiver-implemented interventions.

26. Clarifying Neuroplasticity Claims in Parent-Led Early Stuttering Intervention: A Response to Onslow et al. (2026)...Onslow M, Hearne A, Yu K et al. How Simple Can a Treatment for Early Stuttering Be? A Proposed Two-Factor Early Intervention. American Journal of Speech-Language Pathology. 2026;35(2):422-430.

Chang Soo-Eun. *American Journal of Speech-Language Pathology* 2026;35(5): 2490-2492.
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More details

Purpose: Onslow et al. propose a simplified, parent-led early intervention for childhood stuttering based on reductions in parental speech rate and increased interturn pausing, framed within a neuroplasticity rationale for early treatment. While the goal of developing scalable and accessible interventions is important, the conceptual link between these conversational modifications and neuroplastic recovery warrants clarification. Neuroimaging studies in childhood stuttering have identified neural differences associated with persistence and recovery, but these findings establish correlates of developmental change rather than evidence that specific parental behaviors causally induce circuit-level reorganization. Established principles of experience-dependent plasticity indicate that durable neural change in speech motor systems typically requires high repetition, task specificity, and performance-contingent engagement of relevant neural networks. Conclusion: Current evidence is lacking regarding the potential behavioral benefits of parent-mediated conversational modifications, and further research is required to demonstrate that such strategies can induce neuroplastic mechanisms underlying recovery from stuttering. Distinguishing between environmental modulation, short-term fluency facilitation, and neural causation is important to support mechanistic claims. I suggest that future research evaluate simplified parent-led interventions through adequately powered randomized trials and, where possible, incorporate longitudinal neural measures to determine whether behavioral improvements are associated with measurable changes in speech motor circuitry.

27. Clinical characteristics and outcomes of referrals for speech and language delay to the Speech Therapy and Audiology department at a district hospital in Gauteng, South Africa

Graca L.B.L. Strehlau R. Bezuidenhout J.K. *South African Journal of Communication Disorders* 2026;73(1): a1153.

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Background: Speech and language skills are essential for effective communication. Speech and language delays may have far-reaching consequences on a child's development; their early identification and intervention are paramount to a child reaching their full potential. Objective(s): To describe the referral process, clinical characteristics, risk factors and outcomes of paediatric referrals to a Speech Therapy and Audiology (STA) department at a district-level hospital in Gauteng, South Africa. Method(s): A retrospective record review was conducted on paediatric outpatient referrals to the STA department between the 01 January 2021 and 30 June 2022. Descriptive statistical analysis was performed on the categorical data. Associations between receptive and expressive language delays and the presence of maternal comorbidities or a bilingual household were analysed using the Chi-squared test and Fisher's exact test. Result(s): A total of 150 referrals were reviewed, with speech delay being the most common reason for referral (38%). Children under 2 years old accounted for 42% of the referrals. Of the children seen by the speech therapists and audiologists, 58 (49.2%) defaulted on follow-up appointments, and three (2.5%) were identified as having hearing loss. Twenty-eight children (23.7%) were referred for neurodevelopmental assessments, of whom 52% received a diagnosis of autism spectrum disorder (ASD). The mean age of ASD diagnosis was 49.54 months (standard deviation 11.47). Conclusion(s): Understanding the clinical profile and outcomes of children referred to a STA department at a district-level hospital provides valuable insight into the vital role of the speech therapists and audiologists in early identification and intervention of children with speech and language delay. Contribution: The STA departments at South African district hospitals are well-positioned for early identification and intervention, particularly for neurodevelopmental conditions, including ASD.Copyright © 2026. The Authors. Licensee: AOSIS. This work is licensed under the Creative Commons Attribution 4.0 International (CC BY 4.0) license (https://creativecommons.org/licenses/by/4.0/)

28. Clinical usability and utility of a French dynamic assessment tool of speech stimulability for children with speech sound disorders: a survey of speech-language therapist's opinions.

Matrat Mélodie Delage Hélène Kehoe Margaret. *Journal of Communication Disorders* 2026;123 N.PAG-N.PAG.
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• A test assessing the stimulability of French sounds and structures was created. • The dynamic test included different cues and linguistic environments. • The tutorial was considered clear, and the interface, simple and attractive. • The test was perceived as usable and useful by speech-language therapists. • The test could facilitate the selection of treatment targets and approaches. Dynamic assessment of speech stimulability, by providing hierarchical cues across different linguistic environments, potentially offers more assistance in the selection of treatment targets for speech sound disorder (SSD) than typical stimulability assessment. However, currently no dynamic tool exists for assessing speech sound stimulability in French. This study investigates speech-language therapists (SLTs)' opinions about the clinical usability and utility of a new computerized dynamic test assessing the stimulability of French speech sounds and structures. Thirty-one SLTs completed an initial questionnaire (demographics information and caseload child's treatment planning), administered the dynamic test to one of their caseload children with a SSD, and then completed a second questionnaire about the usability and utility of the test and whether they made changes to the child's treatment planning after having administered the test. Results indicated that the dynamic test was perceived as usable and useful by SLTs: more than 80% of the SLTs agreed on eleven statements. They enjoyed using the test and agreed that the tutorial was clear and the interface simple and attractive. Moreover, the test was considered useful for assessing the child's phonological skills, collecting unique information, selecting intervention strategies and monitoring the child's progress. Statements rated with less agreement (below 70%) concerned rapidity of learning to use, administration time, clarity and utility of cues, and insufficient number of targets. Thus, the DynaPhono test is seen as usable and useful in clinical practice to assess phonological skills, select treatment targets and intervention strategies, and monitor progress. Adding targets and cues to the test would provide additional information and improve its utility.

29. Cognition and language of 2-year-old very preterm children measured using brief validated parental report instruments: a cross-sectional study.

Markkula Anna Pyhala Riikka Munck Petriina Buchwald Jadwiga Metsaranta Marjo Stolt Suvi. *European Journal of Pediatrics* 2026;185(7):
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The purpose of this study is to assess the cognitive and language skills of very preterm (VP) children using brief parental report instruments at age 2 years (corrected age), potential sex differences in children's skills, and differences between four profile groups of typical/weak cognition/language. Cognitive and language skills of 110 VP children without major neurological impairment from Finnish-speaking families were assessed using brief validated parental report instruments (cognitive scale of PARCA-R, FinCDI-SF, sentence complexity subscale of PARCA-R, CSBS-DP-ITC). Based on norms, the prevalence of weak skills (< 10th percentile) varied across cognitive and language domains between 16 and 34%. Typical development was found in 47% of the participants, while 12% showed weak skills in both domains. Weak cognition with typical language was found in 19% and typical cognition with weak language in 22% of the children. While boys and girls did not differ in raw scores, girls more frequently had weak cognition and typical language in norm-based profile groups. Furthermore, the amount of perinatal risk factors and medical complications differed in profile groups of typical/weak cognition/language., CONCLUSION: Brief parental report instruments are useful in identifying weak cognitive and

language development of VP children at age 2 years. The missing sex difference indicates that sex-specific developmental trajectories may not be applicable in VP children's population at this age. Weak skills can occur in cognition or language, highlighting the importance of separate assessment. More research is needed on the influence of background characteristics in profile groups based on cognition and language., WHAT IS KNOWN: * Very preterm children have a high risk for cognitive and linguistic delays. * Brief parental report instruments are efficient and valid in detecting delayed development, but more knowledge is needed on their utility in preterm populations., WHAT IS NEW: * Brief parental report instruments are useful in detecting delayed development among 2-year-old very preterm children. * No sex differences could be detected in cognitive or language development. Approximately 40% of very preterm children had weak skills in only either cognition or language, highlighting the importance of assessing them separately. Copyright © 2026. The Author(s).

30. Combining Nonword and Sentence Repetition to Identify Developmental Language Disorder.

Pham Giang T. Do Ngoc Ramos Michelle N. Ebert Kerry Danahy. *International Journal of Language & Communication Disorders (John Wiley & Sons, Inc.)* 2026;61(5): 1-13.
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Background: Nonword repetition and sentence repetition have been useful in identification of developmental language disorder (DLD). Each task has demonstrated good sensitivity and specificity, though their diagnostic accuracy has varied across children's ages, specific measures, and languages. These tasks tap into different underlying weaknesses associated with DLD, but few studies have examined the diagnostic utility of combining them. Aims: The present study compares the diagnostic accuracy of each task—nonword repetition and sentence repetition—to that of combining the two tasks in order to evaluate their utility in DLD identification. Method and Procedures: Participants were 196 monolingual Vietnamese speakers, ages 4–6, living in the northern region of Vietnam. As part of a larger study, participants were divided into typical development (TD: n = 168) and DLD (n = 28). We used logistic regression with ROC curves to empirically derive cutpoints and calculate diagnostic accuracy measures for each task separately and in combination. Outcomes and Results: Nonword repetition and sentence repetition each showed adequate sensitivity (NWR: 89.3%; SR: 82.1%) but unacceptable specificity (NWR: 41.1%; SR: 76.2%). The combination of tasks showed adequate sensitivity (85.7%) and specificity (81.6%) as well as informative positive (4.65) and negative (0.18) likelihood ratios. Conclusions and Implications: Nonword and sentence repetition may tap different underlying weaknesses and together provide useful diagnostic information to accurately identify DLD in Vietnamese monolingual children, ages 4 to 6. The next step is to translate research findings to practice by further validating the combined model and automate procedures for ease of scoring and interpretation. WHAT THIS PAPER ADDS: What is already known on this subjectNonword repetition and sentence repetition have contributed to the accurate identification of Developmental Language Disorder (DLD). However, the diagnostic accuracy of each task varies across ages and languages, and their combined effect is understudied. Because each task measures different weaknesses associated with DLD, combining them could improve identification accuracy.What does this study add to existing knowledgeThis study examined whether combining nonword and sentence repetition improves DLD identification. Within a group of 196 4- to 6-year-old children in Vietnam, we found that the combination of tasks was better at identifying DLD than each task alone.What are the potential or actual clinical implications of this work?Combining nonword and sentence repetition holds promise for accurately and quickly identifying DLD. Next steps are to further validate this combination of tasks and to translate research findings into clinical practice.

31. Communication and feeding skills in Rett syndrome: Case report

Voniati L. Georgiou R. *Journal of Intellectual and Developmental Disability* 2026;51(3): 312-320.
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Background: Rett syndrome (RTT) is a neurodevelopmental condition that causes regression of previously acquired abilities after normal development. RTT symptoms affect communication and feeding skills, which may have serious consequences for individuals with RTT. Essential aspects of their daily care include feeding and language intervention. Method(s): This report describes the case of a 14-year-old diagnosed with RTT. The adolescent engaged in an intervention program focusing on speech, language, and feeding needs. The article provides a comprehensive overview of the evaluation, intervention, and re-evaluation process for the challenges she encountered. Result(s): Reassessments revealed positive outcomes in the adolescent's feeding and communication. Conclusion(s): This study underscores the importance of speech and language therapy interventions for individuals with RTT and showcases their effectiveness in improving daily life.Copyright © 2025 Australasian Society for Intellectual Disability, Inc.

32. Comparison of learning text vs. picture symbol AAC representations for young children on the autism spectrum.

Pope Lauramarie Light Janice. *AAC: Augmentative & Alternative Communication* 2026;42(3): 262-274.
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Children on the autism spectrum1 with minimal speech are generally provided with augmentative and alternative communication (AAC) systems that represent vocabulary using picture symbols (i.e., color line drawings). However, there has been minimal research investigating the comparative effectiveness of picture symbols vs. other types of symbol representation (e.g., text) in supporting the communication of children on the autism spectrum. Using a single case adapted alternating treatments experimental design, the

current study compared learning of picture symbol and text representations, measured by the accurate identification and functional use of novel AAC symbols by young children on the autism spectrum with minimal speech. Two participants demonstrated notable acquisition of both picture symbols and text. The remaining four children had difficulty demonstrating learning of either symbol representation type. These results suggest that different symbol representations (e.g., digital photographs), layouts (e.g., visual scene displays), and/or instructional procedures (e.g., more naturalistic methods) may have been a better fit for these four participants. Additionally, variability in performance across participants underscores the critical importance of personalization of AAC systems – including symbol representation – based on comprehensive assessment of individual strengths and needs.

33. Conceptualisation of a culturally responsive speech and language assessment for Ghanaian-English speaking children.

Bampoe Josephine Ohenewa Verdon Sarah Hoffman Laura Wylie Karen. *International Journal of Speechlanguage Pathology* 2026;28(4): 821-835.
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PURPOSE: This study aimed to identify the views of Ghanaian speech-language pathologists about the development of a culturally appropriate speech and language assessment tool for children., METHOD: The study used qualitative methods with data collected in two focus groups. A total of 11 Ghanaian speech-language pathologists discussed questions about the purpose, scope, target group, and target skills of a speech and language assessment tool for children. Discussions were recorded digitally and transcribed verbatim. Data were analysed using qualitative content analysis., RESULT: Findings indicated that Ghanaian speech-language pathologists currently have challenges in accurately assessing the speech and language of children given the lack of culturally appropriate tools available. Speech-language pathologists stressed the importance of developing a culturally appropriate tool and shared their views on the purpose, scope, target group, and target skills of the tool. There were similarities and differences between the focus groups. The majority of speech-language pathologists stated that ideally they would prefer a diagnostic tool for both speech and language disorders., CONCLUSION: This study contributes to the growing body of research that sheds light on the importance of using culturally appropriate tools to assess children in culturally diverse contexts.

34. Contemporary clinical conversations about stuttering: Telling parents why their child began to stutter.

Franken Marie-Christine Hearne Anna Jelcic Jaksic Suzana Neef Nicole E. Onslow Mark. *International Journal of Speechlanguage Pathology* 2026;28(5): 1034-1039.
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Parents of children who have begun to stutter need an explanation why this has occurred. For that explanation, clinicians have many research findings available to them from many disciplines. It may be challenging for junior clinicians and students of speech-language pathology to integrate and synthesise that knowledge for parents. The purpose of this clinical conversation is to provide guidance in that matter. The issue was discussed by speech-language pathologists and researchers. Written conversational turns in an exchange were limited to 100 words each. There was general agreement about core material to be conveyed to parents: An explanation of stuttering onset needs to be multifactorial, incorporating a physical mechanism driving causality. We recommend this explanation needs to include current empirical research and theoretical perspectives about stuttering. To do that, clinicians need to keep up to date with current research and thinking about the condition. An explanation to parents must not overwhelm or alarm them, but be supportive and provide groundwork for intervention. Finally, it is essential to explore parent views about why a child began to stutter. Supplementary materials are provided (Appendix A): Participants present their model of how they would tell parents why their child began to stutter and a reading list is provided.

35. Corrigendum to The role of temperament in stuttering frequency and impact in children under 7 Journal of Communication Disorders 97 (2022) 106201...Delpeche S, Millard S, Kelman E.

Delpeche Sarah Millard Sharon Kelman Elaine. *Journal of Communication Disorders* 2026;123 N.PAG-N.PAG.
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36. Cortical auditory response and language development in children with microcephaly by Zika virus.

Figueiredo Frizzo Ana Claudia Lira de Andrade Kelly Cristina Rombola Isabela Tiezi Teixeira da Costa Klinger Vagner Baisi Chagas Eduardo Federighi de Lemos Menezes Pedro. *Revista Brasileira de Otorrinolaringologia* 2026;92(5): 101770.
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OBJECTIVE: This study proposes to assess the auditory and linguistic development of children with microcephaly due to maternal Zika virus infection and to understand the influence of this condition on auditory cortical responses and language development., METHODS: The cross-sectional descriptive study was carried out in the northeast of Brazil. Twenty children (mean age 27-months), of both sexes, with and without microcephaly due to Zika virus participated in the study. For auditory cortical responses, 40 natural /ba/ and /da/ monoaural speech sounds were presented at 70 dB HLeP. The Early Language Milestone Scale assessed the development status of

auditory and visual functions related to language. For statistical analysis, covariance measures (ANCOVA) and Pearson's correlation tests were used. The Bonferroni post-hoc test was applied to significant F-values ($p < 0.05$). The Smart tools EP software was used to improve the investigation of the electrical response and to bring accurate and automated analyzes., RESULTS: Longer values were observed in the latency of the N1-P2 components and a higher N1 amplitude of the cortical responses in children with microcephaly. Changes in the scale showed a significant impairment in language development in these children. Smart showed abnormalities in the neurotransmission of acoustic characteristics related to frequency information in the auditory pathway in children with microcephaly., CONCLUSION: The measurements of the study showed a pattern of atypical development of the auditory and linguistic system in children with microcephaly due to the Zika virus., LEVEL OF EVIDENCE: 3*. Copyright © 2026. Published by Elsevier Espana S.L.U.

37. Cultural, familial, and technological factors influencing AAC implementation for non-speaking autistic children in the Arab community in Israel

Kawar K. *AAC: Augmentative and Alternative Communication* 2026;
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This study examined the cultural, familial, educational, and technological factors influencing how Arab parents of non-speaking autistic children understand and implement augmentative alternative communication (AAC) within their sociocultural context in the Arab community in Israel. Although AAC can enhance communication, participation, and emotional expression, it remains underused in many minority and multilingual communities. Using a qualitative, phenomenologically informed design and reflexive thematic analysis, the study involved in-depth guided semi-structured interviews with 20 Arab parents of non-speaking autistic children (ages 6-9). Trustworthiness was supported through triangulation, peer debriefing, reflexive memos, and member checks. Five overarching themes were identified: (1) parental attitudes, emotions, and meaning-making around AAC; (2) the central role of the family and sociocultural environment, including stigma and extended-family influences; (3) institutional and educational factors shaping AAC exposure, training, and continuity; (4) linguistic and technological accessibility, particularly the scarcity and limited cultural fit of Arabic-language AAC tools; and (5) parental agency and resilience amidst structural constraints and cultural expectations. Findings underscore that AAC implementation is culturally situated and structurally constrained, highlighting the need for culturally responsive AAC training, Arabic- and dialect-sensitive AAC resources, and coordinated systemic support for Arab families in Israel.Copyright © 2026 International Society for Augmentative and Alternative Communication.

38. Deconstructing the Diet-Language Myth in Autism: A Divergent V-Type Model

Uslu B. Aslan I. Cevik F.A. *Journal of Autism and Developmental Disorders* 2026;
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Purpose: To investigate whether eating behaviors and diet quality predict receptive and expressive language development in children with autism spectrum disorder (ASD), independent of autism severity. Method(s): Seventy-one children with ASD (mean age 55.61 +/- 15.88 months) were assessed using the TEIiL (language), GARS-2-TV (autism severity), CEBQ (eating behaviors), and KIDMED (diet quality). Analyses included hierarchical regression, 5000-bootstrap mediation, moderation, and exploratory K-means cluster analysis. Result(s): Autism severity strongly predicted both receptive and expressive language (explained variance = 53%). After controlling for severity and age, eating behaviors and diet quality provided no significant incremental variance ($DELTAR2 =.020 and.012) and showed no significant partial correlations with language (all p >.15). Furthermore, all 11 mediation and 6 moderation models yielded non-significant effects. Exploratory clustering revealed a paradox: children with the most severe autism and highest food selectivity exhibited the highest Mediterranean diet adherence, likely reflecting rigid parental dietary control. Conclusion(s): Nutritional variables do not directly or indirectly predict language development in ASD when controlling for core symptom severity. We propose a divergent "V-Type" conceptual model, suggesting that autism severity independently drives both language delays and eating disruptions. Nutritional interventions and speech-language therapy should be pursued as parallel, independent targets.Copyright © The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature 2026.

39. Defining Language Profiles in Young Autistic Children Across Verbal, Speaking, and Generative Dimensions.

Beccaria Federica Leenen Liesl Kolenberg Marie Vertongen Klaartje Demurie Ellen Weyland Marielle Warreyn Petra Roeyers Herbert No ens Ilse Zink Inge Kissine Mikhail. *Autism research : Official Journal of the International Society for Autism Research* 2026;19(9): e70324.
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Language trajectories in autism are highly heterogeneous and cannot be captured by unidimensional classifications. Research and clinical practice often rely on verbal/non-verbal or speaking/non-speaking labels, but these categories, when used in isolation, obscure distinct linguistic profiles. Spoken language is also frequently used as a proxy for structural language skills, despite evidence that speech may not be generative or productive. A multidimensional perspective is therefore needed to determine whether verbal skills, spoken output, and linguistic generativity reflect dissociable aspects of language in autism, and whether variation across these dimensions can be explained by non-verbal cognition or autism characteristics. Participants were 167 autistic children aged 2-6 years from the Dutch- and French-speaking regions of Belgium. Verbal skills were assessed using standardized tests. Speaking status was quantified as the proportion of linguistic segments in spontaneous productions recorded at home. Generativity was measured using a

similarity index derived from semantic embeddings. Associations with non-verbal Intelligence Quotient (IQ) and autism characteristics were examined using age-controlled linear models. Overlap between the three dimensions, Verbal, Speaking, and Generativity, was only partial. Some children with little or no speech showed relatively strong structural language abilities, whereas others produced abundant but non-generative speech and had limited structural skills. Both non-verbal IQ and autism characteristics were related to all three dimensions, with IQ explaining a larger proportion of variance. Overall, one-dimensional labels fail to capture language variability in autism; assessing Verbal, Speaking, and Generativity as complementary dimensions may better identify uneven linguistic profiles in autistic children. Copyright © 2026 International Society for Autism Research and Wiley Periodicals LLC.

40. Development and Pilot Testing of Virtually Simulated Intervention for Patients Having Stuttering

Anonymous. *clinicaltrials.gov* 2026;

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Brief Summary, This study aims to develop and pilot test a culturally appropriate virtual reality (VR)-based speech restructuring intervention for individuals with stuttering in Pakistan. During the development phase, five VR scenarios representing common real-life communication situations will be designed using a structured development process, including scenario generation, storyboarding, live-action role plays, expert review, and standard operating procedure (SOP) development. The scenarios will incorporate graded difficulty levels, speech restructuring practice, relaxation exercises, interactive avatars, and realistic audiovisual elements. Following development, a pilot study will be conducted with 10 participants with stuttering aged 13-35 years to evaluate the feasibility, usability, and preliminary effectiveness of the intervention. Participants will receive 16 therapy sessions using the VR scenarios, with assessments conducted before and after the intervention to measure changes in stuttering severity, speech fluency, communication attitudes, associated motor behaviors, physiological factors, and sense of presence within the virtual environment. Findings from the pilot study will be used to refine the intervention before conducting a larger clinical trial., Detailed Description, This study consists of the development and pilot testing of a culturally adapted virtual reality (VR)-based speech restructuring intervention for individuals with stuttering in Pakistan. The overall objective is to design an immersive intervention that simulates everyday speaking situations while providing opportunities to practice speech restructuring techniques in a controlled and progressive virtual environment. During the development phase, five VR scenarios will be created based on commonly encountered communication situations within the Pakistani cultural context. The scenarios will be developed with increasing levels of communication difficulty and will exclude culturally inappropriate or violent content. The development process will involve literature review, observation of real-life communication situations, brainstorming and ideation, storyboard development, live-action role plays, and conversion into immersive 3D virtual environments. A neutral adaptation environment will be included to familiarize participants with the VR system before exposure to therapeutic scenarios. The VR intervention will be delivered using the Oculus Quest 2 head-mounted display. Each scenario will incorporate realistic environmental sounds, interactive avatars of different ages and genders, adjustable audience size and positioning, emotional expressions, varying question types, distractors, time-limited speaking tasks, relaxation exercises, and opportunities to practice speech restructuring techniques. Standard operating procedures (SOPs) will be developed to ensure standardized setup, equipment handling, participant safety, and intervention delivery. The content validity of the developed scenarios will be evaluated by six experts with at least two years of relevant professional experience using the Content Validity Index (CVI), and modifications will be made based on expert feedback. Following development, a single-group pilot study will be conducted at Pakistan Railway Hospital to evaluate the feasibility, acceptability, and preliminary effectiveness of the intervention. Ten bilingual participants aged 13-35 years with mild to severe stuttering will be recruited according to predefined eligibility criteria. Individuals with additional communication disorders, neurological disorders, intellectual disabilities, or significant psychological conditions will be excluded. Participants will undergo baseline assessment followed by 16 intervention sessions conducted three times per week, with each session lasting approximately 25 minutes. The intervention will begin with orientation and training in speech restructuring techniques, followed by progressive practice within five VR communication scenarios: lecture hall, grocery store, restaurant, telephone conversation, and job interview. The final sessions will focus on practicing all scenarios and facilitating the transfer of learned skills to real-life communication environments. Outcome measures will be collected before and after the intervention using standardized assessment tools. These will include real-time analysis of speech fluency, dysfluency index, assessment of physiological factors associated with stuttering, the Modified S Scale for communication attitudes and emotions, assessment of associated motor behaviors, and the Presence Questionnaire to evaluate participants' experience within the virtual environment. Data from the pilot study will be analyzed using SPSS Version 20. Descriptive statistics will summarize participant characteristics and feasibility outcomes. Changes between baseline and post-intervention assessments will be analyzed using either the paired-samples t-test or the Wilcoxon signed-rank test, depending on the distribution of the data. Feedback obtained during participant debriefing sessions will be used to further refine the VR intervention protocol before proceeding to a larger-scale clinical trial.Copyright © 2025 clinicaltrials.gov

41. Developmental stuttering with common and complex phenotypes

Horton S.E. Shepherd D.A. Siemers S. St John M. Catherall J. Scheffer I.E. Morgan A.T. *Developmental Medicine and Child Neurology* 2026;68(10): 1460-1475.
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Aim: To describe the phenotypic spectrum associated with stuttering. Method(s): Individuals with current or resolved developmental stuttering self-referred. Surveys assessed stuttering characteristics (onset, negative impact, family history) and health (early development, other conditions). Speech and non-verbal intelligence were assessed using conversation and the Wechsler standardized scales. Sample sizes varied across assessments (n = 266-327). Latent class analysis identified unobserved groups based on assessment

data. Result(s): A total of 327 participants (231 male, 71%) with a median age of 57 years (range: 5-90 years) were recruited, 282 of 296 (95%) with current stuttering and 14 of 296 (5%) with resolved stuttering. Onset was 4 years or younger for 187 of 322 (58%) participants; 207 of 325 (64%) had a positive family history of stuttering, 58 of 325 (18%) had developmental delay, and 38 of 264 (14%) had below average non-verbal intelligence. Common co-occurring conditions included sleep, hearing, vision, and immune conditions, migraine, anxiety, and depression. Analysis revealed two groups: 295 of 327 (90%) participants had the common phenotype and 32 of 327 (10%) had a complex phenotype, with more severe stuttering, greater negative impact of stuttering, more frequent anxiety, lower non-verbal intelligence, and neurodevelopmental disorders. Interpretation(s): Phenotypic analysis of a large cohort of who stutter identified 90% with a common phenotype and 10% with a complex phenotype. Both had co-occurring disorders requiring multidisciplinary support.Copyright © 2026 The Author(s). Developmental Medicine & Child Neurology published by John Wiley & Sons Ltd on behalf of Mac Keith Press.

42. Discharge of children with developmental language disorder by Croatian speech-language pathologists: A qualitative study of influential factors.

Kelic Maja Mckean Cristina Dokoza Katarina Pavicic Roulstone Sue. *International Journal of Speechlanguage Pathology* 2026;28(5): 1086-1099.
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PURPOSE: Discharge decisions pose a challenge in speech-language pathology practice. Although professional guidance exists, there is little research on what factors influence discharge decisions in practice. This study aimed to explore the discharge decisions of speech-language pathologists in the context of children with Developmental Language Disorder, in particular to identify influential factors., METHOD: This is a qualitative knowledge-elicitation study using individual interviews and a focus group to explore the knowledge of 19 Croatian speech-language pathologists with more than two years experience of working with children with Developmental Language Disorder., RESULT: Speech-language pathologists described a complex process that was influenced by four overarching case-related factors: A child reaching a plateau, the child's achievements, support, and motivation. Much of this knowledge was challenging for clinicians to define and measure. Speech-language pathologists also reported the influence of resource pressures., CONCLUSION: The process described by speech-language pathologists broadly follows published professional guidance. Clinicians descriptions of the interpretation of those factors to child, family, and situational contexts showed the individualisation and weighing up of the relative importance of factors. These detailed judgements were challenging. Therefore, support and monitoring particularly for novice speech-language pathologists is recommended. Discussion between clinicians will also support the emergence of consensus and build confidence in discharge decision-making. Further explication of the influential factors and development of ways to measure and evaluate levels of support and children's functional performance is needed.

43. Does Auditory Stimulation Matter? A Single-Subject Design Examining the Active Ingredients Within a Modified Cycles Approach.

Redman Nicole Brumbaugh Klaire Farquharson Kelly. *Seminars in Speech & Language* 2026;47(3): 110-125.
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Abstract: This investigation compared the effectiveness of the Cycles Approach with and without auditory stimulation. Using an alternating treatment design (AATD), three preschool-aged children with severe phonological disorders received a modified Cycles Approach targeting two phonological patterns. Effectiveness was measured by the percentage of occurrence of errors. Treatment outcomes were analyzed across experimental conditions and participants with respect to the effectiveness of the Cycles Approach, modified by including and excluding auditory stimulation. All participants demonstrated improvements in speech sound production skills when auditory stimulation was withheld. Two participants demonstrated a statistically significant change in speech intelligibility from baseline to intervention regardless of auditory stimulation inclusion. One participant experienced a statistically significant difference in speech intelligibility when auditory stimulation was withheld. Parents of all participants indicated improvements in their child's speech intelligibility on a posttreatment questionnaire. This investigation substantiates prior research suggesting that a modified Cycles Approach is an effective intervention to treat preschool children with phonological disorders. For the three participants in this study, implementing auditory stimulation techniques did not improve or expedite speech intelligibility outcomes, and for one participant, improved clinical outcomes were achieved without the use of auditory stimulation. Copyright Thieme. All rights reserved.

44. Does the Sequencing Between a Verb and an Action Impact Learning for Children With Developmental Language Disorder? A Feasibility Study of a New Experimental Paradigm

Horvath S. Brownstein N.C. *Journal of speech, language, and hearing research : JSLHR* 2026; 1-12.
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PURPOSE: Understanding how to optimize verb-learning contexts is critical for vocabulary intervention for children with developmental language disorder (DLD). In this study, we explore the feasibility of a new experimental paradigm designed to assess whether the sequencing between a verb and its referent action impacts learning. We also consider whether what is optimal varies depending on

verb meaning, contrasting manner verbs, which encode how an event unfolds, with result verbs, which encode event endstates. METHOD(S): Eight 4- and 5-year-olds with DLD participated in this feasibility study. In the before condition, children heard novel verbs before seeing their referent actions. In the after condition, children heard the verbs after the actions were viewed. Children were asked to demonstrate knowledge of the novel verbs by pointing. Probabilities were compared with the null value expected by chance (50%). Additionally, we fit an exploratory generalized estimating equation model to the data with covariates for condition and verb type. RESULT(S): Tests of predicted probabilities revealed that children did not demonstrate learning rates above chance in the before condition. Learning rates were above chance in the after condition for result but not manner verbs. Model estimates revealed differences in learning between the recall and generalization phases. CONCLUSION(S): Our new experimental paradigm has the potential to be used for further research into children's verb-learning processes. Children with DLD appear to be impacted by the sequencing between a verb and its referent action based on this feasibility study; however, further research is required to adequately understand the impact of sequencing on verb learning for children with DLD. SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.33332601.

45. Dyslexia with and without developmental language disorder: Profile analysis

Snowling M.J. Hayiou-Thomas M.E. Hulme C. *Annals of Dyslexia* 2026;76(2): 267-278.
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The characterization of dyslexia as a language learning impairment can be traced back to Samuel Orton who in 1937 wrote that 'strephosymbolia' (his term for the condition) was due to an impairment of the 'language faculty'. Some 40 years later, Vellutino (Theory and research, 1979) published his classic text, Dyslexia: Theory and Research in which he argued that dyslexia could be characterized as a verbal processing deficit. However, in more recent times, the language difficulties of dyslexia have been underplayed Adlof et al. (Language, speech, and hearing services in schools, 49(4):762-773, 2018). First, the discrepancy definition of dyslexia considers it a specific learning disability 'diagnosed ' when reading skills are below expectation given IQ, typically ruling out children with lower verbal abilities (Snowling et al., 2020). Second, the phonological deficit hypothesis states that phonological (speech) processing skills are impaired in dyslexia, regardless of IQ Stanovich et al. (In Perspectives on the classification of specific developmental disorders :105-136, 1998) and hence often despite good oral abilities. Within these views, dyslexia is a disorder of written language distinct from developmental language disorder (DLD) in which spoken language skills are impaired. In this paper we take a close look at the similarities and differences between dyslexia with and without DLD and discuss their shared cognitive risk factors, drawing out implications for assessment and intervention.Copyright © Crown 2026.

46. Early Identification of DLD in Paediatric Practice: A Pilot Validation of the CLAP Screening Tool in Italian Outpatient Settings.

Ricotti Andrea Dimitri Danilo Nebbia Federica Carpino Andrea Charrier Lorena Cillis Giulia
De Bonzo Silvia Actis Maria Grosso Elena Malorgio Emanuela Gambotto Silvia Borsotti Lucia Gallo Silvia Marnetto Fabiana Parodi Emilia
. *International Journal of Language & Communication Disorders* 2026;61(4): e70282.
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More details

BACKGROUND: Language development in early childhood varies considerably, making early detection of Developmental Language Disorders (DLDs) challenging despite their high prevalence and long-term effects on learning and mental health. In Italy, no culturally adapted, easy-to-use screening tools are currently available in primary care. To address this gap, a screening tool was developed to support the early identification of children aged 24-72 months at risk of DLD and other clinically relevant language difficulties., AIMS: To evaluate the psychometric properties and accuracy of the Comunicazione e Linguaggio in Ambulatorio Pediatrico (CLAP), a brief age-specific screening tool designed for use in Italian paediatric outpatient settings., METHODS AND PROCEDURES: In this pilot validation study, children were recruited by primary care paediatricians during routine well-child visits and stratified into four age groups: 24-30, 36-42, 48-54, and 60-72 months. After administration of the CLAP screening tool, each child underwent a blinded speech-language pathologist (SLP) assessment. Psychometric evaluation included internal consistency, item-total correlations, confirmatory factor analysis, and item response theory indices (discrimination and difficulty). Diagnostic accuracy was assessed using ROC curves, area under the curve (AUC), sensitivity, specificity, and optimal cut-offs. Analyses were conducted separately for each age group., OUTCOMES AND RESULTS: Fifty children were enrolled in each age group; overall, 24% of the sample fell into the pathological subgroup after the blinded SLP assessment. Internal consistency was acceptable in the 24-30-month (KR-20 = 0.695) and 36-42-month (KR-20 = 0.777) groups, but lower in older children. Factor analyses supported a mainly unidimensional structure in the younger groups. Item response theory showed good discrimination and informativeness for several items. ROC analyses indicated excellent diagnostic accuracy in the 24-30-month group (AUC = 0.93; sensitivity = 92%; specificity = 87%), fair accuracy in the 36-42- and 48-54-month groups (AUC = 0.75 and 0.74), and poor performance in the 60-72-month group (AUC = 0.46)., CONCLUSION AND IMPLICATIONS: The CLAP demonstrates promising psychometric properties and good-to-fair accuracy as a brief screening tool for identifying children aged 24-54 months at risk of clinically relevant language difficulties, including those who may need further assessment for DLD. Its age-specific design, quick administration, and non-invasive nature support its potential integration into routine primary care. For older children, an age-specific revision or an alternative tool might be required. A larger validation study is currently in progress., WHAT THIS PAPER ADDS: What is already known on this subject Developmental Language Disorder (DLD) is common in early childhood; however, early identification remains difficult due to variable developmental pathways and the absence of validated screening tools in primary care. Currently, no brief, culturally adapted instrument is available for routine use in Italian paediatric settings. What does this study add to existing knowledge This study demonstrates that the CLAP tool has promising psychometric

properties, with good accuracy in the youngest age group and fair accuracy up to 54 months for identifying children at risk of clinically relevant language difficulties, including those who may later meet criteria for DLD. It provides the first evidence supporting an age-specific, feasible screening option that can be integrated into Italian primary care, while also identifying areas requiring revision for older pre-schoolers. What are the potential or actual clinical implications of this work? CLAP can assist paediatricians in the early detection of clinically relevant language difficulties in children during routine well-child visits. Its adoption could help standardize early language screening in Italy, leading to earlier referral for further diagnostic assessment and appropriate speech-language evaluation. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

47. Early Mobile Screen Exposure and Developmental Trajectories: Pathways from Device Use to Speech Delay and Co-occurring Psychological Difficulties in Children Aged 1-4 Years

Kanwal U. Dildar H. Rida-e-Zehra S. Vaqar A. Saleem Z. Qureshi M.A. Arif D. Khattak A. *International Journal of Drug Delivery Technology* 2026;16(63 Supplement): 1391-1401.
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Early mobile screen exposure poses a growing developmental risk, yet current guidelines predominantly emphasize duration while overlooking how specific usage contexts displace critical early learning activities. This prospective 36-month longitudinal cohort study tracked 2,145 child-parent dyads from ages 12 to 48 months to elucidate the pathways linking screen duration, content, and context to speech delays and co-occurring psychological difficulties. Using objective device logs, standardized language and behavioral assessments, and objective measures of sleep and physical activity, we found that higher baseline screen time significantly predicted steeper declines in language development (beta = -0.26, $p < 0.001$) and increases in psychological difficulties (beta = 0.31, $p < 0.001$), with solitary, fast-paced content conferring the greatest risk. Mediation analyses revealed divergent mechanisms: speech delays were primarily driven by displaced parent-child "serve-and-return" interactions, whereas psychological difficulties were mediated by sleep fragmentation and reduced physical play. These effects were further amplified by high child negative affectivity and parental techno-Ference. These findings indicate that duration-only screen time guidelines are insufficient for mitigating digital-era developmental risks. Pediatric screening and early intervention strategies should adopt a multidimensional Context-Displacement-Environment framework that evaluates content quality, usage context, and the preservation of foundational developmental activities to effectively safeguard early childhood trajectories.Copyright © 2026, Dr. Yashwant Research Labs Pvt. Ltd. All rights reserved.

48. Early Screening for Developmental Language Disorder: Predictive Validity of German Parent Reports.

Pinstock Eveline Schramm Satyam Antonio. *International Journal of Language & Communication Disorders (John Wiley & Sons, Inc.)* 2026;61(5): 1-12.
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Background: Developmental Language Disorder (DLD) is a prevalent neurodevelopmental condition associated with long-term cognitive, academic, and psychosocial consequences. Early identification is critical for timely intervention, yet predictive frameworks within German-speaking contexts remain limited. Parent-report questionnaires such as the FRAKIS-K and SBE-2-KT are widely used in the German paediatric U7 check-up for two-year-olds, but their predictive validity for DLD has not been systematically evaluated. Aims: This study assessed the predictive validity of the FRAKIS-K and SBE-2-KT administered at age two for identifying risk for DLD at age four. A secondary objective was to test whether adjusting the screening cut-off values could enhance predictive accuracy. Methods and Procedures: A community sample of 500 families in Hanover, Germany, was contacted through the city register; 186 children (mean age = 2;0) participated at the first assessment. At age four (N = 145), expressive vocabulary and grammar were measured using the Potsdam-Illinois Test of Psycholinguistic Abilities (P-ITPA). Children scoring ≤ –1.5 SD on P-ITPA subtests were classified as having language impairment consistent with risk for DLD. Predictive validity indices—sensitivity, specificity, positive and negative predictive values, relative improvement over chance (RIOC), and area under the curve (AUC)—were calculated for both parent-report tools. ROC analysis was applied to explore optimal cut-off adjustments. Outcomes and Results: Prevalence of language impairment at age four was 5.5%. The SBE-2-KT showed moderate predictive power (AUC = 0.85; RIOC = 0.51), with sensitivity of 57% and specificity of 89%. The FRAKIS-K vocabulary alone performed similarly (AUC = 0.83; RIOC = 0.58), achieving sensitivity of 63% and specificity of 91%, while including grammar criteria reduced predictive validity. ROC analysis indicated improved sensitivity (up to 71%) with minimal specificity loss when adjusting cut-offs. Conclusion and Implications: Both FRAKIS-K vocabulary and SBE-2-KT demonstrate adequate predictive validity for identifying risk of DLD at age two within the German U7 screening context. They function effectively as first-tier tools to rule out children not at risk, though positive screens should be followed by comprehensive assessments. The study's longitudinal design and evaluation of clinically relevant screening instruments using multiple predictive validity indices strengthen the findings. While refining vocabulary-based cut-offs may improve early detection, the small number of children with language impairment in the sample limits the generalizability of optimization suggestions, highlighting the need for further research in larger clinical populations. WHAT THIS PAPER ADDS: What is already known on this subjectParent-report questionnaires are commonly used for early language screening, but their predictive validity for DLD is often limited. In German-speaking contexts, evidence on the predictive accuracy of brief tools such as FRAKIS-K and SBE-2-KT is scarce.What this study adds to the existing knowledgeThis longitudinal study shows that both FRAKIS-K (vocabulary component) and SBE-2-KT at age two moderately predict outcomes of language impairment at age four. Adjusting the screening cut-offs increased sensitivity while maintaining acceptable specificity, indicating that predictive validity may be improved through threshold refinement. However, as the sample included few children with risk for DLD, recommendations for

optimizing these tools should be interpreted with caution.What are the potential or actual clinical implications for this work?FRAKIS-K vocabulary and SBE-2-KT can be used as first-tier screening instruments during the U7 paediatric check-up in Germany. Using adjusted cut-offs may enhance early identification of children at risk for DLD, supporting earlier referral and intervention, though further validation in larger samples is required.

49. EEG microstate reconfiguration across cognitive states in preschool children with developmental language disorder

Liang A. Wang H. Shi Y. Qu C. Wei Z. Cui Z. Zhang X. Ni X. Ning X. Fang J. *Frontiers in Neuroscience* 2026; 1-17.
Check for full-text availability

More details

Introduction - Developmental language disorder (DLD) has been associated with atypical neural processing, but it remains unclear whether preschool children with DLD show altered EEG microstate organization across cognitive states. Most microstate studies in clinical populations have focused on resting-state activity, and much less is known about how microstate profiles vary across task contexts in young children. Methods - EEG was recorded from preschool children with DLD (n = 12) and typically developing (TD) children (n = 22) during three consecutive paradigms: a video-based rest-like viewing condition (Rest), semantic picture-sound matching (Match), and passive auditory oddball listening (Oddball). Within-condition template extraction and cross-condition alignment were used to quantify conventional microstate features, including mean duration, time coverage, occurrence rate, and global explained variance (GEV). Directed transition probabilities and condition-difference DELTA-transition indices were additionally summarized as exploratory descriptors of microstate switching organization. Conventional microstate features were analyzed using mixed-design repeated-measures ANOVA. Results - Multiple conventional microstate features differed across Rest, Match, and Oddball, indicating that EEG microstate profiles varied across task contexts under the condition-specific template framework. In contrast, Group main effects and Group x Condition interactions did not provide robust evidence of DLD-TD differences in conventional microstate features. Full transition matrices also showed descriptive condition-related variation in switching organization, whereas group-related deviations in transition probabilities were generally small. Among the representative exploratory DELTA-transition pathways, one Oddball-Match pathway showed a nominal uncorrected group difference, but this effect did not survive full-family false discovery rate correction. Discussion - EEG microstate profiles in preschool children appear sensitive to task context, whereas evidence for DLD-specific microstate alterations was limited in the present sample. Because templates were extracted separately within each condition and aligned post hoc, the condition-related findings should be interpreted as descriptive evidence of task-context-related microstate organization rather than as a strict common-template test of condition effects. Larger, better-characterized samples and common-template approaches are needed to clarify whether reproducible DLD-related alterations in EEG microstate organization are present across cognitive contexts.Copyright © 2026 Liang, Wang, Shi, Qu, Wei, Cui, Zhang, Ni, Ning and Fang.

50. Effectiveness of Virtually Simulated Intervention for Patients Having Stuttering

Anonymous. *clinicaltrials.gov* 2026;

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Brief Summary, This randomized controlled trial aims to evaluate the effectiveness of a culturally appropriate virtual reality (VR)-based speech restructuring intervention for individuals with stuttering in Pakistan. The intervention consists of five VR scenarios representing common real-life communication situations, incorporating graded difficulty levels, speech restructuring techniques, relaxation exercises, interactive avatars, and realistic audiovisual elements. Eligible participants with stuttering will be randomly allocated to an experimental group receiving the VR-based speech restructuring intervention or a control group. Participants in the experimental group will receive 16 therapy sessions using the developed VR scenarios. Assessments will be conducted at baseline, during the intervention, and after completion of the intervention to evaluate changes in stuttering severity, speech fluency, communication attitudes, associated motor behaviors, physiological factors, and sense of presence within the virtual environment. The study will determine whether the VR-based intervention is effective in improving speech fluency and reducing the severity and associated features of stuttering compared with the control condition. The findings will provide evidence regarding the effectiveness of VR-based speech restructuring as a culturally appropriate intervention for individuals with stuttering., Detailed Description, This study is a randomized controlled trial designed to evaluate the effectiveness of a culturally adapted virtual reality (VR)-based speech restructuring intervention for individuals with stuttering in Pakistan. The intervention has been developed to simulate everyday communication situations within a controlled, immersive, and progressively challenging virtual environment. The overall objective of the trial is to determine whether VR-based speech restructuring can improve speech fluency and reduce stuttering severity and associated behavioral, physiological, and communication-related difficulties. The VR intervention consists of five culturally appropriate communication scenarios representing commonly encountered real-life speaking situations in the Pakistani context: lecture hall, grocery store, restaurant, telephone conversation, and job interview. The scenarios incorporate graded levels of communication difficulty and are designed to provide opportunities for participants to practice speech restructuring techniques in progressively challenging situations. The intervention includes realistic environmental sounds, interactive avatars of different ages and genders, adjustable audience size and positioning, emotional expressions, varying question types, distractors, time-limited speaking tasks, relaxation exercises, and opportunities for repeated practice of speech restructuring techniques. The intervention will be delivered using the Oculus Quest 2 head-mounted display. A neutral adaptation environment will be used to familiarize participants with the VR equipment and virtual environment before exposure to the therapeutic scenarios. Standard operating procedures (SOPs) will be followed to ensure standardized equipment setup, participant orientation, intervention delivery, and safety throughout the study. The intervention protocol and VR scenarios were developed and refined through a structured development process, including literature review, observation of real-life communication situations, brainstorming and ideation, storyboard development, live-action role plays,

conversion into immersive virtual environments, and expert review. Content validity of the developed scenarios was established through evaluation by six experts with relevant professional experience using the Content Validity Index (CVI). Eligible participants with stuttering will be recruited according to predefined inclusion and exclusion criteria. Participants will be randomly allocated to the experimental group or control group. The experimental group will receive the VR-based speech restructuring intervention consisting of 16 therapy sessions conducted three times per week, with each session lasting approximately 25 minutes. The intervention will begin with orientation to the VR system and training in the speech restructuring techniques. Participants will then practice the techniques within the five virtual communication scenarios, with the level of difficulty progressively increased according to the intervention protocol. Later sessions will focus on integrating skills across different communication situations and facilitating the transfer of learned speech restructuring strategies to real-life communication environments. Participants in the control group will receive the control condition specified in the study protocol. Both groups will undergo outcome assessment at predefined time points. Baseline assessment will be conducted before commencement of the intervention, followed by an interim assessment during the intervention and a post-intervention assessment after completion of the 16 sessions. The primary outcome will be the severity of stuttering. Secondary outcomes will assess speech fluency, communication attitudes and emotions, associated motor behaviors, physiological factors associated with stuttering, and participants' sense of presence within the virtual environment, where applicable. Speech fluency and stuttering-related outcomes will be assessed using standardized and structured assessment procedures. Outcome measures will include real-time analysis of speech fluency and dysfluency index, assessment of physiological factors associated with stuttering, the Modified S Scale for communication attitudes and emotions, assessment of associated motor behaviors, and the Presence Questionnaire for evaluating participants' experience within the virtual environment. Data will be analyzed using SPSS. Descriptive statistics will be used to summarize participant characteristics and outcome measures. Appropriate inferential statistical tests will be used to compare changes in outcome measures between the experimental and control groups and across the predefined assessment time points. Statistical significance will be determined according to the prespecified analysis plan. The results of this randomized controlled trial will provide evidence regarding the effectiveness of a culturally adapted VR-based speech restructuring intervention for individuals with stuttering and its potential application as an adjunct or alternative approach to conventional stuttering intervention.Copyright © 2025 clinicaltrials.gov

51. Effects of group-based music therapy combined with speech therapy on language and social skills in preschool children with autism spectrum disorder: An exploratory randomized controlled trial.

Liu Chih-En Chen Pei-Ying Lai Ting-Ju Yang Shu-Mei. *Research in Developmental Disabilities* 2026;175 105345.
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BACKGROUND: Autism spectrum disorder (ASD) is characterized by early difficulties in language and social communication. While speech therapy is a core early intervention, music therapy has been increasingly applied to support social-emotional development. However, evidence regarding the additive effects of group-based music therapy combined with speech therapy in preschool children with ASD remains limited., METHOD: This exploratory randomized controlled trial enrolled (RCT) preschool children aged 3-5 years with ASD and language delay. Participants were randomly assigned to a Music Therapy group receiving group-based music therapy (60min/week) plus individual speech therapy (30min/week), or a Control group receiving speech therapy alone, for 8 weeks. The primary outcome was week 8 language performance assessed using the Preschool Language Scale (PLS). Secondary outcomes included autism-related characteristics, emotional and behavioral functioning, and parenting stress, assessed using the Checklist for Autism Spectrum Disorder-Chinese Version (CASD-C), Pervasive Developmental Problems scale of the Child Behavior Checklist for Ages 11/2-5 (CBCL 11/2-5 PDP), and Parenting Stress Index-Short Form (PSI-4-SF), respectively. The primary treatment effect was evaluated using a multiple imputation-based intention-to-treat (ITT) adjusted analysis accounting for sex and baseline outcome measures. Secondary outcome analyses were interpreted with Benjamini-Hochberg false discovery rate correction for multiple comparisons. Exploratory within-group analyses and generalized estimating equation (GEE) models were used to characterize observed changes over time., RESULTS: Forty participants were randomized, and 38 participants completed the week 8 assessment. The ITT analysis included all randomized participants. Observed PLS total scores increased significantly within both groups. Exploratory within-group analyses also showed reductions in CASD-C social interaction issues and emotional difficulties in the Music Therapy group, and CBCL 11/2-5 PDP T-scores decreased within both groups. However, the primary adjusted ITT analysis did not demonstrate statistically significant superiority of adjunctive group-based music therapy over speech therapy alone for the primary language outcome (adjusted between-group difference, -1.65; 95% confidence interval, -7.52-4.21; p=0.569). No statistically significant adjusted between-group differences were observed for secondary outcomes. Exploratory GEE analyses indicated time-related changes in PLS total score, CASD-C sensory difficulties, and CBCL 11/2-5 PDP T-score, but no significant group-by-time interactions., CONCLUSION: In this exploratory RCT, group-based music therapy was feasible to integrate with speech therapy and was not associated with intervention-related adverse events. Although language performance and selected autism-related behavioral features showed improvements over time, adjunctive group-based music therapy did not demonstrate statistically significant superiority over speech therapy alone. Larger adequately powered trials are needed to evaluate its incremental benefit. Copyright © 2026 Elsevier Ltd. All rights reserved.

52. Efficacy of Low Glycemic Index Diet Versus Modified Atkins Diet and Gluten Free Casein Free Diet as add-on Therapy With Standard of Care in Children With Autism Spectrum Disorder - A Randomized Controlled Trial

Anonymous. *clinicaltrials.gov* 2026;

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Brief Summary, Autism spectrum disorder (ASD) is a heterogenous, lifelong neurodevelopmental disorder with deficits in social communication and restrictive, repetitive patterns of behavior, with onset in the early developmental period leading to significant impairment in adaptive functioning. With the rising prevalence of ASD and expanding access to early intervention programs, there is a need for more efficacious therapies with a biological basis as additional interventions along with standard of care. The rationale for dietary therapies in autism being, the high rate of GI comorbidities and dysbiosis. Based on evidence from our centre, add-on modified Atkins diet and add-on gluten free, casein-free diet are superior to standard of care alone in improving core deficits (measured by CARS-2 score at 6 months) in children with ASD. Low glycemic index diet is a comparitively less restricitive diet with better adverse effect profile, with preclinical evidence in ASD. It has been proven to be non inferior to MAD for drug refractory epilepsy, with no clinical trials in ASD. This clinical trial aims to learn if add-on low glycemic index diet works as well as modified Atkins diet and gluten free casein free diet along with standard of care in children aged 3 to 8 years with Autism Spectrum Disorder. The main question it aims to answer is: In children aged 3 to 8 years with Autism Spectrum Disorder, what is the comparative efficacy of add-on low glycemic index diet versus Modified Atkins diet and Gluten free Casein free diet along with standard of care in reducing the CARS-2 score at 6 months post intervention? Eligible children aged 3-8 years with ASD will be randomised into three arms: 1. Low Glycemic Index diet arm: foods with glycemic index \>50 would be excluded 2. Modified Atkins diet arm: a high-fat, low carbohydrate diet in which carbohydrate intake would be restricted to 10 g/day 3. Gluten-free casein-free diet arm: gluten (oats, barley, wheat, rye) and casein (milk and milk products) containing foods would be excluded In all three arms, in addition to diet, standard of care involving behavioural therapy, speech therapy and occupational therapy would be continued. Baseline investigations would be performed prior to diet initiation, and the diet introduced gradually over a period of 2 weeks. Participants would follow the diet for a period of 6 months, maintaining a dietary log. Weekly telephonic contacts and two monthly physical contacts would be made to ensure compliance and check for any adverse events. Assessments will be performed at baseline, 3 months and 6 months post intervention in the form of autism severity, behavioral, neurocognitive and sleep assessment., Detailed Description, Children aged 3 to 8 years presenting to pediatric neurology OPD and Autism clinic in the department of Pediatrics, AIIMS, New Delhi, will be screened for eligibility. Those children fulfilling the inclusion and exclusion criteria will be enrolled. Eligible children will be randomised into three groups. Group I would receive add-on Low Glycemic Index diet (LGIT) with standard of care, Group II would receive add-on Modified Atkins diet (MAD) with standard of care and group III would receive add-on Gluten free casein free (GFCF) diet with standard of care. The process of randomisation will be done by a person who has no role in collecting the baseline variables, applying intervention, data collection or analysis of outcomes. Block randomisation would be performed in 1:1:1 ratio with variable block size using computer generated random numbers. These will be generated by a person not involved in the study. Allocation concealment: Serially numbered, sealed, identical envelope containing the random allocation will be kept at study site as per allocation sequence. Blinding : The study will be an open label randomised controlled trial. The individual performing behavioural and neuro-cognitive assessments will be blinded to the group to which the patient is randomised. Baseline demographic details will be collected and following evaluation will be done at baseline, 3 months and 6 months post intervention: 1. Autism severity assessment using CARS -2, ABC 2. Neurocognitive assessment using (DQ/IQ/SQ) -VSMS 3. Behavioral assessment using CBCL 4. Sleep related issues using CSHQ-SF The above copyrighted scales would be administered using authorized materials obtained through appropriate licensing arrangements. Standard of care: All three groups will receive standard of care intervention plan, which will be devised individually for each subject, including the following: * Behavioural therapy: * Behavioural modification techniques, Applied Behavioural Analysis * Psycho education * Cognitive behavioural therapy * Activity based interventions like eye contact exercises, attention enhancement exercises, self-help skills * Parental training * Speech therapy * Occupational therapy * Sensory integration therapy * Pharmacotherapy - Anti-psychotic medications (Risperidone/ Aripiprazole) as required in case of aggression/ irritability/ self-mutilation. The parents of the children will be called telephonically every week to check for any issues and reinforcement provided to ensure that appropriate therapies as advised are being provided. Dietary therapy: During the initial 2 weeks, the following workup will be completed: Baseline nutritional assessment in terms of anthropometry, dietary history with 24-hour dietary recall, estimation of required calorie and protein intake along with understanding of individual food preferences. A pre-diet workup will be done in the form of ECG, RFT, LFT, CBC, fasting lipid profile, Urine calcium creatinine ratio and USG KUB for nephrocalcinosis. Ferritin and 25-OH Vitamin D3 will also be tested to screen for pre-existing nutritional deficiencies and if so, will be supplemented accordingly. Group I- LGIT with standard of care arm : * If pre-diet work up is normal, then LGIT diet will be initiated. All medications will be changed to carbohydrate-free formulations and sugar-free toothpaste will be advised. * Medium and high glycaemic index carbohydrates (GI\>50) will be eliminated from diet. A dietary chart with low glycaemic foods (GI\

53. Effortful Control and Perceptual Sensitivity in Relation to Social Communication Skills in Preschoolers With Developmental Language Disorder

Sandikci T. Kaya A. Koyuncu Z. Hasimoglu A. Meral Y. Caliskan Y. Durcan G. Dogangun B. *Clinical Child Psychology and Psychiatry* 2026; Check for full-text availability

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Aims: This study compared social communication and temperament between children with developmental language disorder (DLD) and their typically developing (TD) peers. Furthermore, the study explored the associations between temperament and social communication within the DLD group. Method(s): Using a case-controlled cross-sectional design, the study included 55 preschool-aged children newly diagnosed with DLD and their age- and sex-matched TD peers. Diagnostic evaluation involved the Test of Early Language Development-Third Edition (TELD-3) and the DENVER II Developmental Screening Test. Parents completed the Social Communication Questionnaire (SCQ), Children's Behavior Questionnaire-Short Form (CBQ-SF), and Strengths and Difficulties Questionnaire (SDQ). Result(s): Children with DLD scored higher on the SCQ and reciprocal social interactions, indicating greater social communication difficulties. They also exhibited lower effortful control, particularly regarding attentional focus and perceptual sensitivity. Partial correlations controlling for age, sex, psychopathology, parental education, and family income revealed negative associations between

reciprocal social interaction and effortful control (r = -.315) and perceptual sensitivity (r = -.294). Conclusion(s): Children with DLD display significant social communication challenges linked to temperament-related regulatory differences. These findings underscore the importance of incorporating temperament-informed assessments and early interventions to support social communication outcomes in this population.Copyright © The Author(s) 2026. This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 License (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access page (https://us.sagepub.com/en-us/nam/open-access-at-sage).

54. Engaging Spanish-Speaking Families From Low-Income Households With Children With Language Delays: Recruitment Strategies and Costs

Peredo T.N. Durkin K.L. Kaiser A.P. *Journal of developmental and behavioral pediatrics : JDBP* 2026;
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OBJECTIVE: This study describes recruitment approaches and costs of engaging Spanish-speaking and Latino families and their young children with language delays in a randomized clinical trial of a naturalistic language intervention approach. METHOD(S): A total of 214 families were initially screened, and ultimately, 81 families were determined to be eligible and were enrolled in a randomized clinical trial. Families found out about the study via passive recruitment strategies (social media or word of mouth) and active recruitment strategies (referral by experts in early bilingual language development or referral by nonexperts in early bilingual language development). Differences in eligibility based on recruitment strategy type were examined, and a participant acquisition cost for each recruitment source was estimated. RESULT(S): There were significant differences in eligibility based on how families were referred. Families who were referred to the study by experts were significantly more likely to qualify and enroll. Referrals from an early intervention provider were the most cost-effective way to recruit families. CONCLUSION(S): Active recruitment strategies were essential to recruiting Spanish-speaking and Latino families into a randomized clinical trial. Studies that use primarily or exclusively passive recruitment approaches may result in biased samples. Establishing relationships with community experts may be especially important for research targeting children with disabilities.Copyright © 2026 The Author(s). Published by Wolters Kluwer Health, LLC.

55. English-Language Autism Terminology Preferences of Autistic People and their Parents in the United States: Clustering Illuminates Diverse Views.

Dwyer Patrick Williams Zachary J. Magnuson Jennifer E. Woynaroski Tiffany G. *Autism* 2026;30(10): 2610-2627.
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Autism terminology preferences are the subject of considerable debate and various studies, the results of which sometimes conflict. This study examined diversity in terminology preferences in a U.S. sample of 3,181 non-autistic parents and 2,098 autistic people (including 451 autistic parents). The study also examined a particularly wide range of language issues: participants rated terms for autism, possible subgroups within autism, autistic people, autism likelihood, and autistic characteristics. Non-autistic parents', autistic parents', and autistic non-parents' terminology ratings differed, but generally modestly. Using clustering to explore response patterns revealed greater variability. Almost half of the participants were grouped in the Open Cluster, characterised by liking or neutrality towards most terms. Others were grouped in the Identity-First Cluster, characterised by support for identity-first language, strong opposition to terms for possible autism subgroups, and rejection of many pathologising terms. Other participants were in the Person-First Cluster, characterised by support for person-first language, yet still some scepticism towards terms for possible autism subgroups. Autistic participants were overrepresented in the Identity-First Cluster, while non-autistic parents were overrepresented in the Person-First Cluster. These results suggest that there is presently no consensus regarding autism terminology preferences in the United States.Community AbstractWhy was this study done? It is important to respect how members of any community want to be talked about. However, previous studies about terminology preferences in the autism community sometimes provide different results. These conflicting results suggest that prior studies are not always capturing the diversity of terminology preferences in the autism community. What did the researchers do? We recruited large groups of autistic and non-autistic people in the United States. We asked them to rate different terms for talking about autism, subgroups within autism, autistic people, characteristics of autism, and the likelihood that somebody will later be diagnosed with autism. We then clustered the data, which means we let participants' responses sort themselves into clusters of similar responses. This allowed us to highlight the diversity of people's views. What did the researchers find? We found some terms that almost everyone liked, such as "autism," and other terms or phrases that almost everyone disliked, such as "person suffering from autism." However, most terms were liked by some people and disliked by others. We describe an "Open Cluster" of participants who like or have neutral feelings towards most terms. We describe an "Identity-First Cluster" of participants who like identity-first language and dislike terms for subgroups within autism. Identity-First cluster members also disliked many terms that imply autism is a bad thing, like "risk" for autism.Finally, we describe a "Person-First Cluster" of participants who like person-first language. Person-First Cluster members disliked some terms for subgroups within autism, but not as strongly as Identity-First Cluster members did. What are the implications? This study shows that autism community members do not always agree about terminology. This means that it is important to be thoughtful and considerate in how we talk about autism.

56. Enhancing the Prospective Acceptability of a Paediatric Speech and Language Therapy Intervention With Parents From Under-Represented Communities.

Rodgers Lucy Botting Nicola Herman Ros. *Health Expectations* 2026;29(5): e70855.

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BACKGROUND: Integrating the perspectives of people with lived experience is integral to developing new healthcare interventions. However, individuals from under-represented communities may face additional barriers to taking part in such patient and public involvement (PPI) activities. Within paediatric speech and language therapy (SLT), under-represented communities might include families from lower SES backgrounds and/or families where the majority language for that country is not spoken. Excluding families from under-represented communities poses the risk of new interventions not being acceptable to them, thus exacerbating pre-existing healthcare inequalities., OBJECTIVE: The aim of this study was to optimise the prospective acceptability of a new paediatric speech and language therapy intervention with parents from under-represented backgrounds, in the hope of optimising future accessibility to families from diverse communities., METHODS: An individualised PPI approach was taken, consisting of two semi structured interviews informed by the Theoretical Framework of Acceptability (TFA). Six parent partners from non-majority language and/or lower SES backgrounds were recruited through a local charity. In the first interview, parent partners were shown a video of the intervention and identified key areas for increasing acceptability. Refinements were made to the intervention by the project steering group in an online meeting. These refinements were the topic of the second interview, where the impact on prospective acceptability was explored., RESULTS: Following the first round of interviews, areas for improvement included consideration of access to/co-ordination with wider services, and the financial and practical implications for parents accessing the intervention. Most of the intervention refinements and solutions to potential barriers came directly from the parent partners themselves, rather than the steering group. In the second round of interviews, parent partners rated the intervention's prospective acceptability between 4/5 (acceptable) and 5/5 (very acceptable)., CONCLUSION: By working with parent partners from under-represented communities, the research team was able to enhance the prospective acceptability of a new paediatric speech and language therapy intervention. Many refinements related to the wider healthcare and support system, rather than to the content of the intervention itself. This reinforces the importance of exploring and addressing wider contextual barriers within the intervention development process., PATIENT OR PUBLIC CONTRIBUTION: The methods for this project were co-designed with a project steering group consisting of 3 Speech and Language Therapists (one with specialist EDI expertise), a bi/multilingual education support worker, a specialist early years teacher, a parent of a child with developmental language disorder (DLD) and an adult with DLD. The steering group also assisted with identifying potential intervention refinements. The parent partners were responsible for identifying areas where acceptability could be increased and addressing the prospective acceptability of the intervention refinements. Copyright © 2026 The Author(s). Health Expectations published by John Wiley & Sons Ltd.

57. Epilogue: language abilities in persons with dyslexia

Hancock N. Hogan T.P. *Annals of Dyslexia* 2026;76(2): 389-405.
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Language difficulties are common among individuals with dyslexia and warrant greater consideration across research, advocacy, and clinical practice. For almost a hundred years, language difficulties have been observed in individuals with dyslexia (e.g., Orton, 1928). However, in approximately half of all individuals with dyslexia, language difficulties meet the clinical criteria for developmental language disorder (DLD), an impairment in the comprehension and use of oral language (Bishop et al., 2017; Catts et al., 2003, 2005; Ramus et al., 2013). Even when language difficulties in dyslexia do not meet the clinical threshold for DLD, many subclinical language difficulties persist beyond the point of word-reading remediation (Gallagher et al., 1996). In light of these patterns, this epilogue synthesizes contributions from the special issue on language abilities in persons with dyslexia and identifies four priority areas for the field. First, research design should systematically measure and account for language comorbidity. Secondly, legislative screening policy should be expanded to include broader language comprehension measures alongside current predictors of word reading. Third, special education evaluation practices should incorporate cognitive-linguistic markers, such as nonword and sentence repetition, to differentiate dyslexia from DLD in comorbid presentations. Finally, word-reading intervention research should address the semantic and morpho-syntactic dimensions of language, in addition to phonological and orthographic instruction, to improve automatic word reading. Taken together, these priorities support a more complete account of dyslexia, one that reflects the full range of language profiles and accounts for comorbidity in this population, and is in line with the new definition of dyslexia (IDA, 2025).Copyright © The Author(s), under exclusive licence to Springer Science+Business Media, LLC 2026.

58. Estimated Prevalence of Developmental Language Disorder Risk in West Virginia Schools

Israelsen-Augenstein M. Moore M.W. Toman T. Rosborough A. *Language, speech, and hearing services in schools* 2026; 1-18.
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PURPOSE: Developmental language disorder (DLD) is linked to long-term academic and social difficulties. Despite these lasting impacts, state-level prevalence estimates are limited. This study estimated prevalence among early-elementary students in West Virginia who may be at risk for DLD and examined variation by grade, locale, and assessment instrument. METHOD(S): A cross-sectional screening battery was administered to 252 students in Grades 1-2 across six Title I schools. Children with Kaufman Brief Intelligence Test-Second Edition Matrices standard scores <= 70 were excluded prior to analysis. A dual-criterion definition of DLD risk was used: <= 80 on the Clinical Evaluation of Language Fundamentals-Fifth Edition (CELF-5) core composite and <= 92 on the Test of Narrative Language-Second Edition (TNL-2). Descriptive statistics and mixed-effects logistic regression (random intercept for school) tested effects of grade,

gender, and locale. RESULT(S): Using the dual-criterion definition, 72 of 252 students (28.6%) met criteria for being at risk for DLD. Adjusted models showed higher odds of DLD risk in town versus urban schools (odds ratio = 3.06, 95% confidence interval [1.31, 7.15], p = .010), whereas grade and gender were not significant predictors after accounting for school-level clustering. Instrument-specific classification rates diverged substantially, with the TNL-2 identifying a higher proportion of students relative to the CELF-5. CONCLUSION(S): Although based on a relatively small yet representative sample of West Virginia students, prevalence estimates substantially exceed commonly cited large-scale population estimates. Results underscore the influence of instrument choice on suspected prevalence and the need for locally calibrated screening protocols and targeted service planning.

59. Evaluating caregiver satisfaction with speech and language teletherapy: a comprehensive survey on effectiveness and accessibility.

Sami Rasha Ramzy Sherine. *Egyptian Journal of Otolaryngology* 2026;42(1): 1-8.
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60. Evaluating Phonological Short-Term Memory in Children with SLI: A Comparative Analysis of Serial Order, Item Information and Nonword Repetition Tasks.

Ooi Carmen Chia-Wen. *Journal of Psycholinguistic Research* 2026;55(5):
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Nonword repetition (NWR) and related verbal short-term memory (STM) tasks are widely used to characterise cognitive deficits in children with Specific Language Impairment (SLI). However, growing evidence suggests that performance on these tasks reflects not only memory processes but also the contribution of linguistic representations, raising questions about their interpretation as measures of phonological STM. The present study examined STM performance in Cantonese-speaking children with SLI (n = 18) and age-matched typically developing peers (n = 18) using three tasks: nonword repetition, serial order reconstruction, and delayed item repetition. Crucially, the study incorporated systematic manipulations of linguistic characteristics, including pseudo-morpheme versus pseudo-syllable stimuli in NWR and word versus nonword stimuli in delayed item repetition, to evaluate the influence of lexical and sublexical structure on task performance. Results showed that children with SLI performed significantly worse than peers across all tasks. However, performance was strongly modulated by linguistic factors. Both groups exhibited lexicality effects, with higher accuracy for pseudo-morphemes than pseudo-syllables in NWR and for words than nonwords in delayed item repetition. Group differences were most pronounced in conditions with greater lexical support, whereas performance converged when linguistic support was minimal. These findings indicate that verbal STM performance in SLI is best understood in terms of reduced efficiency in the interaction between STM processes and phonological representations, rather than a unitary memory deficit. The study highlights the importance of considering linguistic characteristics when interpreting STM tasks and demonstrates the value of using controlled manipulations to disentangle memory and language contributions in SLI. Copyright © 2026. The Author(s), under exclusive licence to Springer Science+Business Media, LLC, part of Springer Nature.

61. Evaluating the Diagnostic and Concurrent Validity of the DREAM-IT in Mandarin-Speaking Toddlers With Autism Spectrum Disorder and Developmental Language Disorder.

Zhao Jinzhu Wu Dandan Li Yutong Xiong Tingting Tang Lina Hu Xiaolin Liu Xueman Lucy Hao Yan. *International Journal of Language & Communication Disorders* 2026;61(5): e70321.
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BACKGROUND: Early language delay is a common presenting concern among toddlers with autism spectrum disorder (ASD) and developmental language disorder (DLD), creating challenges for clinical assessment and referral decisions. Although ASD and DLD differ in core social-communicative features, restricted/repetitive behaviours, and developmental mechanisms, language-focused assessment may provide complementary information about early communicative profiles. However, culturally adapted tools for assessing early language and communication in Mandarin-speaking toddlers remain limited., METHODS: A total of 213 children aged 24-36 months (ASD = 89, DLD = 60, TD = 64) were recruited from the Child Healthcare Department of a tertiary hospital between 2020 and 2022. Clinical diagnoses were established by multidisciplinary teams based on DSM-5 and CATALISE criteria. Caregivers completed the Diagnostic Receptive and Expressive Assessment of Mandarin-Infant & Toddler (DREAM-IT), which evaluates receptive and expressive language, cognitive play, and social communication. Receiver operating characteristic (ROC) curve analyses assessed discriminative validity across diagnostic groups, logistic regression examined the contribution of DREAM-IT domains to ASD-versus-DLD classification, and concurrent validity was evaluated against GDS, ABC, CARS, and ADOS-2., RESULTS: DREAM-IT showed strong diagnostic accuracy in distinguishing children with ASD or DLD from TD children (AUC = 0.84-0.998), but its ASD-versus-DLD discrimination was domain-specific and more limited. Receptive language provided the strongest ASD-versus-DLD discrimination (AUC = 0.81; sensitivity = 69.1%; specificity = 84.3%; optimal cutoff = 86.5), whereas expressive language, cognitive play, and social communication showed poor-to-limited standalone performance (AUC = 0.51-0.57). Logistic regression indicated that receptive language (OR = 1.10, $p < 0.05$) and expressive language (OR = 0.77, p = 0.015) independent contributed to ASD-versus-DLD discrimination, with an overall classification accuracy of 79.2%. DREAM-IT classifications demonstrated moderate-to-substantial agreement with established developmental and autism-related instruments, including GDS, ABC, CARS, and ADOS-2 (Cohen's kappa =

0.62-0.82). Developmental age comparisons revealed domain-specific lags, with ASD characterized by greater receptive and social delays and DLD showing the largest lag in expressive language., CONCLUSIONS: The Mandarin DREAM-IT provides clinically useful information about early language and communication development in Mandarin-speaking toddlers with ASD and DLD and shows moderate-to-strong concurrent alignment with established developmental and autism-related measures. Its primary value lies in characterizing domain-specific developmental patterns and offering useful complementary information within a broader, multi-method diagnostic framework for Mandarin-speaking populations., WHAT THIS PAPER ADDS: What is already known on this subject Differentiating autism spectrum disorder (ASD) from developmental language disorder (DLD) in toddlers is clinically important but challenging. Both conditions may present with early language delay, while ASD is characterised by core social-communication difficulties and restricted or repetitive behaviours. Accurate interpretation therefore requires a multi-method assessment integrating language evaluation, developmental history, direct observation, and autism-specific measures. However, culturally and linguistically appropriate tools for characterising early language and communication in Mandarin-speaking toddlers remain limited. What this study adds to the existing knowledge This study evaluated the diagnostic accuracy and concurrent validity of the Mandarin DREAM-IT in 213 toddlers with ASD, DLD, or typical development. DREAMIT showed good-to-excellent accuracy in distinguishing children with ASD or DLD from typically developing children, but ASD-versus-DLD discrimination was more limited and domain-specific. Receptive language provided the clearest discriminatory signal, whereas expressive language, cognitive play, and social communication showed substantial overlap. DREAM-IT developmental age scores showed moderate correlations with corresponding GDS measures, and its descriptive rule-based patterns showed substantial agreement with autism-specific instruments. What are the potential or actual clinical implications of this study? DREAM-IT may provide useful caregiver-reported information about receptive language, expressive language, cognitive play, and social communication in Mandarin-speaking toddlers. Its main clinical value lies in characterising domain-specific developmental patterns and providing complementary information within a broader, multi-method assessment framework. It should not be used as a standalone instrument to diagnose ASD or DLD or to differentiate between them. Results should be interpreted alongside developmental history, direct clinical observation, developmental testing, and autism-specific measures. Copyright © 2026 Royal College of Speech and Language Therapists.

62. Examining Percent Consonants Correct Produced by Preschool Children With and Without Cleft Palate Using the American English Phrase Sample

Chee-Williams J.L. McNeal H.F. Cordero K.N. Bruce L. Weinhold J. Scherer N.J. *Cleft Palate Craniofacial Journal* 2026;63(10): 3214-3224.
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Objective: Examine the percent consonants correct (PCC) produced by 3- and 4-year-old children with and without cleft palate using the American English Phrase Sample (AEPS) from the Cleft Audit Protocol for Speech-Augmented-Americleft Modification (CAPS-A-AM) protocol. Design(s): Prospective, cross-sectional study. Setting(s): Public research university. Participant(s): Sixty preschool age children were included: 30 with cleft palate and 30 without cleft palate. Each group was comprised of 15 children aged 3;0 to 3;11 (years; months) and 15 children aged 4;0 to 4;11. Intervention(s): Imitation of the AEPS. Main Outcome Measure(s): Total PCC and PCC by manner of production were calculated from the AEPS. Group differences were analyzed using the Mann-Whitney U test; data are reported as median and interquartle range (IQR). Result(s): The median total PCC for 3-year-olds with cleft palate was 38% (IQR=24-58), which was significantly lower (p=0.0001) than the 3-year-olds without a cleft (70%; IQR=60-77). Similarly, 4-year-olds with cleft palate produced a median PCC of 40% (IQR=9-67), which was significantly lower (p<0.0001) than 4-year-olds without a cleft (86%; IQR=84-96). Only 20% (n=3) of 3-year-olds and 7% (n=1) of 4-year-olds with cleft palate produced a total PCC within of the IQR of their noncleft peers' total PCC. Across both age groups, children with cleft palate produced stops, fricatives, affricates, liquids, and consonant clusters with significantly lower accuracy than their same-age peers. Conclusion(s): PCC scores derived from transcription of the AEPS may offer speech language pathologists a practical way to assess consonant accuracy using an imitation stimulus already integrated into clinical protocols. Copyright © 2025, American Cleft Palate Craniofacial Association

63. Executive Functions in Children with Speech Sound Disorders: A Qualitative Content Analysis of Studies Conducted in Turkiye

Cankuvvet N. Gor G.N. *Archives of Health Science and Research* 2026;13
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Objective: Speech sound disorder (SSD) is common developmental communication disorders increasingly viewed as embedded within broader cognitive processes. Executive functions (EF) support speech production, phonological representation, and self-regulation; however, their multidimensional nature is not consistently reflected in SSD research. This study aimed to systematically examine how EF have been conceptualized, operationalized, and reported in studies of children with SSD conducted in Turkiye. Method(s): A qualitative content analysis was conducted on studies published up to 2025 that investigated EF in children with SSD. Postgraduate theses and peer-reviewed journal articles were retrieved from databases and analyzed using predefined categories focusing on methodological characteristics, EF components, measurement approaches, and reported findings. All studies were independently coded by 2 researchers, and discrepancies were resolved through consensus. Result(s): Eleven studies met the inclusion criteria, the majority of which were master's theses. The analysis revealed a strong tendency to conceptualize EF primarily through working memory, while inhibitory control and cognitive flexibility were markedly underrepresented. Measurement approaches relied mainly on standardized, performance-based assessments targeting verbal working memory. Executive function performance in children with SSD varied with age, sex, and clinical severity. Limited intervention-based evidence suggested that EF may be sensitive to the cognitive

scope of therapeutic approaches. Conclusion(s): The national literature on EF in children with SSD in Turkiye reflects a consistent but narrow focus. Future research should adopt more multidimensional, ecologically informed, and longitudinal designs to strengthen conceptual understanding and clinical relevance. Copyright Content of this journal is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License. https://creativecommons.org/licenses/by-nc/4.0/

64. Expanding the Phenotypic Spectrum of NUS1-Related Disorders: A Case of Childhood-Onset Parkinsonism

Munoz-Chesta D. Mendez A. Hidalgo M. Rubilar C. Kramer V. Troncoso-Schifferli M. *Movement Disorders Clinical Practice* 2026;13(8): 1992-1994.
Check for full-text availability

More details

65. Exploring diagnostic language assessment practices in South Africa: A national survey

Botes M. *South African Journal of Communication Disorders* 2026;73(1): a1186.
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More details

Background: Diagnostic language assessment is central to speech-language therapy; however, in multilingual contexts such as South Africa, clinicians face challenges related to linguistic diversity, limited access to culturally appropriate tools and contextual constraints. Objective(s): This study aimed to describe diagnostic language assessment practices among South African speech-language pathologists (SLPs), including tools used, screening and assessment workflows, domains assessed, time and cost considerations, interpretation practices, and clinician confidence. Method(s): A descriptive, cross-sectional survey design was employed. Using convenience and snowball sampling, an online questionnaire was completed by 99 SLPs across South Africa. Data were analysed using descriptive statistics. Result(s): Speech-language pathologists reported using a combination of standardised and informal assessment tools, with commonly used instruments including the Renfrew Language Scales, Clinical Evaluation of Language Fundamentals and Test of Auditory Comprehension of Language. Screening practices were inconsistent, and assessments typically spanned one to two sessions. Clinical judgement was the most frequently used interpretive approach, while reliance on standardised norms and monolingual comparisons was less common. Clinicians reported low to moderate confidence when assessing multilingual clients. Key challenges included lack of culturally adapted tools, linguistic bias in assessments and difficulties interpreting bilingual children's results. Conclusion(s): Diagnostic language assessment practices in South Africa reflect adaptive responses to systemic constraints rather than inconsistency in clinician practice. Contribution: The findings highlight the need for culturally grounded, multilingual assessment frameworks, locally relevant tools and clearer practice guidelines to support equitable diagnostic decision-making. Copyright © 2026. The Author. Licensee: AOSIS. This work is licensed under the Creative Commons Attribution 4.0 International (CC BY 4.0) license (https://creativecommons.org/licenses/by/4.0/)

66. Exploring parental and caregiver knowledge, reactions, and reported practices toward childhood stuttering in Egypt: a cross-sectional study

Khodeir M. Ebaid E. Hegazi M. *Egyptian Journal of Otolaryngology* 2026;42(1): 216.
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Background: Parental/caregivers' knowledge and responses are pivotal for early recognition, effective management, and ultimate prognosis of childhood stuttering. However, specific empirical data on parental perspectives are limited in Egypt, which hinders timely and effective intervention and support strategies. This descriptive, cross-sectional study comprehensively explored Egyptian parents'/caregivers' knowledge, reactions, and behaviors regarding childhood stuttering. Method(s): One hundred forty-five parents/caregivers of children who stutter completed an online, item-based Arabic questionnaire. This questionnaire assessed parental/caregiver knowledge of childhood stuttering, their typical reactions to their children's speech, and their adoption of home-based management approaches. Result(s): More than half of parents/caregivers reported limited knowledge across several questionnaire domains. Common parental reactions included patiently waiting for the child to finish speaking or showing empathy to facilitate communication. While 62.8% reported no general alteration in their treatment of their children due to stuttering, 37.2% treated their children who stuttered differently from their other children. A notable 58.6% of parents/caregivers had never discussed the stuttering problem with their child. Parental reactions did not significantly vary by the child's age or gender; however, significant differences were seen among parents/caregivers of only children and eldest children. Furthermore, 50% of participants reported feeling very worried to extremely worried about their children's stuttering, yet there was a limited tendency to seek professional help. Conclusion(s): There are gaps in parents/caregivers' knowledge and variability in reported caregiving responses to childhood stuttering in Egypt. These findings underscore the urgent need for targeted public educational programs to address misconceptions, increase parental knowledge, and enhance child outcomes.Copyright © The Author(s) 2026.

67. Exploring the relationship between auditory processing characteristics and cognition in preschool children with developmental language disorder based on fNIRS

Wang W. Liu P. Hao B. Zhou J. Chen B. Sun Y. Yu X. Li T. Xu Y. Meng L. Zhang L. Qian J. Chi X. Hong Q. *Journal of Neurodevelopmental Disorders* 2026;18(1): 54.
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More details

Background: Auditory processing (AP) is a fundamental function in speech signal processing. The ability to process speech signals in noisy environments is commonly used to assess AP capabilities. Research on the AP characteristics in Chinese children remains scarce, and the relationship between AP and language/cognitive development has not been explored. This study investigated the AP performance of children with developmental language disorder (DLD) in daily life and under the standardized speech-in-noise (SIN) comprehension paradigm. Using functional Near-Infrared Spectroscopy (fNIRS) to monitor brain activation in real-time during noisy environments, the study analyzed the functional modes of targeted brain regions in Chinese DLD children under noisy environments, while also exploring the relationships between AP behaviors, brain activation patterns, and cognition. Method(s): This cross-sectional study enrolled 34 Chinese preschool children with DLD and 43 age- and gender-matched typically developing (TD) children. Parents completed basic demographic information, the Preschool Auditory Processing Assessment Scale (PAPAS), and the Behavior Rating Scale of Executive Function-Preschool Version (BRIEF-P). A self-developed SIN comprehension paradigm adapted for Chinese preschool children with DLD was utilized, and fNIRS was employed to record brain activation patterns while the children performed the SIN comprehension task. Result(s): 1) AP Behavior: The DLD group scored higher than TD group on all dimensions of the PAPAS ($P < 0.05$); main effects of the group ($F = 54.303$, $P < 0.001$) and listening condition ($F = 11.83$, $P = 0.001$) were significant for the accuracy (ACC). 2) Brain activation characteristics during the SIN comprehension task: The DLD group showed significantly lower activation than the TD group in the left dorsolateral prefrontal cortex (DLPFC), left Broca's area, bilateral superior temporal gyrus and middle temporal gyrus (STG and MTG), and right Wernicke's area (P-corrected < 0.05). 3) The AP total scores, auditory decoding scores, and hyperactivity impulse dimension scores of both groups of children were negatively correlated with the scores on each dimension of the DREAM-C and the WPPSI-IV/WISC-IV (P-corrected < 0.05); the scores on each PAPAS dimension were positively correlated with the scores on each dimension of BRIEF-P (P-corrected < 0.05). 4) The activation levels in the left DLPFC, left Broca's area, right Wernicke's area, and bilateral STG and MTG in both groups of children were positively correlated with all dimensions of the DREAM-C (P-corrected < 0.05). The activation levels in the left DLPFC, left Broca's area, right Wernicke's area, and right STG and MTG were positively correlated with the full-scale intelligence quotient and verbal comprehension index scores (P-corrected < 0.05). Conclusion(s): Children with DLD may exhibit AP abnormalities as early as the preschool years, as reflected by poorer performance on AP tasks and atypical cortical activation patterns.Copyright © The Author(s) 2026.

68. Factors Impacting Treatment Decisions in Caregivers of Autistic Children

Harris T.G. Record J. Smith S.D. *Behavioral Sciences* 2026;16(8): 1280.
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More details

Leventhal's Common Sense Model (CSM) is a theoretical framework developed to understand the self-regulatory processes involved in adapting to and managing health threats. This is the first known study to examine all components of the CSM (i.e., illness perceptions and coping behaviors) in its application to treatment seeking behaviors in caregivers of autistic children (N = 288). Results revealed a significant indirect pathway from caregivers' perceptions of the unpredictable nature of ASD symptoms to intentions to seek treatment for their children through problem-focused coping (beta = 0.07, p = 0.02, 95% CI [0.01, 0.13]). Additionally, caregivers' perceptions about the controllability of their children's ASD symptoms were positively related to treatment seeking behaviors (beta = 0.19, p = 0.03, 95% CI [0.06, 0.34]). These findings suggest that providers assess and then use CBT-based strategies (e.g., cognitive restructuring) to potentially modify aspects of caregivers' cognitions and coping behaviors during ASD feedback sessions to promote prompt treatment seeking for their autistic children. Copyright © 2026 by the authors.

69. Foundations for pediatric vocal biomarkers: age-aware phoneme recognition and latent-space error analysis

Saligram C. Shrivastava V. Speights M. *Frontiers in Human Neuroscience* 2026;20 1802703.
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More details

Introduction - Pediatric speech sound disorders (SSDs) affect many young children and are commonly assessed through auditory-perceptual judgments and IPA transcription, which are limited by listener bias, variable interrater reliability, and difficulty attributing deviations at the phoneme level. We present a developmentally informed framework for pediatric vocal biomarker foundations that prioritizes age-aware, phoneme-resolved interpretability over utterance-level accuracy alone. Methods - Using a CAAP-derived subset of the SEED corpus (27-94 months) with clinically specified phoneme targets and SSD labels, we construct age-stratified phoneme profiles and quantify error structure via phoneme error rate (PER) and age-banded confusion signatures. We operationalize co-articulation as transition dynamics from MFCC trajectories and their first and second derivatives, reflecting the velocity and acceleration of spectral change across adjacent segments. We learn compact acoustic representations with a variational autoencoder (VAE) and model temporal evolution with BiLSTMs, including attention, to characterize disorder-relevant instability in latent trajectories. For phoneme transcription, we train BiLSTM-CTC sequence models on clinically elicited speech and evaluate disorder classification and phoneme substitution patterns within age groups, then stress-test generalization on ECSC "Frog Story" narratives from TalkBank/CHILDES. Results - Co-articulation transition magnitudes varied systematically by age and clinical group. Attention improved temporal classification specifically in younger children, and PER dropped markedly between ages 3-4 and 4-5. On long-form naturalistic narratives, CTC training and inference remained numerically stable, but greedy decoding produced degenerate output dominated by blank and repetition tokens. Discussion - Together, these results support an age-aware approach to pediatric phoneme analytics, in which articulatory coordination, not just phoneme identity, carries developmentally and clinically relevant information;

and phoneme-level performance should be interpreted relative to developmental stage rather than a single fixed benchmark. The decoding failures on naturalistic speech indicate a bottleneck specific to decoding rather than to the underlying representations, motivating constrained, hierarchical, or duration-aware decoding as a tractable next step. These findings position age-stratified, phoneme-resolved analysis as a foundation for interpretable and scalable pediatric screening and biomarker development. Copyright © 2026 Saligram, Shrivastava and Speights.

70. Honoring Children's Communication Rights: Listening to the Perspectives of Children Who Stutter Using Drawings, Self-Report Measures, and Interviews

O'Malley M.-P. Conroy S. Carroll C. *Language, speech, and hearing services in schools* 2026; 1-15.
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PURPOSE: Reflecting a commitment to the Convention on the Rights of the Child (CRC), and Articles 12 (respect for children's views) and Article 13 (sharing thoughts freely) in particular, this study aimed to explore whether drawings with interviews are a suitable method for understanding the perspectives of children who stutter (CWS) and what CWS communicate about their talking using this method. METHOD(S): Data were collected with 16 children aged 4;0 (years;months)-6;10 and involved drawings (62), interviews, and three self-report measures. The drawings were analyzed quantitatively across two dimensions: (a) developmental analysis and (b) focal point analysis. Inductive reflexive thematic analysis of the interview transcripts was also conducted. RESULT(S): Self-report measure scores indicated that most participants were "happy" about their talking with an average self-perception of little/no difficulty when talking. Participants demonstrated developmentally age-appropriate drawing skills. Six focal points were identified across the 62 drawings: (1) facial expressions, (2) accentuation of body features, (3) portrayal of talking/listening, (4) colors used, (5) conversation partners, and (6) sense of self. Four themes were generated: (1) familial relationships, (2) friendship, (3) child's interests, and (4) self-perception of competence. CONCLUSION(S): Drawing with an interview is a suitable method for understanding the perspectives of CWS. A range of perspectives were expressed by the children. Stuttering was not found to be a prominent feature of children's perspectives on their talking. These findings contribute to the adoption of holistic, person-centered approaches when working with CWS in speech-language pathology.

71. How changes to frequency of treatment and mode of treatment improved paediatric speech-language pathology services: A pragmatic clinical trial.

Van Epps Virginia M. Daur-Schierholz Morgan Dortenzio Mary Mendillo Emma Urzua Jodi Brimacombe Michael Hinderer Katherine A. *International Journal of Speechlanguage Pathology* 2026;28(5): 1064-1075.
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PURPOSE: This pragmatic clinical trial examined the functional impact of a modified speech-language pathology intervention delivery model (including telepractice, reduced therapy frequency, and emphasised home programmes with parent training) on child outcomes., METHOD: A convenience sample of 40 children from speech-language pathology clinics at one institution was randomly assigned to 8 weekly or 8 fortnightly hour-long speech-language pathology intervention sessions. Pre-treatment and post-treatment standardised tests were administered and compared. All participants received parent training, a prescription for home programmes, and chose their preferred mode of treatment (telepractice and/or in-office). ANOVA and t-tests explored outcomes. Significance level was 0.05., RESULT: Performance improved post-intervention in both groups; score improvements were not significantly different between weekly vs. fortnightly groups or delivery modes. This may indicate that varied modes and frequencies of therapy produce similar outcomes. Home programme completion did not result in significant outcome differences. Some findings may be attributed to the small sample size., CONCLUSION: Children's functional speech-language performance outcomes may not differ based on frequency (weekly vs. fortnightly) and/or modality of intervention (telepractice vs. in-office). More research in larger populations is needed to explore if such interventions are efficacious while reducing burden to families' schedules, finances, and travel.

72. Immune response and stuttering: the potential link between cytokines and stutter.

Sagiroglu Saime Guzelsoy Kilinc Metin Orhan Israfil Cinar Omer Faruk Yildiz Muhammed Gazi Doganer Adem Altuntas Emine Elif. *Revista Brasileira de Otorrinolaringologia* 2026;92(5): 101774.
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More details

OBJECTIVE: Stuttering is a common speech disorder among the general population, characterized by disruptions in the fluency of speech. Even if many studies have been managed on stuttering, the etiology has not yet been exactly explained. This article aims to assess the level of cytokines in patients who stutter to provide evidence-based guidelines for clinicians., METHODS: A total of 74 children, including 34 who were stutterers and 40 who were controls, aged 4-15 years were included. The children with stuttering completed the Stuttering Severity Instrument-3 (SSI-3) form. Serum concentrations of IL-1, IL-6, IL-8, and TNF-alpha were analyzed in blood samples obtained from the subjects., RESULTS: Of the stuttering children we included in the study, 3 (8.8%) had very mild, 13 (38.2%) had mild, (35.2%) had moderate, 4 (11.7%) had severe, and 2 (5.8%) had very severe stuttering. IL-1, IL-8, and TNF-alpha levels in stuttering patients were significantly higher compared to the control group ($p = 0.028$, $p = 0.031$, $p < 0.001$, respectively). The IL-6 level did not show a statistically significant difference between the groups ($p = 0.461$). Regarding the diagnostic performance of

stuttering, IL-1, IL-6, IL-8, and TNF-alpha all demonstrated statistically significant ability to distinguish between patients and the control group (p = 0.025, p = 0.021, p = 0.004, p = 0.003, respectively)., CONCLUSIONS: These results suggest an increase in circulating levels of cytokines known to be regulatory and that stuttering is associated with a proinflammatory state. These results may be well-considered important in the diagnosis and evaluation of stuttering. This study contributes further support to investigate the immune system as a target for future therapeutic development., LEVEL OF EVIDENCE: Level 4. Copyright © 2026. Published by Elsevier Espana S.L.U.

73. Impact of Consanguineous Marriage on Hearing Loss and Subsequent Speech and Language Delay in Under-Five Children: A Focused Case-Control Analysis

Srinivas P. Vengadakrishnan J. Visveswaran T. Sakthignanavel A. *Asian Pacific Journal of Health Sciences* 2026;13(3): 53-57.
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More details

Background: Parental consanguinity remains prevalent in South India due to socio-cultural practices. Although its association with congenital anomalies is established, its quantitative relationship with childhood hearing impairment and subsequent speech and language delay (SLD) requires regional evaluation. Objective(s): The objective of the study was to quantify the association between parental consanguinity, hearing loss, and developmental speech/language delay among children under 5 years. Material(s) and Method(s): A hospital-based case-control study was conducted in the Pediatric outpatient department in collaboration with ENT at Aarupadai Veedu Medical College and Hospital, Puducherry. Forty age-and gender-matched children were enrolled: 20 with parental consanguinity (Cases) and 20 without (Controls). Language development was assessed using the Language Evaluation Scale Trivandrum for children aged 1-3 years and the Trivandrum Developmental Screening Chart for those aged 3-5 years. Objective hearing assessment included Otoacoustic Emissions and Brainstem Auditory Evoked Responses. Result(s): SLD was identified in 14 (70.0%) Cases compared with 4 (20.0%) Controls (odds ratio [OR] 9.33, 95% confidence interval [CI]: 2.11-41.22; P = 0.0016). Hearing impairment was detected in 10 (50.0%) Cases versus 2 (10.0%) Controls (OR 9.00, 95% CI: 1.54-52.48; P = 0.0064). Expressive language delay was the predominant phenotype. Conclusion(s): Parental consanguinity was strongly associated with childhood hearing impairment and speech/language delay. These findings support integrating neonatal hearing screening and early language surveillance into primary healthcare, particularly in populations with prevalent consanguineous marriage practices. Copyright © 2026 The Author(s).

74. Impact of Immunotherapy Addition on Dose Density and Clinical Outcomes of Neoadjuvant Chemotherapy for Triple-negative Breast Cancer: A Retrospective, Real-world Study From Multiple Centers in London, UK

Javed R. Veli M. De Souza K. Fessas P. Millar L. Koske D. Dasgupta R. Oroko B. Muhammad R. Islam J. Rai S. Sheri A. Konstantis A. Raja F. Ottaviani D. Papadimitraki E. *Clinical Breast Cancer* 2026;26(9): 107-113.
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More details

Background: Neoadjuvant chemotherapy (NACT) combined with pembrolizumab is now standard care for early-stage, triple-negative breast cancer (TNBC), based on KEYNOTE-522 demonstrating improved pathological complete response (pCR), event-free survival, and overall survival. However, the real-world impact of treatment modifications due to toxicity remains unclear. We evaluated clinical outcomes and treatment delivery in routine practice. Material(s) and Method(s): This multicenter retrospective study included patients with stage II to III TNBC treated with NACT plus pembrolizumab across 5 UK centers (May 2022-June 2025). Data on immune-related adverse events (irAES), corticosteroid use, immunotherapy omissions, chemotherapy dose reductions and recurrence were collected. pCR rates were compared according to treatment modifications. Result(s): One hundred patients were analyzed (median age 50 years; 54% node-positive). Overall pCR rate was 54.0%, with no significant difference by pembrolizumab omissions (0: 55.0%; 1-3: 55.6%; >= 4: 46.2%; P = .83) or corticosteroid use (48.3% vs. 56.3%; P = .61). Grade >= 3 toxicities occurred in 37%, and 29% required corticosteroids, most commonly between cycles 2 to 4. Pembrolizumab omissions occurred in 40%, chemotherapy dose reductions in 57%; 23% did not complete planned chemotherapy. Fourteen recurrences were observed (median 11 months), predominantly in baseline node-positive disease; 4 occurred despite pCR. Conclusion(s): In real-world practice, pembrolizumab-based NACT is associated with frequent treatment modification, yet pCR rates remain comparable to trial data. Early recurrences-often in node-positive patients and occasionally despite pCR-highlight the need for improved risk stratification, optimized adjuvant strategies, and proactive toxicity management to ameliorate long-term outcomes.Copyright © 2026 Published by Elsevier Inc.

75. Impact of Maternal Postpartum Depression on Developmental Outcomes in Children up to Three Years of Age: A Retrospective Cohort Study in Japan.

Nishida Tomoko Okumura Yosuke Takahashi Yuki Sakakibara Hisataka. *Journal of Pediatric Healthcare* 2026;40(5): 668-677.
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More details

• Maternal postpartum depression affects child developmental delay up to age three. • Language development is most strongly affected among language, motor, social domains. • Early support for mothers with postpartum depression is vital for child development. This retrospective cohort study sought to elucidate the connection between postpartum depression (PPD) in mothers and the developmental progress of children up to the age of three, utilizing data from maternal-child healthcare services in N city, Aichi prefecture, Japan. Data from 10,787 mother-child pairs who completed the Edinburgh Postnatal Depression Scale after childbirth and

participated in child health checkups at 3 months, 1.5 years, and 3 years were analyzed. These results indicated that PPD poses a long-term developmental risk to children impacting language skills.

76. Interactive Effects of Executive Function and Language Ability on Children's Cross-Situational Word Learning.

Crespo Kimberly Khandelwal Malvika Rushi Gabriela. *Journal of Speech, Language & Hearing Research* 2026;69(9): 4368-4390.
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More details

Purpose: This study examined whether executive function (EF) skills predict cross-situational word learning (CSWL) in children and whether EF-CSWL relationships vary as a function of language ability, including in children with developmental language disorder (DLD). Method: Fifty monolingual English-speaking children 5-9 years of age completed a CSWL task in which they learned five novel words. EF was measured using indices derived from the dimensional change card sort task, indexing shifting, inhibitory control, and monitoring skills. Results: EF skills predicted CSWL, but critically, language ability moderated these effects. Specifically, statistical word learning performance improved as shifting and monitoring skills increased, but only in children with average-to-high language skills. Weaker EF skills attenuated the benefit of language ability on statistical word learning in children with robust language systems. Across models, EF explained little variance in CSWL performance in children with weaker language skills, including those with DLD. Inhibitory control, as measured here, played a minimal role in CSWL across children with different language profiles. Lastly, language ability uniquely predicted CSWL, and performance improved with age. Conclusions: The findings refine theoretical accounts of CSWL by showing that statistical word learning may depend on the dynamic interplay between executive control and language ability. Results indicate that poor CSWL in children may not stem from a deficit in a single domain (e.g., language or EF), especially among children with weaker or atypical language profiles. These results underscore the need for language acquisition models to incorporate EF-language interactions.

77. Investigating the Effects of Adding Explicit Teaching and/or Signing to Story-Based Vocabulary Intervention for School-Aged Children With (Developmental) Language Disorder

Hughes L. Larralde C. Nicoll H. Maric N. Burke C. Ebbels S. *International Journal of Language and Communication Disorders* 2026;61(5): e70317.
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More details

Background: Children with language disorders, including developmental language disorder (DLD), experience challenges with word learning. Common components of vocabulary interventions include presenting target words in a story, providing explicit teaching and using sign/gesture alongside speech. However, previous studies have not investigated the relative contribution of these components, in isolation or combination. Aim(s): To measure the effects of adding explicit teaching and/or augmentative signing to a story-based vocabulary intervention. Method(s): Eighteen participants, aged 7;09-15;02 years, took part in our within-participant design study. All had a language disorder; 14 with DLD, and four with an associated biomedical condition. They were taught 48 real verbs and adjectives, randomly assigned to one of four conditions, over an 8-week intervention period. In the reference condition, participants watched videos of a speech and language therapist (SLT) reading a story where target words were presented incidentally, four at a time. In the first experimental condition, the delivering SLT added explicit teaching to the reference intervention. This included: providing definitions, modelling words in sentences, requesting retrieval and employing a cueing hierarchy. The second experimental condition added augmentative signing to the reference intervention, whereby the SLT in the video signed the target words as they appeared in the story. The final experimental condition added both explicit teaching and signing. In all conditions, frequency of word presentations was controlled. Word sets were counterbalanced to minimise confounds. Outcome measures assessed vocabulary knowledge and use with: (1) a word definition task and (2) sentence generation. Result(s): Participants showed stronger progress in all experimental conditions, compared to the reference condition. Bayesian models showed that adding both explicit teaching and augmentative signing in combination to the reference intervention did not lead to greater progress than adding just one of these components. Neither participants' age nor language ability were associated with intervention progress. Discussion(s): Our results indicate that adding either explicit teaching or augmentative signing to story-based vocabulary intervention is similarly advantageous. Adding both does not confer additional advantage. Larger-scale studies are needed to explore differences between participants and experimental conditions. Conclusions/Implications: Our study highlights the importance of evaluating systematically the contribution of potential active ingredients within interventions. In particular, analysing how they work together and separately is important, as adding more ingredients does not necessarily improve effectiveness. Our results inform vocabulary teaching, indicating that staff should incorporate either augmentative signing or explicit teaching whenever possible to support the vocabulary learning of those with language disorders. WHAT THIS PAPER ADDS: What is already known on this subject Children with (developmental) language disorders experience difficulties with word learning, which can affect their education and social participation. Previous research indicates that story-based intervention, explicit teaching and, in some cases, augmentative signing can support vocabulary learning. However, many interventions combine multiple components, making it difficult to determine which specific components are active ingredients, responsible for progress. What this paper adds to existing knowledge This study systematically compared the effects of adding explicit teaching and/or augmentative signing to a story-based (implicit) vocabulary intervention for school-aged children with (D)LD. Our results indicate that adding explicit teaching and/or augmentative signing can lead to greater improvements in learning new verbs and adjectives than the implicit intervention alone. Combining explicit teaching and signing does not appear to lead to additional benefit. What are the potential or actual clinical implications of this work? SLTs and school staff working with children with (D)LD should prioritise incorporating either augmentative signing or explicit teaching strategies whenever feasible to support vocabulary

development. Signing may be quicker to implement as this can be delivered alongside speech. Intervention choices could be tailored to children and staff's individual preferences and skills. Larger studies are required to explore differences between participants and experimental conditions.Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

78. Language Adaptation of Young Bilingual Autistic Children During Semi-Naturalistic Interactions With Their Caregivers.

Maes Pauline Tafolla Maira Benrey Nurit Rosen Nicole Tager-Flusberg Helen Lord Catherine. *Autism research : Official Journal of the International Society for Autism Research* 2026;19(9): e70319.
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More details

Although bilingualism is now recognized as having no adverse effects on language outcomes in autistic children, little is known about how it manifests in early development, particularly in minimally speaking children who may show unique patterns of bilingual expression. The present study used naturalistic language sampling to characterize bilingual language use in minimally speaking autistic children and their caregivers. Video recordings of 31 minimally speaking autistic children interacting with their caregivers during two separate sessions of the Brief Observation of Symptoms of Autism (BOSA)-one in English and one in Spanish-were transcribed and analyzed for language skills (mean length of utterance in words, number of different words), speaking rate (utterances per minute), and use of English, Spanish, or mixed-language utterances. We found that children were slightly more proficient in English than in Spanish, especially in the number of different words. Both children and caregivers produced similar rates of speech across the English and Spanish BOSA sessions, suggesting that language choice did not quantitatively impact their interaction. Finally, children aligned with their caregivers' language use more consistently in English than in Spanish. Although they responded in Spanish when caregivers used Spanish, they also switched into English a lot during the Spanish BOSA. These findings suggest that minimally speaking autistic children flexibly adapt to their caregiver's language while showing an early advantage or preference for their societally dominant language. Copyright © 2026 International Society for Autism Research and Wiley Periodicals LLC.

79. Let's read together: An examination of augmentative and alternative communication supported interactive reading in the classroom

Thomas N. Grevesse P. Spyropoulos A. *Child Language Teaching and Therapy* 2026;
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More details

Background: This study examines the impact of an adapted version of the "Tell Me Program-AAC in the Preschool Classroom" on emergent literacy and vocabulary development in children with intellectual and developmental disabilities, autism spectrum disorder, and complex communication needs. Method(s): Fourteen French-speaking children aged 6 to 16 participated in a five-week interactive reading intervention supported by augmentative and alternative communication (AAC). Sessions were led by teachers or speech and language pathologists. Participants were assessed pre- and post-intervention using experimental tasks targeting core and specific vocabulary, emotion identification, letter knowledge, print and phonological awareness. Result(s): Results show significant improvement in print and phonological awareness, but no significant gains in vocabulary (core or specific), letter knowledge, or emotion identification. Conclusion(s): These findings suggest that AAC-supported interactive reading can foster print and phonological awareness. Limitations highlight the need for further research, including broader age ranges, individual versus group formats, and integration of high-tech AAC tools. Copyright © The Author(s) 2026

80. Listener Ratings of Stuttering: Evaluating Two Auditory-Perceptual Scales.

Johnson Allison Bullen Anja Sokolov Sima Eadie Tanya Kokaly Melissa Cler Gabriel J. *Journal of Speech Language & Hearing Research* 2026;69(1): 108-122.
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More details

PURPOSE: Stuttering is a motor speech difference characterized by a disruption in the fluency, timing, and rhythm of speech. There is a lack of agreement on how to reliably and efficiently assess stuttering in research and the clinic. This study aims to compare the validity and reliability of two types of auditory-perceptual scales, direct magnitude estimation and equal-appearing interval scales, on assessing stuttering in adult speakers., METHOD: Two experiments compared unfamiliar listener ratings of speech samples from adults who stutter. Raters used one of two different rating scales to determine the construct validity and reliability of scaling procedures for capturing stuttering. The two experiments varied by the number and duration of samples (set number of syllables vs. set duration) and by the training given to participants (defining stuttering severity vs. allowing participants to define severity themselves)., RESULTS: Both experiments demonstrated the appropriateness of both scales for rating stuttering., CONCLUSIONS: Contrary to earlier studies, our findings indicated that a 7-point equal-appearing interval scale validly captured unfamiliar listeners' perception of stuttering severity. Future study is needed to determine the number of raters needed to provide stable ratings as well as the utility of average or single ratings to capture clinically relevant change.

81. Longitudinal Analysis of Developmental Trajectories in Children With Language Delay.

Park Ji Hyun Doan Hoa Ngan Chang Min Cheol. *Clinical Pediatrics* 2026;65(8): 1015-1020.

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More details

We examined developmental trajectories of receptive and expressive language abilities in children aged 1 to 5 years and beyond. We retrospectively recruited 158 children. Using the Sequenced Language Scale for Infants and the Preschool Receptive-Expressive Language Scale, children were grouped as typically developing (TD), mildly delayed (MD), or severely delayed (SD). Language was assessed under 3 age groups: under 2 years, 2 to <5 years (in 6-month intervals), and ≥5 years. Most TD children before age 5 remained TD, although some transitioned to MD or SD, especially after 3.5 years. The MD children at younger ages often improved to TD, but this likelihood declined approaching age 5. Those classified as SD had a lower chance of improvement, with fewer transitioning to MD or TD. The likelihood of improvement from MD and SD decreased with age. Children exhibiting both MD and SD demonstrate potential for improvement; however, the likelihood decreases with age.

82. Longitudinal case study of syntactic, lexical and articulation rate development at stuttering onset in a young Japanese child.

Takahashi Saburo Iimura Daichi. *Journal of Fluency Disorders* 2026;89 N.PAG-N.PAG.
Check for full-text availability

More details

This study investigated the relationship between syntactic, lexical and articulation rate development and the onset of stuttering in a young Japanese child from the pre-onset stage. We also examined the linguistic factors influencing stuttering-like disfluency (SLD) immediately after stuttering onset. The case was a female child aged 1 year 11 months at the beginning of the study. Twenty free-play sessions were video-recorded over approximately two years and four months to analyze SLD, physical concomitants, predicate-argument structures, mean length of utterances (MLU), lexical diversity (VocD), and articulation rate. The influence of sentence-level factor (utterance length), and word-level factors (bunsetsu length, and syllable weight) on SLD was also assessed immediately after onset. SLD frequency was near zero until the sixth session, and prior to the emergence of predicate-argument structures, SLDs were rarely observed. Stuttering onset occurred two days before the seventh session, at which point SLD frequency increased rapidly alongside the appearance of physical concomitants. During this period, predicate-argument structures and VocD values increased sharply, though MLU and articulation rate did not. Additionally, no significant influences of utterance length, bunsetsu length, and syllable weight were observed immediately after onset. Our findings suggest that, at least for the present case, rapid syntactic and lexical development can be associated with stuttering onset. Furthermore, the results imply that selected sentence- and word-level factors might not influence the occurrence of stuttering immediately after onset in this case. • Predicate-argument structures and lexical diversity (VocD) showed notable increases around onset. • Stuttering-like disfluencies rarely occurred before predicate-argument structure emergence. • MLU and articulation rate did not change around onset. • Both word-level and sentence-level factors did not affect stuttering, immediately after onset.

83. Many Moving Parts: A Motor-Based Perspective on Developmental Speech and Language Research in Neurodevelopmental Disorders.

Maffei Marc F. Iverson Jana M. *Journal of Speech Language & Hearing Research* 2026;69(4): 1643-1651.
Check for full-text availability

More details

Research interest in the motor skills of children with neurodevelopmental disorders (NDDs) such as autism spectrum disorder and developmental language disorder is growing, for purposes including the prediction of language outcomes. Gross, fine, and oral motor skills are each associated with language development. However, research within these motor domains has largely proceeded along separate paths, with few studies examining how they codevelop and interact with language in children with NDDs. We propose that a unified developmental framework integrating these motor domains could enhance the prediction of language outcomes and the characterization of diverse clinical populations.

84. Morphemes matter: A small scale randomised control trial of vocabulary intervention focusing on affixes for adolescents with (developmental) language disorder.

Glisson Laura Tutty Rachel Heine Caroline Burke Caroline Hughes Lucy Dawson Nicola Ebbels Susan. *International Journal of Speechlanguage Pathology* 2026;28(4): 851-869.
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More details

PURPOSE: To investigate whether morphological intervention improves understanding of affixes in adolescents with a language disorder and whether progress generalises., METHOD: A total of 25 adolescents aged 13-15 years participated in this single-blind trial with random allocation. All participants had a language disorder; 18 with developmental language disorder, four with associated genetic conditions, and three with autism. A total of 11 participants received twice-weekly morphological intervention for 30 min with a speech-language pathologist for 8 weeks, while 14 received intervention as usual. Two tests were administered pre- and post-intervention: Affix definition and an adapted rehit task, which tested participants' ability to work out the meaning of novel words containing affixes. To investigate generalisation to untaught affixes, only half of the affixes were taught in intervention., RESULT: Those in the intervention group made significantly more progress than controls on both tasks, but only on taught affixes. Therefore, learning

generalised to understanding the meaning of taught affixes in combinations with new roots (adapted rehit task) but did not generalise to untaught affixes on either task., CONCLUSION: The intervention was effective and learning generalised to other words containing taught affixes. Intervention for affixes has potential to greatly increase understanding of vocabulary following relatively small amounts of intervention.

85. Morphological skills among native Arab kindergarteners with developmental language disorders

Ibrahim R. Taha H. *Clinical Linguistics and Phonetics* 2026;40(6): 503-516.
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More details

This study tested morphological skills among 14 native Arab kindergarteners with developmental language disorder (DLD) (age; 5.51 +/- 0.95, 10 boys and 4 girls) and fifteen kindergarteners with typical language development (TD) (age; 5.49 +/- 0.37, 7 boys and 8 girls). The participants completed two tasks designed to assess the identification and production of inflectional morphology skills in Arabic. In the identification task, the participants were asked to choose between two alternatives of pseudowords, the one that corresponds to a conventional inflection in the language, based on the instruction they hear. In the production task, the participants were asked to produce an appropriate pronunciation of the pseudowords according to the requested inflection, without selecting from given alternatives. Pseudowords were used in both tasks to evaluate the efficiency of applying inflectional knowledge. The results showed that the performances of TD children were significantly higher than those of children with DLD, in both tasks. Additionally, children with DLD performed significantly better on the identification task than on the production task. These findings are discussed in light of the assumption that the difficulties in morphological skills in the group of native Arab children with DLD may result from general difficulties in acquiring language regularities.Copyright © 2025 Taylor & Francis Group, LLC.

86. Multimodal Language Processing in Children With Developmental Language Disorder: The Influence of Verbal and Visuospatial Memory

Giberga A. Esteve-Gibert N. *Journal of speech, language, and hearing research : JSLHR* 2026; 1-14.
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PURPOSE: This study investigates how verbal and visuospatial memory capacities contribute to the processing and comprehension of pragmatic meanings that are expressed multimodally in children with and without developmental language disorder (DLD). METHOD(S): Seventy-seven children (33 with DLD, 44 typically developing [TD]), aged 5-10 years, completed standardized memory tasks and participated in a visual-world eye-tracking experiment assessing both online processing and offline comprehension of sentences with simple and complex pragmatic meanings (interrogativity and indirect requests, respectively). Sentences were presented under three conditions: baseline (no prosodic nor gestural cues to target meanings), prosodically enhanced (target meanings enhanced through prosodic cues), and multimodally enhanced (target meanings enhanced through prosodic and gestural cues). RESULT(S): In accordance with previous findings, children with DLD showed significantly lower verbal and visuospatial memory scores than their TD peers, with more pronounced difficulties in the verbal domain. Higher verbal memory was associated with more attention to the audiovisually presented speaker during online sentence processing in general, regardless of the experimental condition or children's group. Visuospatial memory predicted children's ability to benefit from prosodic and multimodal cues in offline comprehension in both groups, particularly when interpreting pragmatically complex meanings. CONCLUSION(S): These findings suggest that, in children both with and without DLD, verbal memory engages online attention during multimodal language processing in general, and visuospatial memory plays a bigger role in comprehending multimodal information that signals complex communicative intents.

87. Multimodal predictors of spoken vocabulary development in autism: the role of early childhood brain and behavior.

Surgent Olivia Naigles Letitia Dakopolos Andrew Sierakowski Val K. Andrews Derek S. Lee Joshua K. Heath Brianna Rogers Sally J. Amaral David G. Solomon Marjorie Nordahl Christine Wu. *Translational Psychiatry* 2026;16(1):
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More details

Many autistic children have spoken vocabulary delays that impact communication abilities during critical developmental periods. Behavioral and brain predictors of spoken language development in autism have been independently identified but rarely evaluated simultaneously. Here, we examined how fine motor skills, joint attention, and white matter microstructure of speech-related tracts are associated with spoken vocabulary development in autistic children with a broad range of speech abilities. Spoken vocabulary was assessed longitudinally in 122 autistic children (38% female) first between 2-4 years (Time 1) and again approximately two years later. Children were divided into groups based on their Time 1 spoken vocabularies: larger, average, or smaller. Fifty-eight autistic children (47% of the sample) were in the smaller vocabulary group, which represented both emergent speakers and non-speaking individuals. Within this smaller vocabulary group, faster rates of spoken vocabulary development were associated with better Time 1 fine motor and joint attention skills, and lower Time 1 fractional anisotropy (FA) in the occipital inferior longitudinal fasciculus, central arcuate fasciculus, and inferior corticospinal tract. Rates of spoken vocabulary development were best predicted by models that included both brain and behavior metrics, which each individually explained significant variance and together accounted for roughly half of the model variability. Results suggest that together early childhood fine motor skills, joint attention skills, and white matter microstructure contribute to a developmental cascade supporting spoken language. Findings demonstrate the potential clinical utility of early brain

scanning, indicating that microstructure is predictive of language development above and beyond salient behavioral predictors. Copyright © 2026. The Author(s).

88. Narrative performance and working memory performance in Saudi children with speech sound disorder

Aljadaan A.F. *Applied Neuropsychology: Child* 2026;
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The aim of this study was to compare the narrative skills and working memory performance of children with speech sound disorder (SSD) and their typically developing peers. The participant group of the study consisted of a total of 60 children (30 children with SSD - 30 typically developing peers). For this purpose, a comparative descriptive research model was used. The independent samples T-test was used to compare the groups in terms of scale scores. Pearson correlation analysis was used to determine the relationship between the Narrative Skills scores and the Working Memory (WM) scale scores of the participants. According to the analysis results, there is a statistically significant difference between the working memory scores and narrative performance scores of the two groups. In this study, verbal short-term memory, verbal working memory, visual short-term memory, and visual working memory scores did not differ according to gender among participants with short-term memory disorder ($p > 0.05$), however, there was a statistically significant difference in the total working memory score according to gender. The total WM score of the female group was higher than that of the male group. Narrative performance of participants with SSD did not differ according to gender.Copyright © 2026 Taylor & Francis Group, LLC.

89. Narrative production in English speaking children aged 5-7 years with typical language development and developmental language disorder: Development of a reference data set

Leitao S. Claessen M. Visentin D. Calder S.D. *International Journal of Speech-Language Pathology* 2026;28(4): 640-651.
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More details

Purpose: We explored the development of expressive narrative using Peter and the Cat. We aimed to support clinicians to capture information about functional language use by providing a reference data set to support goal setting and therapy planning. Method(s): We tested 129 typically developing English speaking children from ages 5-7 and 91 children with developmental language disorder at each age point. We assessed narrative macrostructure, microstructural elements, and linguistic features. Result(s): For both groups, the age-effect for macrostructure total score was statistically significant. For microstructure, the typically developing group showed a significant increase in their inclusion of all microstructure elements. The developmental language disorder group showed significant improvement on only adverbials of manner. Between group analysis showed typically developing children scored higher than the developmental language disorder group on the macrostructure total score and significantly different in adverbials of time, adjectives, and coordinating and subordinating conjunctions. Conclusion(s): Clinicians can use the tables to guide interpretation of Peter and the Cat data and planning goals with children, families, and teachers. For children with developmental langauge disorder, macrostructure should be targeted in intervention, along with microstructure and linguistic features. The provision of this reference data set to inform goal planning should support clinicians to implement programmes adapted to individual needs.Copyright © 2025 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group.

90. Narrative Tell and Retell in Mandarin--English Bilingual Children.

Sun Minsi Sheng Li Wang Danyang Su Pumpki L. *American Journal of Speech-Language Pathology* 2026;35(5): 2173-2189.
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More details

Purpose: Speech-language pathologists often adopt narrative tasks to assess bilingual children's language skills. However, limited research guides clinical decisions about elicitation method, assessment language, and interpretation of results for specific bilingual populations. The present study examined the impact of elicitation method (tell vs. retell) and language (Mandarin vs. English) on macro- and microstructure narrative skills in Mandarin--English bilingual children. Method: We collected narrative tell and retell samples from 79 Mandarin--English bilingual children using the Multilingual Assessment Instrument for Narratives both online and in-person and analyzed macro- and microstructure measures in each language. Results: For macrostructure, children produced better narrative retells than tells across story structure, story complexity, and number of internal state terms, with cross-linguistic differences only in story structure (Mandarin > English). Codeswitching did not significantly impact macrostructure scores. For microstructure, a retell advantage was found across all measures (story length, lexical diversity, sentence length, and syntactic complexity) in English but only in story length and lexical diversity in Mandarin. Post hoc analyses revealed that the differential effect of elicitation method on morphosyntactic outcomes between languages is likely due to linguistic differences. Conclusions: This study highlighted distinct narrative patterns in Mandarin--English bilingual children across languages and elicitation methods. Macrostructure showed greater improvement when given a narrative model than microstructure and was stable across languages, although cultural factors may affect performance. Microstructure was language-specific, with Mandarin morphosyntactic skills being the least malleable. These results guide clinicians in choosing elicitation tasks and interpreting narrative performance in Mandarin--English bilingual children.

91. Navigating Mixed-Neurotype Dialogue: Environmental and Affective Influences on Autistic Speakers.

Miller Zachary A. Conner Caitlin M. Chang Judy C. Mazefsky Carla A. *Autism: The International Journal of Research & Practice* 2026;30(9): 2415-2426.
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More details

In this reflective report study, we examined communication challenges for autistic adults by examining the influences of emotional state and environmental context across neurotype conversation partners. Using the Neurotype Communication and Assistive Technology Survey (NCATS), we surveyed 165 autistic adults (18–35 years old) and analyzed 154 responses to capture both quantitative ratings and qualitative descriptions of past contextual conversations. The majority of the participants noted that environmental factors, such as crowdedness, noise levels, and familiarity, at least somewhat impacted their communication. Autistic adults reported that noisy or unpredictable settings were associated with word loss, scripting, and social withdrawal, while quiet and familiar spaces facilitated openness and authentic self-expression. In addition, participants stated that conversations with allistic (non-autistic) partners required more conscious effort, social masking, and cognitive load than conversations with autistic partners, consistent with the Double Empathy Problem. Finally, survey responses revealed that negative emotions such as stress, frustration, and anxiety may worsen communication difficulties regardless of the conversation partner's neurotype, whereas positive emotions such as happiness and calmness were found to improve fluency, confidence, and intersubjectivity. These results indicate that partner neurotype, emotional states, and other environmental factors can affect communication challenges for autistic adults. In this study, autistic adults reflected on their conversational experiences and described what helped communication go well and what made it more difficult. We asked 165 autistic adults (18–35 years old) to complete a survey about how they communicate in different situations based on people and places and received 154 responses. We focused on how communication changed whether the other person is autistic or allistic (non-autistic). Within that, we focused on two main factors: the type of environment they were in (e.g., home, work, school) and how their emotions (feeling happy, sad, angry) affected their communication. The majority of autistic adults said that the place they were in at least somewhat affected their communication. Autistic adults said that loud or unpredictable places often made communication harder, leading to things like losing words, repeating scripts, or pulling back from the conversation. Quiet and familiar spaces, on the contrary, made it easier to share thoughts openly. Talking with allistic people usually took more effort and sometimes led to masking, or hiding one's natural way of communicating. This fits with the Double Empathy Problem, which says that communication struggles often come from mismatched understandings between autistic and allistic people. Emotions were also important. Stress, anxiety, or frustration made conversations harder, while happiness and calmness made conversing easier and improved confidence. Overall, our findings suggest that reducing sensory stress, supporting emotional well-being, and encouraging mutual understanding can make conversations better for both autistic and allistic people.

92. Network Models for Assessing the Co-occurrence Between Stuttering and ADHD.

Kazazi Fjorda Howell Peter. *International Journal of Language & Communication Disorders* 2026;61(5): e70320.
Check for full-text availability

More details

BACKGROUND AND AIMS: Previous studies have indicated that people who stutter (PWS) and people with ADHD (PWADHD) show similar cognitive profiles, implying a link between the two neurodevelopmental profiles. This study examined the relationship between stuttering and ADHD and investigated the extent of this similarity using Network Models (NMs)., METHODS AND PROCEDURES: Neurotypical participants (people who did not stutter and did not have ADHD; N = 67), PWADHD (N = 79) and PWS (N = 33) were assessed for stuttering, ADHD traits, and phonological working memory (PWM). Lower PWM is associated with many conditions including stuttering and ADHD., OUTCOMES AND RESULTS: NM analysis revealed differences in cognitive networks (fluency, attention and PWM) between participant groups. The findings suggest partially different cognitive architectures across participant groups indicating that stuttering and ADHD do not share a common underlying mechanism. There were marked differences between participant groups in the way that traits of attention, stuttering, and PWM linked with each other which emphasises partially unique cognitive architecture of these participant groups. Higher PWM scores were associated with better attention in the neurotypical group and PWADHD but not PWS. Higher stuttering characteristics affected PWM in PWADHD and PWS, but the link was stronger in PWS. Whilst higher stuttering characteristics correlated positively with lower attention in PWADHD, the opposite was the case for PWS. PWM was the most important factor in all groups but the way it affected other cognitive processes differed between neurotypical participants, PWS and PWADHD., CONCLUSIONS AND IMPLICATIONS: Overall NM structures were similar between the neurotypical group and PWADHD but they both differed from those of PWS. Findings argue against a shared underlying mechanism of attention, fluency and PWM in stuttering and ADHD and highlight the importance of including PWM assessments within a network-based framework., WHAT THIS PAPER ADDS: What is already known on this subject Existing research indicates that people who stutter (PWS) and people with ADHD (PWADHD) exhibit overlapping traits in attention, speech fluency, and phonological working memory (PWM). Past studies have reported lower performance in attention, speech fluency and PWM in PWADHD and PWS as compared to neurotypical participants. This trait overlap has often been interpreted as co-occurrence between the two profiles (stuttering and ADHD). However, existing literature has primarily relied on trait co-occurrence and group-level performance differences, without examining whether attention, fluency, and PWM interact in similar ways across the two profiles. As a result, it remains unclear whether these shared traits reflect common underlying mechanisms or distinct cognitive profiles that show similar behavioural outcomes. What this study adds to existing knowledge The present study showed that although attention, fluency, and PWM differ between neurotypical participants versus PWS, and PWADHD, the way these abilities are interconnected differs between groups. Network analyses revealed partially distinct patterns of association, with the PWADHD network more closely resembling that of the neurotypical participants than that of PWS. Whilst PWM was a central component across all groups, its role within the network varied.

In neurotypical participants and PWADHD, PWM was closely linked to attention, but this link was lost in PWS. These findings indicate that similar trait profiles do not necessarily imply the same cognitive architecture, and that overlapping traits in stuttering and ADHD can arise from different patterns of interaction among attention, fluency and PWM rather than from a shared underlying mechanism. What are the actual clinical implications of this study? Our findings suggest that overlapping traits in attention, speech and PWM should not automatically be interpreted as evidence of a shared underlying profile in stuttering and ADHD. Instead, clinical evaluation should consider how cognitive processes interact within each profile. The results also highlight the value of including PWM assessment when examining attentional and fluency traits in both PWS and PWADHD, particularly using tools such as the UNWR. More broadly, network-based approaches offer a promising framework for distinguishing between surface-level trait overlap and fundamental differences in cognitive organisation, thereby supporting more precise, profile-specific intervention strategies. Copyright © The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

93. Neuropsychological and Emotional-Behavioral Profiles in Pediatric Duchenne Muscular Dystrophy: A Single-Center Clinical Study

D'Alessandro R. Re F. Vacchetti M. Sertori F. Arletti L. Campagna A. Gadaleta G. Mongini T.E. Ricci F.S. *Children* 2026;13(8): 992.
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More details

Background: Duchenne muscular dystrophy (DMD) is an X-linked disorder caused by out-of-frame variants in the DMD gene, resulting in dystrophin deficiency and progressive muscle degeneration. Beyond motor involvement, evidence links DMD to cognitive impairment and an emotional-behavioral (EB) burden, potentially related to the altered expression of brain dystrophin isoforms (Dp71, Dp140, Dp427). Objective(s): To screen for major neurodevelopmental, cognitive and/or EB difficulties in a monocentric cohort of children with DMD. Method(s): This cross-sectional study included 21 children with DMD. Neuropsychiatric difficulties were assessed using a multimodal psychometric battery. Cognitive, neurodevelopmental and genetic data were retrospectively collected and analyzed. Result(s): In the cohort, attention-deficit/hyperactivity disorder (ADHD)-related findings were predominantly inattentive, with 3/20 children (15.0%) scoring within the clinical range on at least one inattention subscale. For measures assessing autism spectrum disorder (ASD)-related features, scores above the normative cutoff emerged in 7/20 children (35.0%), while only 2/20 (10.0%) scored within the clinical range. Internalizing problems represented the predominant EB difficulties, and emotional dysregulation (ED) emerged as a plausible area of vulnerability in the cohort. Among the 11 of 21 children with available Full-Scale Intelligence Quotient (FSIQ) data, five (45.5%) had an FSIQ below 85. Of these, four of five (80.0%) presented the predicted Dp140-/Dp71+ brain dystrophin isoform expression pattern, whereas one of five (20.0%) presented the Dp140+/Dp71+ pattern. Conclusion(s): Children with DMD showed heterogeneous neuropsychiatric and cognitive features in the employed screening battery. These preliminary findings, if confirmed in larger cohorts, support the potential of a broader neuropsychiatric screening assessment to optimize care pathways. Copyright © 2026 by the authors.

94. Not So Simple, and Not So Fast: The Limits of Speech Rate and Turn-Taking Modifications for Treatment of Early Stuttering. A Response to Onslow et al. (2026)...Onslow M, Hearne A, Yu K et al. How Simple Can a Treatment for Early Stuttering Be? A Proposed Two-Factor Early Intervention. American Journal of Speech-Language Pathology. 2026;35(2):422-430.(9p).

Bernstein Ratner Nan. *American Journal of Speech-Language Pathology* 2026;35(5): 2493-2495.
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More details

Purpose: We argue against suggestions for a new "two-factor" approach to early stuttering that counsels rate and turn-taking adjustments to child-directed parental speech. Conclusion: We find that (a) the suggested approach is not new; (b) the limited pilot data are directly contradicted by a much larger scale, longer duration study published in this journal this year that shows no relationships between rate and turn-taking and recovery from stuttering; (c) rate and turn-taking adjustments may bring with them additional negative changes in parental speech; and (d) the proposed treatment continues to emphasize the role of parents in determining recovery from stuttering, a belief with insufficient evidence and which carries potential harm.

95. Novel Proactive Speech-Language Intervention Is More Effective Than Usual Care: Randomized Controlled Trial of Babble Boot Camp for Infants With Classic Galactosemia

Potter N. Choi M. Schrock C. Heinlen V. Bruce L. Davis J. Scherer N. Eng L. Finestack L. Stoel-Gammon C. VanDam M. Raaz C. Armstrong-Heimsoth A. Kim Y. Peter B. *Journal of speech, language, and hearing research : JSLHR* 2026;69(9): 4405-4426.
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More details

PURPOSE: Speech and language disorders cannot be diagnosed and treated until children are approximately 2-4 years old. To investigate whether these disorders can be prevented, we developed and trialed Babble Boot Camp (BBC), the first proactive sustained intervention starting with precursor skills including cooing and babbling. METHOD(S): Participants were two randomly assigned groups of 22 infants with classic galactosemia, a metabolic disease with known risks for severe speech and language disorders. One group started BBC at under 6 months of age, and the other started at 15 months of age, both completing BBC at 24 months of age. Coached by a speech-language pathologist in weekly telehealth sessions, caregivers implemented BBC activities and routines daily at home. A

typical control group and a group of children with classic galactosemia who received usual care participated as well. All children completed standardized assessments of speech and language at postintervention. RESULT(S): Assessment scores showed that BBC was more effective than usual care for both intervention groups. Greatest benefits were seen in the group that started at or before 6 months of age, with a proportion of clinically concerning scores equal to that in the typically developing peers. No effects of sex, genotype, or milk consumption were evident in the outcomes. CONCLUSION(S): Findings motivate a paradigm shift from deficit-based to proactive approaches for infants with classic galactosemia. BBC is extensible to many other disorders, with trials currently underway for infants with Down syndrome and infants born preterm.

96. Oral language acquisition difficulties in patients with early-onset schizophrenia or bipolar disorder.

Khoury Elie Lauferon Clemence Cohen Alicia Delorme Richard Hamadouche Driss Ellul Pierre. *Encephale* 2026;52(5): 498-502.
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More details

Schizophrenia and bipolar disorder are psychiatric conditions increasingly recognized as involving an underlying neurodevelopmental dimension, particularly in early-onset forms. Among neurodevelopmental disorders, language disorders occupy a central place; yet, their specific association with schizophrenia and bipolar disorder remains insufficiently explored. This retrospective case-control study compared the prevalence of oral language acquisition difficulties among 92 hospitalized patients diagnosed with early-onset schizophrenia (n=52) or early-onset bipolar disorder (n=40). Clinical and developmental information was extracted from medical records, with particular attention to diagnoses of oral language disorder (characterized using standardized speech-language assessments) and Wechsler Verbal Comprehension Index scores. A non-significant trend towards a higher prevalence of oral language disorder was found in the early-onset schizophrenia group (38.5%) compared with early-onset bipolar disorder (22.5%). However, when only diagnoses established before the onset of psychiatric symptoms were considered, the difference became significant (32.7% vs. 10.0%; P=0.02), suggesting that language disorders may be more severe in early-onset schizophrenia and therefore more readily identifiable earlier in development. The early-onset schizophrenia group also exhibited significantly lower Verbal Comprehension Index scores and more childhood school difficulties. These findings support the hypothesis of a greater neurodevelopmental burden in early-onset schizophrenia, particularly regarding language development, and underscore the importance of early detection of oral language disorders to improve support and functional outcomes. Copyright © 2026 L'Encephale, Paris. Published by Elsevier Masson SAS. All rights reserved.

97. Parent perspectives on services available to autistic children in Canada: A mixed methods survey study

Caven I. Hamdani Y. Lunsky Y. Weaver C. Penner M. *PLOS One* 2026;21(8): e0353678.
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More details

Objectives: Given the differing opinions among interest holders on services that are commonly accessed by autistic children, exploration of parent perspectives is needed to contribute to this knowledge base. Our objective was to explore perspectives of parents of autistic children on select services accessed by autistic children in Canada. Method(s): Using a mixed methods survey, the perspectives of parents of autistic children living in Canada on occupational therapy (OT), speech-language pathology (SLP) services, and applied behaviour analysis (ABA) based therapies were sought. The Theoretical Framework of Acceptability (TFA) and its constructs were used to develop the survey and served as a framework for qualitative content analysis. Result(s): Eighty-seven parents completed the survey. Acceptability scores were higher for OT and SLP compared to ABA ($F(2, 239) = 43.42$, $p<0.01$). Related to the TFA construct of Ethicality, parent respondents shared concerns about potential harms of negative therapy experiences, emphasized the value of neurodiversity-affirming services and held mixed views on behavioural approaches. Under the construct of Perceived Effectiveness, acceptability was contingent on parents attributing improvements to the therapy and therapist fit. For the construct of Self-Efficacy, respondents reported the importance of therapist engagement with parents. Conclusion(s): Across OT, SLP, and ABA, Ethicality, Perceived Effectiveness, and Self-Efficacy informed the perceived acceptability of autism services. This work highlights that many parents are concerned with promoting a positive autistic identity for their children, including through therapies. Future work should seek to develop shared definitions and goals for therapy between clinicians, parents/care partners, and autistic people. Copyright © 2026, Caven et al. This is an open access article distributed under the terms of the Creative Commons Attribution License https://creativecommons.org/licenses/by/4.0/, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

98. Parent-Mediated Home-Based Behavioural Intervention for a Preschool Child with Autism Spectrum Disorder: A Single-Case Intervention Study

Moganti S. Purty S. *Natural Resources for Human Health* 2026;6(6S): 1374-1391.

More details

Background: Parent-mediated behavioural interventions have become an evidence-based and cost-effective intervention for developmental outcomes in children with Autism Spectrum Disorder (ASD). Studies on individualised home-based parent training (IHP) programs in the Indian setting, however, have been scarce, especially for preschool children with mild intellectual disability. Allowing parents to be primary interventionists can increase the intensity and sustainability of early intervention and improve child outcomes in natural home environments. Objective(s): This case study aimed to assess the effectiveness of a 16-week parent-mediated behavioural

intervention for improving developmental functioning, adaptive behaviour, severity of autism symptoms, sitting tolerance, imitation skills and following simple one-step instructions in a preschool child with a diagnosis of mild intellectual disability and mild ASD. Method(s): A single case pre & post test design with baseline behavioural recordings was used. One mother was given weekly 45 minute sessions with a clinician who worked on behaviour management strategies, such as environmental restructuring, functional behaviour analysis, modelling, prompting and systematic use of primary and differential reinforcement. Progress in behaviour was monitored on a daily basis at home using daily monitoring sheets. Developmental outcomes were measured by Developmental Screening Test (DST), adaptive functioning was measured by Vineland Social Maturity Scale (VSMS) and autism severity was measured by Indian Scale for Assessment of Autism (ISAA). Baseline and 4-weekly behavioural targets were assessed, and standardised reassessed at 16-weeks. Result(s): In all targeted behaviours, there was improvement over time. These included improved sitting tolerance from some 10sec to 4-5 min; was able to imitate simple motor tasks and, with minimal cues, was able to listen to verbal instructions and act on them. The intervention resulted in improvement of the Developmental Quotient (DST: 51 to 60), Social Quotient (VSMS: 54 to 58), and reduction in the autism severity (ISAA: 102 to 88) as demonstrated by the standardized assessments. Conclusion(s): There is a positive effect of structured parent-mediated behavioural intervention, which can lead to meaningful observable changes in developmental functioning, adaptive behaviour, and autism symptom severity in young children diagnosed with ASD when delivered regularly in a home setting, as suggested in this case study. The model of evidence-informed early intervention services via the parent as primary interventionist is feasible, low cost, and culturally relevant and could expand access to these services in resource-limited contexts. Copyright © 2026, Visagaa Publishing House. All rights reserved.

99. Parent-reported benefits, barriers, and experiences of augmentative and alternative communication use among children with autism in Nablus, Palestine: a cross-sectional study

Jarrar H. Malhis L. Munawer A. Omareya M. Deek N. Abutair R. Dodeen S. Khadeje S.M. Abu-Shamat Z. *BMC Pediatrics* 2026;26(1): 793.
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Background: Children with autism may have communication needs that require individualized support. Augmentative and Alternative Communication (AAC) can support functional communication, but little is known about parent-reported AAC implementation in Palestine. This study examined parent-reported perceived benefits, barriers, and experiences of AAC use among children with autism in Nablus, Palestine. Method(s): A descriptive cross-sectional study was conducted among 75 parents or primary caregivers of children with autism who were using or receiving structured AAC training. Participants were recruited from specialized autism centers in Nablus. Data were collected using a structured questionnaire covering child and family characteristics, perceived AAC benefits and barriers, and experiences during AAC implementation. The perceived benefit score was calculated from six yes/no items. The final AAC experience score was calculated from seven positively worded items after two negatively worded acceptance-difficulty items were analyzed separately. Descriptive statistics, Mann-Whitney U tests, Kruskal-Wallis tests, and Spearman's correlations were used. Result(s): The perceived AAC benefit score had a median of 6 (IQR 4-6) out of 6. The most frequently endorsed perceived benefit was increased communication opportunities (73/75, 97.3%), followed by perceived better behavior-related interaction inside the home (65/75, 86.7%) and improved understanding of the child's needs (64/74, 86.5%). Reported barriers included difficulty integrating AAC into daily routines (53/75, 70.7%) and difficulty accessing AAC programs (51/75, 68.0%). Awareness of alternative AAC systems was limited (25/75, 33.3%), and 23/74 parents/caregivers (31.1%) agreed that AAC systems are suitable for all children. The seven-item AAC experience score showed good internal consistency (Cronbach's alpha = 0.841) and had a median of 16.0 (IQR 12.75-19.0) out of 21. A positive correlation was observed between perceived benefit score and AAC experience score ($r_s = 0.426$, $p < 0.001$). Conclusion(s): Parents/caregivers commonly reported AAC-related perceived benefits, but barriers to access and daily integration were frequent and awareness of alternative systems was limited. Findings should be interpreted cautiously because of the cross-sectional parent-report design, but they support structured parent education, individualized AAC selection, and continued professional follow-up.Copyright © The Author(s) 2026.

100. Parental contributing factors in school placement decisions for children with autism spectrum disorder in South Kerala.

R Varsha S Mohan Lakshmi. *International Journal of Developmental Disabilities* 2026;72(6): 1411-1424.
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Purpose: Although early identification and intervention for children with autism spectrum disorder (ASD) have advanced considerably, their transition to school and subsequent educational success remain uncertain. This exploratory study aimed to identify the challenges faced by parents in the schooling of children with autism spectrum disorder aged 6–10 years for promoting positive educational outcomes. Method: The study was conducted in three phases. During Phases 1 and 2, a 13-item questionnaire was developed and content-validated by speech-language pathologists and special educators. In Phase 3, the validated questionnaire was administered through semi-structured interviews to 40 parents of children with ASD aged 6–10 years. Quantitative responses recorded on a 5-point rating scale were analyzed using descriptive statistics, while one open-ended question was included for qualitative analysis. Results: Despite high awareness across other parent-centered factors, participants demonstrated limited knowledge regarding the Individualized Education Plan (IEP) and specialized teaching strategies for children with ASD. Conclusion: Though having adequate recognition toward key parent-related factors, such as family support, education of the parents, timely intervention, and educational training at home, supports their child's schooling, their understanding toward critical areas, such as knowledge regarding IEPs and school-based services, was inadequate. Thus, these findings underscore the need for autism rehabilitation to move beyond its

traditional emphasis on early identification and intensive intervention toward strengthening supportive school environments, educational practices, and policy frameworks that facilitate inclusive education.

101. Parental Perspectives and Experiences of Working With Speech and Language Therapists to Support Home Practice for Their Child With a Speech Sound Disorder: A Qualitative Study.

Pritchard Katherine Stojanovik Vesna Titterington Jill Pagnamenta Emma. *International Journal of Language & Communication Disorders* 2026;61(4): e70280.
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BACKGROUND: Speech sound disorder (SSD) is broadly defined as difficulty producing speech sounds in childhood. It can have a lasting impact on academic outcomes and well-being, making effective early intervention vital. Speech and language therapists (SLTs) consider parental involvement-particularly supporting their child with home practice-as essential to a child's progress. Relationships between SLTs and parents are known to facilitate this engagement. However, there is a significant gap in the literature regarding parents' perspectives, and little is known about what parents perceive to be most effective in supporting home practice. Understanding these perspectives is crucial for designing interventions that are both feasible and meaningful for families., AIM: To explore the perspectives of parents of children with SSD aged <=5;11, about their experiences with speech and language therapy intervention sessions and home practice., METHODS AND PROCEDURES: This study used qualitative methodology. Nine parents, recruited via social media, professional networks and a university clinic, participated in focus groups or 1:1 interviews. A group of children, aged 4-6, who had lived experience of SSD, speech and language therapy and home practice were consulted to design the topic guide and inform data analysis. Discussions were recorded, transcribed verbatim and analysed using Reflexive Thematic Analysis., OUTCOMES AND RESULTS: Four main themes were constructed as follows: (1) Building positive therapeutic relationships is fundamental to families' experiences and creates the foundation for successful home practice. (2) SLTs need to employ a wide range of skills and knowledge, including a multi-modal approach to empower parents and develop their capability. (3) Clear communication is key for shared power, understanding of roles, active involvement and effective home practice. (4) Factors outside an individual's control can impact parents' attitudes towards, and engagement with, home practice., CONCLUSIONS AND IMPLICATIONS: We conclude that relationships between SLTs and parents, and the skills required to build these, underpin parental motivation to engage in home practice. To maximise parental capability, SLTs ensure that parents understand not only what to do but why they are doing it, utilising a variety of methods. Whilst some barriers for home practice are out of the SLT's control, using all opportunities to develop the motivation and capability of the parents is required. To achieve this, service delivery models may need to be reconsidered., WHAT THIS PAPER ADDS: What is already known on this subject SSD that persists into school years can have lasting implications for a child's academic outcomes and well-being. Effective and efficient early intervention is essential. SLTs and parents agree that working together, including parental delivery of home practice, is important for a child's progress. Little is known about how parents experience and perceive what SLTs do within intervention sessions to ensure parents feel confident and capable of delivering effective home practice. What this paper adds to existing knowledge This is the first study to explore parents' perceptions and experiences of what SLTs do within direct intervention sessions for young children with SSD and how this supports parents to become implementors of intervention for their child at home. Findings suggest that parents benefit from SLTs using a range of teaching and coaching approaches, including clear instructions and active involvement, to ensure parents feel confident and capable at home. Relationships between the parent, SLT and the child are highly valued by parents, and are fundamental for parental engagement with home practice. What are the potential or actual clinical implications of this work? SLTs prioritising building effective relationships with parents and children can support parental motivation for home practice. SLTs can work with parents to increase opportunities for home practice by building it into their daily lives, including working with other family members. To maximise parental capability, it is important to ensure that parents understand not only what to do but why they are doing it, utilising a variety of methods. To achieve this, service delivery models may need to be reconsidered.
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102. Personal Narrative Assessment to Guide Clinical Practices in the Assessment and Support of Children With Developmental Language Disorder: A Tutorial

Jensen de Lopez K. Gabaj M. Gupta V. Sondergaard Knudsen H.B. Kuvac Kraljevic J. *Language, speech, and hearing services in schools* 2026; 1-18.
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PURPOSE: This tutorial demonstrates how personal narratives elicited using the Global TALES (Talking About Lived Experiences in Stories) protocol can be analyzed using the four components of the Linguistic Underpinnings of Narrative in Aphasia (LUNA) framework for discourse analysis-pragmatics, macrostructure planning, propositional, and linguistic-in clinical practice to assess the language and communication skills of children with developmental language disorder (DLD). Such analysis can support diagnostic decision making or identification and monitoring of intervention goals related to the child's needs. Language measures that can be applied and interpreted in clinical practice are presented and linked to each of the four components of the LUNA framework. By understanding which measures correspond to these components, clinicians can identify the child's strengths and challenges across the four components to obtain a more complete view of the child's oral narrative production skills. An analysis of a personal narrative from a 7-year-old Danish-speaking child with DLD, elicited using the Global TALES protocol, was used to demonstrate in detail how to analyze personal narratives and interpret the results in a clinical setting using the LUNA framework. The case study also includes recommendations for supporting and

monitoring the child's progress. CONCLUSION(S): This tutorial guides clinicians to integrate personal narratives as part of their assessment and treatment for children with DLD. The measures presented and discussed in the tutorial can help clinicians pinpoint interrelated discourse components and processes that need to be assessed and integrated into future support for a child's language development and overall well-being.

103. Phenotypic and Genetic Insights Into CNOT3-Related Intellectual Developmental Disorder of Speech Delay, Autism, and Dysmorphic Faces (IDDSADF) From the First Two Japanese Cases

Ariyasu D. Kosaki R. Cho H. Nakashima M. Tsuchihashi T. Kosaki K. Yamazawa K. *American Journal of Medical Genetics, Part A* 2026;200(10): 2363-2369.
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Intellectual Developmental Disorder with Speech Delay, Autism, and Dysmorphic Faces (IDDSADF) is a rare neurodevelopmental disorder caused by heterozygous variants in CNOT3. Although several cohorts have been documented worldwide, no Japanese patients have been reported to date. Here, we present the first two Japanese cases of IDDSADF, an 8-year-old girl and a 19-year-old boy, both presenting with developmental delay, characteristic facial features, and short stature. Both individuals exhibited a thin, tented upper lip, a morphology that has been rarely reported in other cohorts and may represent an ethnicity-associated trait. Growth impairment was observed either from early childhood or emerging after puberty and may represent an underrecognized aspect of the phenotype. Trio-exome sequencing identified pathogenic CNOT3 variants in both patients, including a recurrent frameshift (c.732dup, p.Ser245fs) and a novel splice-site substitution (c.837+1G>A). Our findings expand the phenotypic and mutational spectrum of IDDSADF, highlighting the importance of longitudinal auxological assessment and recognition of potential ethnicity-associated facial traits in its clinical diagnosis and management.Copyright © 2026 Wiley Periodicals LLC.

104. Phonological Awareness and Nonword Repetition in Children With and Without Speech Sound Disorders: A Comparative Analysis.

Icoz Özlem Özcebe Esra. *International Journal of Language & Communication Disorders (John Wiley & Sons, Inc.)* 2026;61(5): 1-9.
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Objective: This study aimed to compare phonological awareness and verbal working memory skills, as measured by a nonword repetition task, in children with speech sound disorders (SSD) and typically developing peers. It also examined the relationship between these two cognitive-linguistic abilities within each group. Methods: The study included 30 children aged 4 to 6 years diagnosed with SSD and 30 age-matched typically developing children. Participants were recruited from a clinical population and their typically developing siblings or relatives. Participants completed phonological awareness test and nonword repetition task. Group comparisons and correlation analyses were conducted to assess performance differences and interrelations between skills. Results: Children with SSD demonstrated significantly lower performance in both phonological awareness tasks and nonword repetition compared to the control group. Within-group correlation analyses revealed a significant relationship between verbal working memory and word awareness in the SSD group, whereas in the control group, verbal working memory was significantly correlated with rhyme awareness. Conclusion: The findings suggest that children with SSD experience not only speech production difficulties but also weaknesses in phonological awareness and verbal working memory. The nature of the associations between these abilities appears to differ between children with and without SSD, highlighting the need for comprehensive, multidimensional assessment and intervention approaches that target both speech and underlying cognitive-linguistic processes. WHAT THIS PAPER ADDS: What is already known on this subjectChildren with speech sound disorders (SSD) frequently demonstrate difficulties in phonological awareness and nonword repetition, both of which are associated with later language and literacy outcomes. Although these relationships have been widely investigated, many studies have included children with co-occurring language impairments or have focused on English-speaking populations. Consequently, the relationship between phonological awareness and verbal working memory in preschool children with isolated SSD remains insufficiently understood.What this study adds to existing knowledgeThis study compares phonological awareness and nonword repetition performance in Turkish-speaking preschool children with and without SSD. Children with SSD demonstrated significantly poorer performance on both measures than typically developing peers, despite age-appropriate language abilities. The associations between phonological awareness and nonword repetition also differed between groups, providing further evidence that the relationship between phonological processing and verbal working memory may vary according to speech disorder status. The findings also contribute valuable cross-linguistic evidence from a language with relatively transparent phonology.What are the actual clinical implications of this study?The findings support the inclusion of phonological awareness and nonword repetition tasks alongside speech production measures in the assessment of children with SSD. A comprehensive evaluation of phonological processing and verbal working memory may facilitate earlier identification of underlying difficulties and contribute to more individualized intervention planning. Considering these cognitive-linguistic skills together with speech production may improve clinical decision-making and intervention outcomes.

105. Phonological Processing Skills in Arabic-Speaking Children Who Stutter.

Afsah Omayma Alawadli Hazem. *International Journal of Language & Communication Disorders* 2026;61(4): e70294.
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BACKGROUND: Several experiments have investigated phonological encoding in children who stutter (CWS) using different phonological processing skills and yielded equivocal results. Studies examining phonological processing skills in Arabic-speaking CWS are scarce and focused on discrete tasks. The current study's aim was to (1) compare the performance of Egyptian Arabic-speaking CWS on a variety of phonological processing tasks to that of children who do not stutter (CWNS) in order to get a broad picture of children's phonological encoding skills and (2) examine the association of phonological processing deficits, if any, with stuttering severity., METHODS: This case-control study was executed on 92 monolingual Arabic-speaking Egyptian children between the ages of 4 years 6 months to 6 years 5 months, including 50 typically-developing children and 42 children diagnosed with stuttering. Phonological processing was evaluated in both groups using a battery of tests that included assessments of phonological awareness, memory, and retrieval., RESULTS AND CONCLUSION: Results revealed that Arabic-speaking CWS demonstrated significantly lower performance on all phonological processing skills than normally fluent children. However, such performance was not related to stuttering severity. Sex differences were detected where females demonstrated better performance than males. Phonological encoding deficits might be implicated in stuttering development. Evaluation of phonological processing skills should be integrated in the overall assessment of CWS., WHAT THIS PAPER ADDS: What is already known on this subject Several experiments in different languages (e.g., English, Persian, Arabic, and Kannada) have explored phonological processing in children who stutter (CWS) over individual tasks or a combination of tasks as a means for investigating phonological encoding and yielded equivocal results. What this study adds to existing knowledge Arabic-speaking CWS demonstrated significantly lower performance on all phonological processing skills than normally fluent children. No relation was found between performance in phonological processing and stuttering severity in CWS. Females who stutter show better performance in phonological processing than males. Phonological encoding deficits might be implicated in stuttering development. What are the clinical implications of this study? Evaluation of phonological processing skills should be included in the overall assessment of CWS. Copyright © 2026 Royal College of Speech and Language Therapists.

106. Play-Based Naturalistic Augmentative and Alternative Communication (AAC) Intervention: Educator Fidelity and Effects on Communication and Peer Interactions

Biggs E. Turner E. Lee S. *Behavioral Sciences* 2026;16(8): 1275.
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This study utilized an experimental single-case design to evaluate a professional development package to support educators' implementation of an augmentative and alternative communication (AAC)-supported, play-based naturalistic developmental behavioral intervention (NDBI), which we called naturalistic AAC intervention (N-AAC). Participants were three minimally speaking students with autism (4-8 years of age), each paired with one of their educators (i.e., speech-language pathologist, pre-service special education teacher, early childhood assistant teacher). The primary aim was to examine the effects of professional development on educator implementation of N-AAC. We also descriptively examined changes in students' communication and language use during educator-child play and generalization to peer interactions. The findings showed that professional development was effective at teaching educators to implement N-AAC with fidelity. Student communication outcomes showed descriptive improvements following educator training and coaching and N-AAC implementation. However, as expected, gains did not generalize to peer interactions. The findings suggest that professional development improves educator implementation of AAC-supported NDBI strategies during play and that their increased implementation fidelity is accompanied by promising descriptive changes in student communication. Future research is needed to further examine the impact on student communication, promote generalization to peer interactions, and evaluate the potential for larger-scale implementation. Copyright © 2026 by the authors.

107. Practices and perspectives of speech-language pathologists in the assessment of multilingual children: A survey of clinicians working in the Republic of Ireland.

Lally Saoirse Lyons Rena Antonijevic-Elliott Stanislava. *International Journal of Speechlanguage Pathology* 2026;28(5): 953-971.
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PURPOSE: Increased migration has created challenges for speech-language pathology clinicians in assessing multilingual children in countries such as the Republic of Ireland, where most clinicians practice through the dominant societal language, English. This study aims to understand their practices and perspectives regarding assessment of multilingual children., METHOD: In total,131 clinicianss participated in an anonymised online survey that explored clinicians language assessment practices and perspectives of multilingual children through multiple-choice and rating questions. Three open-ended questions were analysed using qualitative content analysis., RESULT: A total of 127 clinicians (96.9%) reported using monolingual standardised assessment with multilingual children, while 120 clinicians (91.6%) indicated available multilingual assessment tools were not adequate. Clinicians reported using standardised assessments when multilingual assessments were inaccessible, children had adequate exposure to English, or to access services. Clinicians reported reduced knowledge of typical versus atypical multilingual language development and limited training as challenges to assessment., CONCLUSION: Challenges in language assessment of multilingual children creates a distinctive mismatch between best practice guidelines and clinical practice. Comparable assessment tools and information related to typical versus atypical error patterns for specific language pairings, which can be accessed by clinicians for qualitative analysis of language samples, could bridge this gap.

108. Predicting early intervention outcomes in autism via individual participant data mega-analysis

Mandelli V. Busuoli E.M. Godel M. Kojovic N. Sinai-Gavrilov Y. Gev T. Contaldo A. Courchesne E. Pierce K. Golan O. Narzisi A. Muratori F. Colombi C. Rogers S.J. Vivanti G. Schaer M. Ruta L. Lombardo M.V. *Molecular Autism* 2026;17(1): 33.

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Background: Autism early intervention meta-analyses have yielded important insights into questions such as 'what works' and 'for what' outcomes. However, because these studies primarily rely on study-level summary statistics, they may be limited with regard to more individualized insights. Mega-analyses utilizing individual participant data (IPD-MA) may be useful for these more individualized questions. Method(s): We conducted an IPD-MA on the Autism Early Intervention Research (AEIR) consortium dataset, comprising n = 582 autistic children (n = 121 female) across 11 datasets collected in clinical and community settings in the USA, Switzerland, Italy, Israel, and Australia. Children received between 3 and 27 months of early intervention (age at start 13-60 months) of varying intensity. Of these datasets, one originates from a randomized controlled trial (RCT). Another 7 datasets are paired up into 5 separate controlled-group design studies, while the remaining 3 datasets come from uncontrolled pre-post design studies. Early Start Denver Model (ESDM; n = 281, 62 female) was compared against non-ESDM treatment-as-usual/community approaches (n = 301, 59 female) (e.g., speech and occupational therapy, applied behavioral analysis, pivotal response training). Outcome variables were Mullen Scales of Early Learning (MSEL) age-equivalent scores, Vineland Adaptive Behavior Scales (VABS) standardized scores, and Autism Diagnostic Observation Schedule (ADOS) calibrated severity scores. Result(s): Predictors such as sex and cumulative intervention intensity were largely not associated with change in outcomes. Age at intervention start and pre-intervention developmental quotient (DQ) were strong moderators across all outcomes. Earlier age at intervention start predicted more positive outcomes, while higher pre-intervention DQ predicted accelerated growth on VABS motor and MSEL outcome measures. Interventions were similar in their effects on MSEL and VABS outcomes. However, for ADOS outcomes, ESDM resulted in significantly declining trajectories over time, with the sharpest decline for high pre-intervention DQ individuals. In contrast, ADOS trajectories in non-ESDM diverge in opposite directionalities (i.e. increases or decreases) depending on individual's pre-intervention DQ. Limitation(s): Data for the IDP-MA was contributed on a voluntary basis and only 1 study was contributed from an RCT. Therefore, the findings may be prone to self-selection bias that may limit generalizability. Inferences from the intervention type comparison (ESDM versus non-ESDM) may be limited due to the heterogeneous approaches lumped together in the non-ESDM category. Larger sample sizes are required for finer-grained comparisons of different intervention types. Conclusion(s): Age at intervention start and pre-intervention DQ are key individualized predictors and the latter can interact with intervention type to moderate early intervention response.Copyright © The Author(s) 2026.

109. Predictors of Word Learning With and Without Retrieval Practice in Children With Developmental Language Disorder.

Leonard Laurence B. Christ Sharon L. Karpicke Jeffrey D. Deevy Patricia Kueser Justin B. Souto Sofía Haebig Eileen. *Journal of Speech, Language & Hearing Research* 2026;69(9): 4268-4289.
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Purpose: Both children with developmental language disorder (DLD) and their peers with typical language development (TD) vary in their response to word learning activities, even when a consistent procedure is used. In this study, we examine child factors that might help explain this variation in outcomes and whether any interaction between these factors operates in the same way as a function of whether retrieval practice is included in the word learning procedure. Method: We examined the relations between a common set of child factors and children's responses in five previously published novel word learning studies with similar procedures. Participants were 4- and 5-year-old English-speaking children with DLD and their same-age peers with TD. Factors included scores on standardized language and nonverbal intelligence tests, nonword repetition, maternal education, age, and group status (TD, DLD). The role of each factor was examined while controlling for the other factors. Results: With all other factors controlled, age proved to be predictive of children's novel word learning. Nonword repetition was also predictive, though it interacted with age. Findings indicated that for children with DLD, increases in novel word learning for older children were less likely when nonword repetition ability was low. The disadvantage of weak nonword repetition ability was also apparent in learning conditions that lacked opportunities for retrieval. When retrieval practice was included, gains with age were less dependent on nonword repetition ability. Conclusions: For preschoolers with DLD and especially those with weak non-word repetition skills, including retrieval practice in the experimental procedure provided additional benefit. If future studies reveal that these findings apply as well to the clinical setting, the inclusion of retrieval practice during vocabulary intervention might help children avert a period of especially slow word learning.

110. Preliminary findings into speech inconsistency in dialectal Cypriot-Greek speaking children: A comparison between children with typical development and speech sound disorders

Papastefanou T. Petinou K. *Clinical Linguistics and Phonetics* 2026;
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Speech sound disorders (SSD) are highly prevalent in preschool-aged children, yet their identification remains challenging in linguistically diverse contexts where speech variability may reflect dialectal difference rather than disorder. The present study investigated whether token-to-token speech inconsistency differentiates dialectal Cypriot-Greek-speaking children with typical development (TD) from peers with SSD. Twenty preschoolers (mean age = 5;6) participated: 10 with TD and 10 with SSD. Speech inconsistency was assessed using the DO.KI.GLO Inconsistency Protocol, a Cypriot-Greek adaptation of the DEAP inconsistency subtest, eliciting three productions of 25 familiar lexical items. Inconsistency was operationalised as phonological variation across repeated tokens and quantified using an Inconsistency Index. Results revealed a substantial group difference: children with SSD produced

significantly higher inconsistency scores than TD peers (71.3% vs. 2.3%), with a large effect size. Nine of ten children in the SSD group exceeded the 40% threshold associated with Inconsistent Phonological Disorder. Qualitative analyses further differentiated groups, with TD variability reflecting predictable developmental substitutions, while SSD variability involved multi-feature, unpredictable substitutions, omissions, and distortions. These preliminary findings provide initial evidence supporting the clinical relevance of speech inconsistency in a dialectal context and highlight the importance of combining quantitative and qualitative analyses within culturally and linguistically sensitive assessment protocols for accurate SSD identification and subtyping.Copyright © 2026 Taylor & Francis Group, LLC.

111. Preoperative Speech Impairments as Precursors of Posterior Fossa Syndrome in Children with Brain Tumours.

Ahmed Rida Boll-Avetisyan Natalie Gronbaek Jonathan Kjaer Thomsen Ditte
Boeg Kingma Annet Persson Karin Mathiasen Rene Dahl Christine Carai Andrea Andreozzi Bianca Mastronuzzi Angela Pizer Barry Thorbi nson Colin Aquilina Kristian Hoving Eelco Juhler Marianne Jonkers Roel de Aguiar Vania. *Cerebellum* 2026;25(5):
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Preoperative speech deficits in children with posterior fossa tumours (PFTs) may be linked to postoperative speech impairment (POSI), a hallmark of posterior fossa syndrome, yet this relationship remains underexplored. POSI is characterized by mutism or markedly reduced speech that resolves within weeks to months but often leaves persistent motor-speech deficits. Most existing literature has focused on postoperative outcomes, with limited attention to preoperative speech function. We therefore systematically investigated this association by analyzing perceptible motor-speech features in a large cohort of patients scheduled for surgery within the European Study of Cerebellar Mutism Syndrome. We included data from 135 children which formed three age-and sex- comparable groups: 16 patients who later developed POSI, 11 were mute and five had severely reduced speech (3;9-14;4 years), 62 patients with habitual speech (3;2-17;11 years), and 57 healthy controls (3;0-18;1 years). Patients were Italian-, Dutch-, and English-speaking, while controls were Dutch- and Italian-speaking. Four speech-language therapists rated participants' narrative recordings on 23 speech features (e.g., distorted vowels, imprecise consonants, stuttering, and hoarseness). Group comparisons revealed significant preoperative differences between the children who later developed POSI and the children with habitual speech in both hypernasality and in phonation-respiration (e.g., leaky, hoarse, and strained voice). In addition, patients who later developed POSI showed impairment compared to healthy controls in prosody (e.g., speech rate, excess and equal stress) and articulation (e.g., distorted vowels, imprecise consonants, sequencing errors). Patients with habitual speech differed from the controls in hypernasality and prosody. Moreover, age influenced the severity of articulatory and prosodic symptoms, with younger patients showing greater impairment. Children with PFT show signs of speech impairment preoperatively relative to healthy controls. When comparing patients, those later developing POSI show more severe impairments related to resonance and voice quality. This suggests possible differences in the degree to which speech-related underlying anatomical substrates were compromised, and these early differences may represent potential predictors of later POSI. These findings highlight the value of preoperative assessment for identifying children at a heightened risk of POSI, opening opportunities for prehabilitation - targeted early intervention in the form of speech therapy - to strengthen the speech-motor networks. Copyright © 2026. The Author(s).

112. Preschool teachers' use of embedded learning opportunities to support young children with disabilities in inclusive settings

Balikci S. Aydin B. Rakap S. *European Journal of Special Needs Education* 2026;41(4): 710-724.
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Embedding learning opportunities (ELOs) within and across ongoing activities is an evidence-based practice for supporting development and learning of children with disabilities in inclusive preschool classrooms. In this study, we examined 41 preschool teachers' use of ELOs during ongoing classroom activities to address individualised goals of children with disabilities. Each teacher was observed five times during adult-directed, child-directed, and routine activities and transitions. Results indicated teachers used ELOs infrequently and inconsistently. Although teachers did not differ in their rate of ELO use, a significant variation was observed among teachers' implementation across different observations. In addition, teachers were more likely to address language and cognitive goals and implement ELOs during transitions, routines or child-directed activities. Between- and within-teacher variables, including teachers' total years of experience, experience with children with disabilities, number of children and adults in the classroom, and children's disability type, were examined but did not significantly predict the rate of teachers' ELO use. Findings highlight the need for targeted professional development to increase preschool teachers' consistency and frequency in implementing embedded instruction within inclusive classroom routines. Copyright © 2025 Informa UK Limited, trading as Taylor & Francis Group.

113. Prologue: language abilities in persons with dyslexia.

Hogan Tiffany P. Hancock Norma. *Annals of Dyslexia* 2026;76(2): 221-226.
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The purpose of this special issue is to showcase current research on language abilities in persons with dyslexia. Although dyslexia is most often defined as a word-level reading and spelling disorder rooted in phonology, a large and growing body of evidence shows that the language difficulties of dyslexia extend well beyond phonology and are too often overlooked in research and practice. The

articles in this issue (a) examine how broader oral language has and has not been accounted for in dyslexia research and policy, (b) characterize the language profiles of children with dyslexia with and without co-occurring developmental language disorder (DLD), (c) trace early language markers and subtypes that precede and predict reading difficulty, and (d) consider practical tools for detecting language vulnerability and for tailoring intervention to it within populations with reading and language difficulty. Read together, these contributions converge on a single message: dyslexia is best understood as a language learning disability, and assessment and instruction that ignore broader oral language risk leaving the needs of many children unmet. Universal screening, evaluation, and intervention for children with or at risk for dyslexia should routinely include measures of and stimulation for all components of oral language. Copyright © 2026. The Author(s).

114. Psychotropic medication use in school-aged children in foster care and residential care within child protective services

Parizeau E. Lafortune D. Monette S. *Child Abuse and Neglect* 2026;181 108287.
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Background: Children in the care of child protective services are treated with psychotropic medication at rates that far exceed those seen in the general population. Objective(s): This study documents the rates of psychotropic medication use among school-aged children in two groups: 1) foster care; and 2) residential care. Socio-demographic variables and mental disorders that predict psychotropic medication use, polypharmacy (>=2 medication), and multiclass polypharmacy (>=3 medication classes) were also examined. Participants and setting: The sample consisted of children aged 5 to 12 years in foster care (n = 125) and residential care (n = 106) in the province of Quebec (Canada). Method(s): Caregivers reported the children's medication use and completed questionnaires on the children's symptoms and diagnoses. Result(s): Children in foster care and residential care showed few differences, with the exception of two specific medications (antipsychotic and clonidine). Fifty-nine percent of all children in the sample were prescribed psychotropic medication. The majority (93%) of these children received at least one ADHD medication. Polypharmacy was common, with 21% of all children being prescribed more than one medication. Multiclass polypharmacy was rare. Unique predictors of psychotropic medication usage included male sex, cumulative adversity and a diagnosis of ADHD. Polypharmacy was predicted by diagnoses of ADHD, Tourette's Syndrome and of an eating disorder. The rarity of multiclass polypharmacy (n = 5/231) limited inferential analyses. Conclusion(s): Further research is needed to better understand the high rates of ADHD diagnosis and ADHD-medication among children in the care of child protective services, particularly given that ADHD medications account for most prescriptions. Copyright © 2026 The Authors

115. Quality of Life and Societal Cost in Autistic Children: An Exploratory Comparative Study Pre- and Post-Diagnosis

ten Hoopen L.W. de Nijs P.F.A. Greaves-Lord K. Hillegers M.H.J. Brouwer W.B.F. Roijen L.H.-V. *Journal of Autism and Developmental Disorders* 2026;56(8): 3129-3141.
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Previous studies showed an impact of autism on the child's quality of life and societal costs, although little is known about changes from pre- to post-diagnosis. Therefore, our study explored the utilization of health-related services and associated costs in a group of 36 clinically referred Dutch children with autism (aged 2-10 years), pre- and post-diagnosis. Taking a broad societal perspective, we included the child's quality of life, educational needs, and absenteeism in school and leisure activities. Furthermore, we assessed the service utilization in various categories, such as healthcare, youth care, and school guidance. The caregivers, mainly the parents, provided the information. Special needs daycare was the overall major cost driver pre- and post-diagnosis. We found a non-significant decrease in total annual costs (from 6513 to 5060). Post-diagnosis, healthcare costs were halved, changing towards less somatic and more mental healthcare. No shift to adjacent cost categories was seen. At the same time, the child's quality of life improved not significantly from 0.58 to 0.66 (EQ-5D-3L), with significantly fewer everyday activity problems. In addition, we observed a trend of less school absenteeism after the diagnosis. Regression analysis identified pre-diagnostic costs as the sole independent factor influencing post-diagnostic costs, explaining 23% of the variance. Our findings suggest the importance of timely clarification of autism as a foundation for informed intervention and treatment planning. This could potentially result in improved quality of life, appropriate service allocation, and reduced societal costs. Copyright © The Author(s) 2025.

116. Rapid syllable transition treatment (ReST) in children with speech motor delay: case studies

Bucci A.C. Goulart C. Mara de Oliveira A. *CODAS* 2026;38(5): e20250363.
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Speech Motor Delay (SMD) is characterized by difficulties in motor execution, resulting in unintelligible speech, with changes in articulatory precision, stability, voice, and prosody, as well as reduced articulatory dissociation and excessive movements for age. The objective of this study was to describe, through four longitudinal case studies, the performance of Brazilian children with SMD submitted to the Rapid Syllable Transition Treatment (ReST), verifying acquisition, retention, and generalization. Four monolingual children, aged five to eight years and diagnosed with SMD, participated. The intervention was conducted via synchronous telepractice, twice a week, over six weeks. Probes of trained and untrained pseudowords, sentences, real words, and control items were applied at different stages of therapy. The results showed progressive improvement in all evaluated aspects. Significant gains were observed in

phoneme accuracy, lexical stress, and coarticulation, confirming acquisition, retention, and generalization. It is concluded that ReST is effective for children with SMD, including when applied through telepractice, representing a promising evidence-based therapeutic alternative grounded in motor learning principles and supported by linguistically controlled stimuli selection.Copyright © 2026 Revista Pro-Fono. All rights reserved.

117. Re-Evaluating the Role of Statistical Learning: Domain-General Predictors of Language in Typical and Atypical Development

Lukics K.S. Dobo D. Racz P. Lukacs A. *Cognitive Science* 2026;50(9): e70261.
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The ability to detect statistical regularities in the input is widely assumed to support language acquisition, but its unique contribution to individual differences in language outcomes remains uncertain, especially in neurodevelopmental conditions. This study tested whether statistical learning predicts expressive vocabulary and grammatical skills in children with typical development and in groups with developmental language disorder, autism spectrum disorder or attention deficit hyperactivity disorder. A total of 102 Hungarian-speaking children aged 8 to 15 years completed tasks assessing statistical learning, auditory and visual perceptual speed, short-term and working memory, sentence repetition, and expressive vocabulary. Statistical learning showed modest associations with language measures, but the effects of perceptual speed and working memory were stronger. Verbal working memory consistently emerged as the strongest predictor of vocabulary and sentence repetition across all groups. At the same time, the relatively low reliability of the statistical learning measures may have attenuated the observed associations, potentially leading to an underestimation of the strength of their relationship with language. The pattern of associations did not differ systematically between diagnostic groups, consistent with the idea that variation in language outcomes reflects general cognitive differences that cut across traditional diagnostic categories. This finding is consistent with dimensional accounts of neurodevelopment, which propose that differences between conditions arise through quantitative rather than qualitative variation in core cognitive processes. However, the various dimensions were hard to disentangle at this sample size. By demonstrating this pattern for language abilities, the present study extends the dimensional perspective to the domain of language development and highlights the importance of accounting for shared cognitive mechanisms when studying typical and atypical language variation.Copyright © 2026 The Author(s). Cognitive Science published by Wiley Periodicals LLC on behalf of Cognitive Science Society (CSS).

118. REAL-WORLD ECONOMIC BURDEN AND HEALTHCARE UTILIZATION DRIVERS IN AUTISM SPECTRUM DISORDER: A LONGITUDINAL ANALYSIS OF EHR AND CLAIMS DATA (2017-2025)

Long S. Kerma F. *Value in Health* 2026;29(6 Supplement 1): S69.
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Objectives: Evaluate longitudinal healthcare utilization and total charges for US-based patients with Autism Spectrum Disorder (ASD). Method(s): A retrospective cohort study utilizing OMNY Health electronic health record (EHR) data from large US-based health systems (2017-2025) and linked open claims was performed. Patients with ICD-10 code of F84.0 were identified in the EHR and their linked claims were analyzed from time of first ASD diagnosis to last available claim. Healthcare utilization and associated charges were characterized overall and stratified by year and treatment setting/type. Result(s): 221,735 ASD patients were identified. Mean age was 15.6 years (SD 13.79); 25% were between 1-5 years in age; 22% between 6-10, 21% between 11-17, and 32% aged 181 years. Most patients were male (73%) and had Private Health Insurance/BCBS (59.7%), followed by Medicaid (13.8%) and Medicare/Other Government (4.9%). 21.4% had Miscellaneous/Other insurance coverage. Mean total annualized charges were $5,545, with 81% of charges covering hospital outpatient/ambulatory services, 13% covering prescription drugs, and 6% covering inpatient/emergency department care. Annual charges trended upward year over year overall and for each setting, while the proportion of total charges was stable by care setting. Conclusion(s): Outpatient and ambulatory care services represent the bulk of medical charges for patients diagnosed with ASD. The ASD diagnosis code F84.0 was rarely reported in the claims data. Commonly recommended ASD interventional services such as speech language therapy, applied behavioral analysis therapy, or programming for specialty tablet devices were rarely observed in the health system EHR data, as these services are typically delivered by specialty practices. ASD interventional services were found in the claims data, but often without an associated ASD diagnosis on the claim. Characterizing the ASD patient journey and cost of care in the US is a complex undertaking that requires consideration of the fragmented care delivery, coding practices, and reimbursement coverage for ASD services.

119. Recovery from semantic prediction violations during sentence processing in preschoolers with and without developmental language disorder

Zhang P. Yuile A.R. Deevy P. Leonard L.B. Borovsky A. *Journal of experimental child psychology* 2026;274 106669.
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Prediction is an important component of language comprehension, and language users may pre-activate multiple possible lexical continuations to different degrees. However, it remains unclear whether children with developmental language disorder (DLD) generate graded predictions and recover from prediction violations in the same way as their typically developing (TD) peers. The present study investigated graded lexical activation during real-time comprehension of sentences with unexpected endings in

preschool-aged children with developmental language disorder (N = 34) and age-matched typically developing (TD) children (N = 41) using a visual-world eye-tracking paradigm. Children listened to transitive sentences in which the verb supported a locally coherent but globally unpredictable continuation (e.g., "The pirate chases the CAT"; action-related condition) or an unrelated continuation (e.g., "The pirate chases the BONES"; unrelated condition), while viewing corresponding images. Both children with TD and DLD generated graded predictions with anticipatory fixations to action-related referents prior to theme onset. In contrast, the TD group showed more sustained benefits from the action-related condition than the DLD group following the theme onset. These findings suggest that early differences in DLD may arise not from impaired prediction generation, but from reduced ability to maintain and use updated semantic representations over time.Copyright © 2026 Elsevier Inc. All rights reserved.

120. Response to the Letters by Chang and Bernstein Ratner...Bernstein Ratner N. Not So Simple, and Not So Fast: The Limits of Speech Rate and Turn-Taking Modifications for Treatment of Early Stuttering. A Response to Onslow et al. (2026). Am J Speech Lang Pathol. 2026 Sep 8;35(5):2493-2495.

Onslow Mark Hearne Anna Yu Kun O'Brian Susan Menzies Ross Lowe Robyn. *American Journal of Speech-Language Pathology* 2026;35(5): 2496-2497.
Check for full-text availability

More details

Purpose: In our original article, we draw attention to the lifetime quality-of-life impairment that can result from childhood stuttering--hence, the need for immediate intervention after onset. We drew on existing experimental outcomes that parent speech-rate reduction and increased interturn speaker latency may reduce stuttering. We developed a two-factor treatment protocol based on those variables in combination and showed its clinical viability, suggesting that it would be a suitable target for Phase I--IV clinical trials. Chang and Bernstein Ratner wrote letters to the editor on our article, to which we respond. Conclusions: Our response to these letters to the editor covers the following issues raised by Chang and Bernstein Ratner: mechanisms of action for the proposed treatment, the evidence base for the treatment, plans to explore its treatment effects, and the need to verify its safety.

121. Rhotic Generalization Is More Rapid in Biofeedback Than Motor-Based Treatment for Residual Speech Sound Disorder: Secondary Outcomes of a Randomized Controlled Trial.

Preston Jonathan L. Hitchcock Elaine R. Leece Megan C. Benway Nina R. Hill Jennifer McAllister Tara. *Journal of Speech Language & Hearing Research* 2026;69(4): 1362-1378.
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PURPOSE: This study examined the effects of visual biofeedback approaches and nonbiofeedback motor-based treatment on generalization outcomes following speech therapy for children with residual speech sound disorders (RSSDs)., METHOD: A total of 108 children aged 9-15 years with RSSD affecting American English /r/ were randomly assigned to receive 19 motor-based speech treatment sessions, with or without visual biofeedback (divided into ultrasound or visual-acoustic biofeedback). The treatment included practice designed to implement several motor learning principles, with task difficulty systematically adjusted based on the child's performance. Children's /r/ accuracy on untreated words before and after treatment was rated as correct or incorrect by lay listeners who were blinded to participant characteristics, treatment conditions, and time points., RESULTS: The mixed-effects regression model revealed a statistically significant interaction between treatment type and time point. Specifically, both the biofeedback and nonbiofeedback motor-based treatment groups made progress over time, but the amount of generalization to untreated words was significantly greater in the biofeedback condition than in the motor-based treatment. In a subanalysis comparing biofeedback types, greater generalization was observed following ultrasound biofeedback than visual-acoustic biofeedback, although this effect was strongest at one treatment site., DISCUSSION: This randomized controlled trial found that adding biofeedback to motor-based treatment can increase the rate of accurate production of the American English /r/ in untreated words.

122. Sentence repetition as a potential indicator of broader language difficulty in students with dyslexia: A pilot study

Gierka M.V. Ormandy N. Coyne-Green A. Zampitella T. Odegard T.N. Hogan T.P. Hancock N. *Annals of Dyslexia* 2026;76(2): 348-363.
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More details

Sentence repetition tasks have been shown to be sensitive indicators of developmental language disorder (DLD), with prior work demonstrating strong group-level differences between children with DLD and typically developing peers. However, less is known about how sentence repetition performance relates to broader language difficulties among students already identified with dyslexia. Dyslexia is characterized primarily by word-level reading and spelling difficulties, yet many students with dyslexia also exhibit oral language weaknesses consistent with DLD, which carry important implications for academic outcomes. The present pilot study examined whether sentence repetition performance was associated with indicators of broader language difficulty among students with dyslexia. Participants were 22 fourth-grade students attending a specialized school for language-based learning disabilities, all of whom carried a diagnosis of dyslexia. Sentence repetition performance was examined in relation to students' current or recent qualification for speech-language services, used as a proxy indicator of broader language difficulty. Students receiving speech-language services demonstrated substantially lower sentence repetition scores than their peers with dyslexia who were not receiving services, with a large group difference observed. Logistic regression was used descriptively to illustrate how sentence repetition performance

corresponded to observed service-status groupings in this small sample. Findings should be interpreted as preliminary and associative, consistent with the exploratory nature of the study. Results suggest that sentence repetition performance may warrant further investigation as a potential indicator of broader language vulnerability within dyslexia-identified populations and highlight the need for larger, prospective studies examining oral language assessment in students with dyslexia.Copyright © The Author(s), under exclusive licence to Springer Science+Business Media, LLC 2026.

123. Severity-Coded Self-Disclosure Cues and Adult Listener Perceptions of an Adolescent Who Stutters: An Exploratory Study

Snyder G. Bounds K. *Folia Phoniatrica et Logopaedica* 2026; 1-8.
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More details

Introduction: Factual self-disclosure of stuttering is associated with more favorable listener perceptions. Whether the overt stuttering heard during a brief opening disclosure changes subsequent judgments of an adolescent speaker remains unclear. Method(s): In this nonrandomized between-groups video-vignette study, 778 adults viewed a 17-year-old male who stutters either without disclosure (n = 289) or after a factual self-disclosure cue containing mild (n = 143), moderate (n = 180), or severe (n = 166) overt stuttering. The same 2-min 34-s core speech sample followed every cue. Participants rated six speech skills and 10 personality characteristics. Primary ANCOVAs adjusted for age, sex, and academic or occupational focus; cumulative-logit ordinal models served as sensitivity analyses. Result(s): Relative to no disclosure, all three disclosure-cue conditions received more favorable adjusted ratings of intelligibility, fluency, and ease of listening. Disclosure conditions also generally received lower perceived speech-related handicap ratings and were viewed as more relaxed, less fearful, more confident, more outgoing, and more competent. However, the unadjusted pattern suggesting that mild and severe cues outperformed moderate cues was not robust after covariate adjustment. Conclusion(s): Across mild, moderate, and severe overt-stuttering disclosure conditions, adult listener ratings were more favorable than in the no-disclosure condition. These findings support factual self-disclosure as a clinically useful self-advocacy option for adolescents who stutter. Future controlled studies should examine whether listener responses vary according to disclosure severity, severity of the subsequent speech sample, and the extent to which those two severity levels correspond.Copyright © 2026 S. Karger AG, Basel

124. Social Disadvantage and Language Disorder: Is Dissociating Possible?

Rakhlin Natalia Li Nan Momotenko Darya Sukmanova Anastasia Ivanova Elizaveta Kosikova Alisa Grigorenko Elena L. *American Journal of Speech-Language Pathology* 2026;35(5): 1998-2015.
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Purpose: We (a) investigated whether children of lower socioeconomic status (SES) are at a greater risk of developmental language disorder (DLD) than children of higher SES, based on standardized assessment; (b) identified the language skills most strongly affected by SES; and (c) examined which standardized and naturalistic measures best differentiate DLD in children from lower SES backgrounds. Method: We compared Russian-speaking children of middle SES (urban) and low SES (rural) on standardized language tasks. To disentangle SES effects from heritable risk for DLD, we further compared low-SES children from two rural populations--one with a high prevalence of DLD and one with an average level of DLD--using standardized language tasks and indices of narrative microstructure. Results: Rural children performed more poorly than urban children across all assessments, whereas the two rural samples differed only minimally on most subtests. Sentence repetition showed the largest SES effect and the smallest DLD effect. In contrast, the only standardized subtest that differentiated the high-risk from average-risk rural group involved following multistep directions, which exhibited a modest SES but a large DLD effect. Most indices of narrative microstructure did not reliably distinguish children at a high risk for DLD from those at an average risk within the rural sample. Conclusions: Our results suggest that rural poverty exerts a pronounced effect on multiple aspects of both expressive and receptive language. Although test bias may account for some of these differences, it is unlikely to explain the large disparity between rural and urban children, particularly on sentence repetition. This pattern indicates that expressive syntax--particularly in tasks with high working memory demands--is especially vulnerable to the effects of social disadvantage, in a manner functionally similar to DLD. In contrast, receptive tasks that require children to follow multipart directions appear to be a relative strength for children from lower SES backgrounds and may serve as a useful diagnostic marker for differentiating heritable DLD in this group of children.

125. Social Isolation in Adults Who Stutter: A Mixed-Methods Investigation of Risk and Correlates.

Tichenor Seth E. Gore Katie Palasik Scott Yaruss J Scott. *American Journal of Speech-Language Pathology* 2026;35(5): 2298-2316.
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PURPOSE: Social isolation is a commonly reported aspect of the stuttering experience. This study qualitatively explored adult stutterers' reports of social isolation while quantitatively examining possible correlates underlying the occurrence of social isolation in this population., METHOD: A sample of 264 adults who stutter were asked to share their experiences of social isolation and to complete measures of personality, stuttering role identity, social disconnectedness, and perceived isolation via an internet survey. Qualitative data were analyzed via thematic content analysis. Quantitative data were analyzed via linear and ordinal logistic regression to determine the influence of various correlates on social isolation., RESULTS: Qualitative data indicated that the experience of social isolation is common to the experience of living as an adult who stutters. Responses indicated that social isolation in adults who stutter

is influenced by personality differences, environmental components, and life experiences. Self-reported diagnoses of anxiety and depression did not significantly identify adults with greater social disconnectedness or perceived isolation. Instead, those speakers who less frequently had a goal of stuttering openly, as well as those speakers who were less extraverted, were more likely to experience greater amounts of both social disconnectedness and perceived isolation., CONCLUSIONS: Social isolation in adults who stutter is influenced by internal and external aspects of personal characteristics and experiences. Therapy, self-help/support, and intentional change can help speakers develop greater social connection, thereby decreasing isolation and the adverse impact of stuttering on their lives., SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.33200520.

126. South African Speech-Language Therapists' Perceptions of Youth Offenders and Youth Offender Rehabilitation.

Maasz Johan Jacobus Bezuidenhout Christiaan Graham Marien Alet Linde Jeannie van der. *International Journal of Language & Communication Disorders* 2026;61(6): e70345.
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BACKGROUND: Healthcare professionals (HCPs) tend to display similar levels of implicit bias towards certain groups as the general population. This is concerning as such biases are known to result in poorer clinical decision-making and therapeutic outcomes for offender populations. Understanding the perceptions that HCPs hold towards the groups they serve are therefore essential. Given the promising role that speech-language therapists (SLTs) could fulfil in youth offender rehabilitation, their perceptions towards the youth offender population needs further exploration. This study explored South African SLTs' perceptions of youth offenders and youth offender rehabilitation., METHODS AND PROCEDURES: Using non-probability purposive sampling, a cross-sectional, mixed-method online survey was distributed on social media platforms. Thirty-five SLTs registered with the Health professions council of South Africa (HPCSA) and currently practising in South Africa volunteered their participation. Quantitative data were analysed using point-biserial and Spearman correlations, while qualitative data were analysed using qualitative content analysis., RESULTS: Most participants had not received training related to working with individuals in the criminal justice system (CJS) [n = 32, 91.4%] and had not previously delivered services to youth offenders in the CJS (n = 25, 71.4%). More than half of the participants agreed that youth offenders can be rehabilitated and functionally reintegrated after incarceration (n = 21, 60.0%). The majority (n = 29, 90.3%) also agreed that societal attitudes contribute to the challenges that youth offenders face during reintegration. Participants reported that communication disorders could negatively influence the behaviour and social interactions of youth offenders by contributing to emotional and behavioural difficulties. Participants with no previous training in working with persons in the CJS were more likely to agree that biological risk factors such as a genetic predisposition ($p = 0.048$, $rs = 0.358$) and a diagnosis of Autism Spectrum Disorder ($p = 0.016$, $rs = 0.430$) could contribute to youth offending behaviour., CONCLUSIONS AND IMPLICATIONS: Participants generally perceived youth offenders and their potential for rehabilitation positively. They also demonstrated good insight into potential barriers and societal attitudes that affect youth offender rehabilitation and reintegration. Additionally, participants without prior training to work with youth offenders were more likely to attribute criminal behaviour to personal and biological factors than participants who had received such training. Further research exploring HCPs' perceptions of youth offenders across different disciplines and contexts is recommended., WHAT THIS PAPER ADDS: What is already known on this subject Youth offenders are at greater risk of developing communication difficulties. Subsequent research has focused on examining the prevalence and characteristics of the speech, language and communication needs (SLCN) within this population. In addition, a small number of preliminary studies have explored the efficacy of speech-language therapy (SLT) interventions for the population. What remains largely unexplored, however, is how SLTs perceive this population, despite evidence that such perceptions can shape clinical decision-making and patient engagement among healthcare professionals (HCPs). What this study adds to the existing knowledge This study offers preliminary insights into South African SLTs' perceptions of youth offenders, their rehabilitation, and the social attitudes that may influence the rehabilitation process. It also highlights the biological, environmental, and mixed risk factors that participants identified as potential contributors to youth offending behaviour. What are the clinical implications of this study? Although this study has no direct clinical implications, its findings may be considered by SLTs in youth rehabilitation and could encourage HCPs to reconsider how they access and assess detained youth offenders. It could also inform public health policies on treatment modalities for youth offenders. Finally, this study provides a foundation for further research on HCPs' perceptions of justice-involved youth. Copyright © 2026 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.

127. Speech Perception Profiles in Korean-Speaking Children With Speech Sound Disorders.

Bang Hajeong Ha Seunghee. *International Journal of Language & Communication Disorders* 2026;61(6): e70340.
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BACKGROUND: Children with speech sound disorders (SSD) constitute a heterogeneous population, with speech difficulties arising from different loci within the speech processing system. Speech perception has long been implicated in SSD; however, previous findings remain mixed, partly due to differences in task demands and limited consideration of SSD subtypes. In particular, few studies have systematically examined speech perception across multiple contrast types that are explicitly structured around common developmental error patterns and across clinically defined SSD subgroups., AIMS: This study aimed to: (a) compare speech perception performance between children with SSD and typically developing (TD) peers across different phonological contrast types, and (b) examine whether children with articulation disorder, phonological delay, and phonological disorder exhibit distinct perceptual profiles that reflect subtype-specific characteristics., METHODS: Fifty-two Korean-speaking children aged 5-6 years participated (26 SSD; 26

TD). Speech perception was assessed using a minimal-pair identification task incorporating four substitution patterns frequently observed in Korean-speaking children: velar fronting, fricative stopping, affricate stopping, and affrication. Children with SSD were further classified into articulation disorder, phonological delay, and phonological disorder subgroups based on their surface error patterns. Group differences were analyzed in terms of overall accuracy and contrast-specific performance., RESULTS: Children with SSD performed significantly below TD peers on the speech perception task. Across both groups, velar fronting contrasts were the most challenging, whereas contrasts involving manner differences were identified more accurately. Within the SSD group, subgroup comparisons did not reach significance for overall accuracy or for most contrast types; however, a descriptive trend was observed whereby children with articulation disorder showed numerically higher accuracy than children with phonological delay and phonological disorder. A significant subgroup difference emerged specifically for the affricate stopping contrast, with children in the phonological disorder subgroup showing significantly lower accuracy than those in the articulation disorder subgroup., CONCLUSIONS: The findings indicate that speech perception difficulties in SSD are contrast-dependent and preliminary evidence suggests that perceptual vulnerability for certain contrasts (specifically affricate stopping) may differ across SSD subtypes. Rather than reflecting a uniform perceptual deficit, perceptual vulnerability in SSD appears to be most pronounced for contrasts associated with common substitution patterns, with subtype-related differences observed for this specific contrast rather than uniformly across all contrasts tested., WHAT THIS PAPER ADDS: What is already known on this subject Children with speech sound disorders (SSD) often demonstrate poorer speech perception than their typically developing peers, although findings across studies have been inconsistent. Prior research suggests that perceptual weaknesses in SSD may depend on task characteristics and the phonemic contrasts examined, with some evidence pointing to sound-specific difficulties aligned with children's production errors. In addition, SSD is a heterogeneous condition comprising distinct subtypes, such as articulation disorder, phonological delay, and phonological disorder, which differ in surface error patterns and underlying speech processing profiles. However, few studies have examined speech perception across SSD subtypes using contrasts that directly reflect common developmental substitution patterns, particularly in Korean-speaking children. What this study adds to the existing knowledge This study demonstrates that speech perception difficulties in SSD are contrast-dependent rather than uniform and vary meaningfully across SSD subtypes. Using a minimal-pair identification task grounded in developmentally relevant Korean phonological contrasts, the findings show that children with articulation disorder exhibit relatively preserved perceptual sensitivity, whereas children with phonological delay and phonological disorder show reduced performance, with the weakest perception observed in phonological disorder. Importantly, subtype-related differences were evident even at the level of speech perception, extending previous Korean research that has focused primarily on downstream phonological processing measures. These results provide evidence that perceptual vulnerability contributes to the heterogeneity of SSD and aligns with subtype-specific loci of processing difficulty. What are the clinical implications of this study? The findings highlight the value of incorporating speech perception assessment into the evaluation of children with SSD, particularly when differential diagnosis among SSD subtypes is considered. Perceptual assessment may be less critical for children with articulation disorder, whose difficulties appear largely output-based, but should be considered an essential component for children with phonological delay or phonological disorder. In particular, these findings underscore the relevance of speech perception for understanding heterogeneity in SSD, without implying uniform vulnerability across contrast types or children. A subtype-sensitive approach to speech perception assessment and intervention may support more precise clinical decision-making and more effective, individualized treatment planning. Copyright © 2026 Royal College of Speech and Language Therapists.

128. Speech-Language Intervention in a 12 years Old Child with Autism Spectrum Disorder: A Clinical Case Report

Kumar K.R. *International Journal of Drug Delivery Technology* 2026;16(63 Supplement): 1746-1750.
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More details

Background: Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterized by persistent challenges in social communication and interaction, along with restricted, repetitive patterns of behavior, interests, or activities. Speech-language intervention plays a crucial role in addressing the communication deficits associated with ASD. This clinical case report describes the speech-language intervention provided to a 12-year-old child diagnosed with ASD. The intervention focused on improving functional communication, social skills, and expressive language abilities. The case highlights the importance of individualized, family-centered approaches in the management of communication disorders in children with ASD. The outcomes underscore the potential for significant gains in communication skills with consistent and targeted speech-language therapy, even in school-aged children with ASD. This report contributes to the growing body of evidence supporting the effectiveness of speech-language intervention in improving quality of life and functional outcomes for individuals with ASD.Copyright © 2026, Dr. Yashwant Research Labs Pvt. Ltd. All rights reserved.

129. Spoken language delay in toddlerhood predicts late childhood language outcomes in dyslexia: evidence from retrospective parent-report

Palser E.R. Bahar N. Carpenter E. Bardorf M. Kersey M. Bogley R. Inkelis S. Pinheiro-Chagas P. Tee B.-L. DeLeon J. Sturm V.E. Miller Z.A. Mandelli M.L. Tempini M.L.G. Pereira C. *Annals of Dyslexia* 2026;76(2): 329-347.
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More details

Some children are slower than average to acquire early spoken language milestones. Little is known about how this heterogeneity in expressive language impacts later childhood language and reading outcomes in children with dyslexia. We investigated oral language and reading differences in 63 children with dyslexia aged 8-12 years, comparing those with (35%) and without (65%) a prior history of

delayed two-word phrase production (beyond 24 months of age). All children subsequently acquired fluent spoken language. Language outcome measures included standardized tests of current sound awareness, rapid picture naming, memory for words, and sentence repetition. Current single word and paragraph reading abilities were measured using standardized timed and untimed tests. Results indicated that both groups showed comparable single word and paragraph reading performance in middle childhood. Those with early spoken language delay had poorer sentence repetition and memory for words than those who used two-word phrases by 24-months. Our findings point to distinct language contributions to dyslexia in children with and without a history of early spoken language acquisition difficulties, underscoring the importance of considering early language milestones in this population.Copyright © The Author(s) 2026.

130. Structural Brain Correlates of Speech Disfluency in Early Childhood: A Dimensional Analysis in a Population-Based Cohort.

Jolly Ashmeet Yli-Savola Aura Pulli Elmo
P. Saloranta Essi Railo Henry Merisaari Harri Saukko Ekaterina Silver Eero Kumpulainen Venla Copeland Anni Karlsson Hasse Karlsson Li nnea Junttila Niina Mainela-Arnold Elina Tuulari Jetro J. *European Journal of Neuroscience* 2026;64(4): e70652.
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More details

Most neuroimaging studies of speech disfluency have compared individuals who stutter with fluent controls. However, treating speech disfluency as a continuous, dimensional trait offers new insights into the neural basis of fluency during early childhood. We investigated whether naturally occurring variation in speech disfluency is associated with grey matter structure in a population-based sample of 5-year-old children (N = 120; 65 M, 55 F). Disfluency was derived from audio and video-recorded conversational speech samples transcribed and coded using the Ambrose and Yairi classification into stuttering-like disfluencies (SLDs) and other disfluencies (ODs). T1-weighted magnetic resonance imaging data were analyzed using voxel-based morphometry and complemented by surface-based measures of cortical thickness and surface area (FreeSurfer). Whole brain voxel-wise regression tested associations between grey matter and disfluency while adjusting for age, sex, handedness, and maternal education, with additional robustness checks (including intracranial volume adjustment and alternative SLD operationalizations). Higher SLDs were positively correlated with regional grey matter volume primarily in the frontal cortex, with clusters in the left middle frontal gyrus and right superior frontal gyrus showing the greatest cross-model stability (uncorrected voxel-level $p < 0.001$; FDR-corrected cluster-level $p < 0.05$); additional regions, including posterior cerebellum, were more sensitive to model specification. No significant voxel-wise associations were observed for ODs, and surface-based analyses yielded no significant associations with SLDs. Boys showed higher SLD rates than girls, but voxel-wise sex x SLD interactions were not significant. These findings suggest that dimensionally measured SLDs across a population-based cohort are most consistently related to frontal control systems implicated in planning and monitoring demands during speech. The overlap with frontal regions reported in diagnosis-based stuttering studies suggests that frontal control circuitry is relevant to fluency variation in early childhood across both dimensional and categorical approaches. These findings support a complementary, dimensional approach to studying fluency variation in early childhood, while underscoring the need for longitudinal work to determine how naturally occurring disfluency relates to later developmental stuttering. Copyright © 2026 The Author(s). European Journal of Neuroscience published by Federation of European Neuroscience Societies and John Wiley & Sons Ltd.

131. Study protocol of the Speech of children After Neonatal Encephalopathy (SANE): a single-centre prospective cohort study.

Bodocs Dora
Luca Rago Anett Farkas Nelli Lakatos Andrea Kas Bence Lukacs Agnes Jermendy Agnes Hernadfoi Mark Lokkos Emma Kiss Norbert Banv olgyi Andras Major Janos Hegyi Peter Szabo Miklos Varga Zsuzsanna. *BMJ Open* 2026;16(8): e120474.
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INTRODUCTION: Language development is a key determinant of academic achievement and psychosocial outcome. Due to the therapeutic hypothermia procedure, 75% of children diagnosed with moderate to severe neonatal encephalopathy (E) survive without serious neurological sequelae. Several studies have already revealed the overall cognitive deficits of these infants; however, their long-term language developmental specificities and their attendant neonatal risk markers remain under-investigated., METHODS AND ANALYSES: In our single-centre prospective cohort study (n=128), we will include only those children with perinatal asphyxia who meet the stepwise criteria of the Total Body Hypothermia (TOBY) study and who survive NE without functional motor deficits and moderate/severe overall cognitive deficits at the second-year follow-up examination. The NE survivors included and cared for in the Level III Neonatal Intensive Care Unit of the Pediatric Center, Semmelweis University, Budapest, Hungary, were born between 2017 and 2022. Clinical, laboratory, electrographic and neuroimaging data will be extracted from their medical records and will be evaluated retrospectively. Patients will be followed up to assess overall cognitive and language development between 4 and 8 years. The association between neonatal biomarkers and developmental language disorder (DLD) will be analysed with binary logistic regression models. Machine learning techniques will be used to develop predictive models for DLD. For modelling the longitudinal changes between early (2 years) and later (4-8 years) cognitive and language status, mixed effects models will be applied., ETHICS AND DISSEMINATION: The protocol was approved by the National Centre for Public Health and Pharmacy (NNGYK/24844-9/2025) on 21 May 2025. Results of this study will be disseminated through multiple channels. We will publish the findings in international peer-reviewed scientific journals and present them at national and international conferences., TRIAL REGISTRATION NUMBER: NCT07136636. Copyright © Author(s) (or their employer(s)) 2026. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ Group.

132. Stuttering Stroke: Postvaricella Arteriopathy in a Toddler

Kathirrajan M. Ramanan P.V. Vinodha R. *Pediatric Neurology* 2026;185 3-4.
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133. Supporting a child with cerebral palsy associated with autism spectrum disorder: Clinical issues and adaptations in care

Deudon C. *Motricite Cerebrale* 2026;
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The co-occurrence of cerebral palsy (CP) and autism spectrum disorder (ASD) affects a significant proportion of children receiving rehabilitation care. This association results in a combination of motor, sensory, communicative, and emotional difficulties, requiring careful and individualized adjustments in professional practices. Based on a clinical perspective, this article provides practical guidelines for supporting these children in daily care. It highlights key approaches such as session structuring, pairing, communication adaptation, the use of reinforcers and distractors, and the implementation of gradual habituation to care. These tools are presented as directly addressing the specific neurodevelopmental needs of children with ASD, in line with current recommendations., La co-occurrence entre paralysie cerebrale (PC) et trouble du spectre de l'autisme (TSA) concerne une part non negligeable des enfants suivis en reeducation. Cette association entraine un cumul de difficultes motrices, sensorielles, communicationnelles et emotionnelles, qui necessite d'ajuster finement les pratiques professionnelles. A partir d'une approche clinique, cet article propose des reperes concrets pour accompagner ces enfants au quotidien : structuration de la seance, pairing, adaptation de la communication, utilisation de renforcateurs et de distracteurs, et mise en place d'une habituation progressive aux soins. Ces outils sont envisages comme des reponses directement adaptees aux besoins neurodeveloppementaux des enfants presentant un TSA, en coherence avec les recommandations actuelles. Copyright © 2026 Elsevier Masson SAS

134. Temperament Profiles and Their Association With Stuttering-Related Outcomes in a Clinical Cohort

Heselmans I. Delpeche S. Kelman E. Millard S. Eggersa K. *Journal of Speech, Language, and Hearing Research* 2026;69(8): 3568-3588.
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Purpose: Previous research on temperament in developmental stuttering has primarily treated emotional reactivity and self-regulation as separate constructs. Examining their interaction is likely to yield more comprehensive insights into their joint influence on stuttering-related outcomes. Therefore, this study examined how the interplay between emotional reactivity and self-regulation is reflected in differences in stuttering severity, speech attitude, levels of anxiety and depression, and the impact of stuttering. Method(s): A total of 322 younger (ages 3-8 years) and 468 older children (ages 9-15 years) who stutter were categorized into four temperament profiles based on dichotomization at the midpoint of scale scores for emotional reactivity and self-regulation, as reported in a parental temperament questionnaire. For younger children, an additional dichotomization was applied using U.K. population mean score. This procedure was conducted separately for positive and negative reactivity, each in relation to self-regulation, yielding four distinct temperament profiles per reactivity type (i.e., higher/lower reactivity x higher/lower self-regulation). Between-groups differences were investigated for stuttering severity, stuttering impact, speech attitude, and the level of anxiety/depression. Result(s): There were no differences between the temperamental profiles and the differing measures in young children using the scale midpoint dichotomization method. However, when using U.K. population mean dichotomization, temperament profiles continued to show no associations with stuttering severity or speech attitude but did reveal significant differences in stuttering impact, indicating that lower positive reactivity combined with lower self-regulation is linked to greater perceived impact among younger children who stutter. Older children and teens with higher positive reactivity and higher self-regulation had less impact, anxiety, and depression, whereas those with higher positive reactivity and lower self-regulation had a lower overt stuttering severity compared to most other temperament profiles; higher negative reactivity in combination with lower self-regulation was related to more impact compared to most other temperament profiles. Conclusion(s): This is the first study to examine the interaction between reactivity and self-regulation and the relationship with several stuttering-related factors. These results suggest that the interplay between emotional reactivity and selfregulation does not appear to impact stuttering outcomes in early childhood but does during late childhood and early adolescence. The findings suggest that having higher positive reactivity and higher self-regulation temperamental profile has a protective role for older children in terms of their stuttering experience and that higher positive reactivity may serve as a protective factor for reduced self-regulatory abilities. Those who obtained higher negative reactivity scores experienced a greater impact of stuttering when this is combined with lower self-regulation, again suggesting that self-regulation exerts a protective role. These differences offer a clearer basis for understanding variability in the stuttering experience and provide insight into those children who may be at greater risk of an adverse experience.Copyright © 2026 American Speech-Language-Hearing Association.

135. The contribution of maternal sensitivity to children's behavior problems: A longitudinal study of Arab-speaking children with speech and language conditions

Abu-Dawoud A. Bashir-Khalaily R. Madi S. Gur-Yaish N. Sher-Censor E. *Research in Developmental Disabilities* 2026;177 105382.
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Children with expressive language delay or stuttering conditions have an increased risk of behavior problems. However, the mechanism underlying this association is poorly understood. Studies show maternal sensitivity shapes the socioemotional development of typically developing children, yet little is known about this association in the context of children with speech and language conditions. To address this gap, we examined whether maternal sensitivity would be concurrently associated with children's behavior problems and prospectively predict changes in these problems over time. Forty Arab-speaking mothers and their preschool- and elementary-school-aged children (M age in months = 68.63, SD = 16.47; 10 females) diagnosed with expressive language delay or stuttering participated in this study. Maternal sensitivity was assessed globally during observed play interactions with the child and in specific moments of child difficulties with expression or stuttering, through mothers' self-reports of their reactions. Mothers reported their child's behavior problems at baseline and two years later. Controlling for the severity of children's speech or language conditions, maternal sensitivity was concurrently associated with fewer child behavior problems. Children's behavior problems increased over time, yet maternal sensitivity predicted a smaller increase, suggesting an attenuating effect on this general trend. These findings highlight the importance of addressing mother-child interactions in research and practice with families of children with speech and language conditions.Copyright © 2026 The Authors.

136. The effect of teacher education supported through consultation on acquisition communication skills in children with autism spectrum disorder.

Aykut Pelin Kahveci Gül. *International Journal of Developmental Disabilities* 2026;72(6): 1256-1277.
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More details

The purpose of this paper is to measure the effects of the consultation method that includes teaching and practicing the mand-modelling technique to teachers and parents to improve the communication skills of children with autism. Multiple probe design, which is one of the single-case research designs, was used in the study. The findings of this research show that families with children with autism can be successful in improving their children's limited verbal communication skills through receiving training in milieu teaching techniques that parents receive from their children's teachers and perform in parallel with their teachers. The results showed that using the consultation method to teach the mand-modelling technique to special education teachers by ensuring that the family participates in the education is effective in developing pragmatic language in children with autism.

137. The effectiveness of teletherapy for developmental language disorder in India

Thahani I. Joby J. Nicholls C. Mahesh S. Syed Y.A. *Frontiers in Digital Health* 2026;8 1827565.
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Introduction - Developmental language disorder (DLD) is a condition that impairs language acquisition in children despite typical cognitive abilities and the absence of neurological, physical, or hearing impairments. Early intervention through speech therapy is critical, with in-person therapy traditionally considered the standard approach. However, teletherapy delivered via digital platforms has emerged as a potential alternative, particularly in contexts where access to conventional services is limited. Methods - This study investigated the impact of teletherapy on children aged 2-5 years in India diagnosed with DLD, using a single-group pre-post treatment design. Ten children participated in a structured three-phase process consisting of a pre-therapy assessment, a series of teletherapy sessions, and a post-therapy assessment. The sessions were conducted via video calls and incorporated language stimulation strategies including imitation, modelling, and expansion. Results - Participants demonstrated improvements in both expressive and receptive language skills following the intervention. Parents reported high levels of satisfaction with the teletherapy approach, highlighting its convenience and accessibility as key advantages. Although some challenges were noted, including technological issues and increased demands on caregivers, these did not substantially impede the observed progress. Discussion - The findings provide early evidence that teletherapy may be a feasible and accessible approach for supporting language development in children with DLD, particularly in settings with limited access to in-person services. However, given the small sample size and lack of a control group, further research involving larger, controlled studies is necessary to establish the effectiveness of teletherapy and its comparability to traditional therapy models. Copyright © 2026 Thahani, Joby, Nicholls, Mahesh and Syed.

138. The efficacy of group language training combined with picture exchange communication system for children with autism spectrum disorder

Duan C. Du L. Cai J. Liu H. Guo L. Tang Y. *Zhongguo Ertong Baojian Zazhi* 2026;34(9): 1009-1013.
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Objective To explore the efficacy of group language training combined with the picture exchange communication system (PECS) on core symptoms and rehabilitation outcomes in children with autism spectrum disorder (ASD), in order to provide theoretical reference for clinical intervention. Methods A total of 86 children aged 26 years with ASD, treated at Dongguan Maternal and Child Healthcare Hospital from July 2023 to April 2025. were recruited in this study. They were randomly assigned to experimental group and control group, with 43 cases in each group. Both groups underwent rehabilitation training for 1 hour per day. 5 days per week, for a total duration of 6 months. The control group received conventional one-on-one speech rehabilitation. The experimental group received a combined intervention of PECS and group language training. Assessments included the Autism Behavior Checklist (ABC), Childhood

Autism Rating Scale (CARS), and Gesell Development Diagnosis Scales (GDDS) before and after intervention. Results Finally 80 children completed the intervention, with 40 cases in control group and 40 cases in experimental group. Post-intervention analysis showed no statistically significant differences in ABC or CARS scores between the two groups (P > 0.05). However, both groups demonstrated significant improvements in language and personal-social developmental quotients (DQ) (control group: language DQ t = 7.42, P < 0.001, personal-social t = 6.96, P < 0.001; experimental group: language DQ t = 15.29, P < 0.001, personal-social t = 11.43, P < 0.001). Notably, the experimental group exhibited significantly greater improvements in language DQ (t = 16.61, P < 0.001) and personal-social DQ (t = 5.44, P < 0.001) compared to the control group. Conclusions The combination of group language training and PECS is superior to conventional language training in enhancing language and personal-social development in children with ASD. However, its effects on core symptoms remain inconclusive and warrant further investigation.Copyright © 2026, Editorial Office of Chinese Journal of Child Health Care. All rights reserved.

139. The experience of stuttering among adolescents in Iran: A cross-cultural study

Irani F.I. Rasoli Jokar A.H. Tarameshlu M. Ghorbani A. Kamali M. Yaruss J.S. *International Journal of Speech-Language Pathology* 2026;28(4): 793-806.
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Purpose: This study aimed to explore the experience of adolescents who stutter in Iran by translating and adapting the Overall Assessment of the Speaker's Experience of Stuttering-Teens protocol for Farsi-speaking adolescents and compare the impact of stuttering on their lives with that of adolescents from other countries. Method(s): A rigorous translation and cross-cultural adaptation process-comprising forward and backward translation, expert committee review, and pilot testing-produced the OASES-T-F. The questionnaire was administered to 102 adolescents (51 males, 51 females) aged 12-17 years. Internal consistency was assessed via Cronbach's alpha, test-retest reliability via intraclass correlation coefficients (ICC), and impact scores were compared with published data from the USA, Australia, Sweden, and Poland. Result(s): The OASES-T-F demonstrated strong internal reliability (alpha =.82-.95) and test-retest stability (ICC =.90-.93). Domain scores for general information, reactions to stuttering, and communication difficulties were moderate and aligned with other countries' data. Notably, the quality-of-life domain yielded significantly higher impact among Iranian adolescents. Conclusion(s): The OASES-T-F is a valid and reliable instrument for assessing stuttering in Farsi-speaking teens. Findings suggest that Iran's cultural context amplifies stuttering's social and emotional effects. Clinicians should integrate cultural considerations into assessment and intervention plans.Copyright © 2025 The Speech Pathology Association of Australia Limited.

140. The Impact of Hospitals on Language Learning: A Case Study of a 3-Year-Old Boy With Developmental Delay Who Needed Augmentative and Alternative Communication.

Gormley Jessica Fiala Maryjan Weis Emma Light Janice. *American Journal of Speech-Language Pathology* 2026;35(5): 1912-1927.
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PURPOSE: The purpose of this pilot study was to describe the language learning contexts experienced by a young child with global developmental delays and limited speech during an inpatient stay., METHOD: An observational case study was completed to describe the language learning contexts during the inpatient stay of a 3-year-old child with global developmental delay. Six health care providers participated and interacted with him during the 16-hr observational period over two consecutive days. Interactions were video-recorded and coded, and researcher memos were used to describe environmental variables., RESULTS: During the observation period, the child interacted with at least one adult partner for a total of 6 hr. During the remaining 10 hr, he did not have human contact. His stay was characterized by extended periods without adult interaction interspersed with concentrated periods of linguistic input by providers during activities related to medical procedures, mealtimes, daily care, and therapy sessions. Providers were generally unfamiliar with his signals, preferences, and routine. They demonstrated general responsiveness during caregiving activities and positive affect during most interactions but responded inconsistently to his unique presymbolic communication signals., CONCLUSIONS: Findings suggest that characteristics associated with the hospital experience-extended periods without adult interaction, limited access to familiar communication partners, and inconsistent responses to nonsymbolic communication-may constrain language learning opportunities for children with limited speech. These results underscore the need for developmentally appropriate strategies (e.g., adult interaction, consistent routines, augmentative and alternative communication access) to support communication access and optimize language outcomes in hospitals., SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.32942690.

141. The Relationship Between Dynamic Assessment of Analogical Reasoning and Syntax in French-Speaking Children With and Without Developmental Language Disorder

Hadjadj O. Kehoe M. Hessels M.G.P. Delage H. *American journal of speech-language pathology* 2026; 1-30.
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PURPOSE: According to usage-based theories of language development, typically developing (TD) children rely on analogical reasoning (AR) to learn syntactic structures. However, children with developmental language disorder (DLD) demonstrate difficulties in AR, which could contribute to explaining their difficulties in acquiring syntactic structures. While previous studies have reported no link between

nonverbal AR and syntax using static assessment, we shifted focus onto dynamic assessment to explore the relationship between these two domains' learning potential in a French-speaking population. METHOD(S): Ninety-seven TD children (25 bilingual) and 98 children with DLD (40 bilingual; Mage = 8;8 [years;months]) were assessed by using (a) a static task of AR; (b) a static task of syntax; (c) a dynamic task of AR, with prompts assisting the learner to analyze the analogy required to complete the matrix; and (d) a dynamic task of syntax targeting six structures, with prompts based on syntactic priming. RESULT(S): Children with DLD scored lower than TD children on all our measures, except when considering the progression within the dynamic task of AR, where children improved similarly. Static syntactic skills were not linked to AR ones, unlike dynamic syntactic skills that were predicted by AR, mainly in children with DLD. Only the production of the most complex syntactic structure was marginally impacted by AR in TD children. CONCLUSION(S): Higher learning potential in AR predicts higher learning potential in syntax in children with DLD. Therefore, more preserved skills in AR could predict less severe difficulties in syntax in this population. These results could guide the design of future language interventions. SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.33407794.

142. The Use of a Visual Scene Display for the Acquisition of Manding in Young Children with Complex Communication Needs

Lorah E.R. Raley S.K. Maddox M. Moser W.P. Holyfield C. MacNeil S. Zastudil C. *Behavioral Sciences* 2026;16(8): 1384.
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The purpose of the study was to evaluate the use of an artificial intelligence (AI)-powered visual scene display (VSD) prototype, with a time delay, least-to-most prompting, and reinforcement in the acquisition of a mand repertoire for three preschool-aged children with complex communication needs (CCN), including those with suspected or confirmed autism diagnoses. A non-concurrent multiple baseline design across participants was used to evaluate the effects of the VSD on independent manding. All three participants' results suggest increases in independent manding following the introduction of the intervention. Brianna met the mastery criterion within nine intervention sessions, while Nick and Vera met the mastery criterion within nine and thirteen intervention sessions, respectively. Maintenance data suggested continued independent manding for two of the three participants following intervention. Results are consistent with previous research supporting the use of VSDs with young children with CCN and extend this literature by providing preliminary evidence for the use of AI-powered VSDs to support mand acquisition. Limitations of the prototype technology, clinical implications, and future directions are discussed. Copyright © 2026 by the authors.

143. The use of AAC by children with autism in special education classrooms in Malaysia: perspective of special education teachers and parents

Cheah H.B.L. Joginder Singh S. Ling I.J.Y. Ahmad Rusli Y. Andzik N.R. *AAC: Augmentative and Alternative Communication* 2026;
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Many children with autism remain non-verbal for long periods and require Augmentative and Alternative Communication (AAC) to communicate. Although AAC use in Malaysian clinical settings has increased, support for its implementation in public special education classrooms remains limited. This study explored parents' and special education teachers' perspectives on classroom AAC use. A qualitative design was utilized, involving four focus group discussions with 12 parents and 15 special education teachers from three special education schools in Malaysia. Data were transcribed and analyzed using qualitative content analysis. Three main themes emerged: views about AAC, barriers to implementation and facilitators for its use. Both groups acknowledged the benefits of AAC, including increased vocabulary and utterance length. Teachers reported improved classroom participation and reduced challenging behaviors, while parents observed better two-way communication and increased confidence in their children with autism. However, several barriers were identified. These included limited knowledge and skills, misconceptions about AAC, student-related challenges such as low motivation, and AAC system issues like insufficient vocabulary and device damage. Teachers also highlighted workplace challenges, including large class sizes, limited funding, and restrictive school policies. Facilitators included strong willingness to collaborate among stakeholders and a clear need for professional training. Overall, successful AAC implementation requires addressing systemic barriers and fostering multidisciplinary collaboration.Copyright © 2026 International Society for Augmentative and Alternative Communication.

144. The Utility and Robustness of Sentence Repetition as a Marker of Developmental Language Disorder: An Analysis of the Surrey Communication and Language in Education Study Project Data.

Ward Leah Bannard Colin Norbury Courtenay Polisenska Kamila. *Journal of Speech Language & Hearing Research* 2026;69(4): 1669-1685.
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PURPOSE: This study examined the diagnostic power and robustness of sentence repetition (SR) in distinguishing monolingual English-speaking children with developmental language disorder (DLD) from typically developing (TD) children, using a large-scale secondary analysis of the Surrey Communication and Language in Education Study data set. We evaluated SR's effectiveness across different scoring methods in age-matched groups across three different time points., METHOD: A total of 407 children were included. Bayesian beta regression models compared SR performance between groups across four scoring methods. SR's diagnostic accuracy was assessed using area under the curve (AUC), sensitivity, specificity, and likelihood ratios., RESULTS: Children with DLD consistently performed less

accurately than TD peers on SR tasks, with differences persisting across ages 5-11 years and across all scoring methods. AUC values indicated good to excellent discriminative ability, especially in younger groups, though sensitivity and specificity fell below clinical thresholds., CONCLUSIONS: These findings support SR's diagnostic potential as a reliable language measure. SR may serve as a valuable tool due to its ease of use and scoring flexibility, though additional assessments are recommended for comprehensive language evaluation., SUPPLEMENTAL MATERIAL: https://doi.org/10.23641/asha.31431517.

145. Understanding social anxiety in adolescents who stutter: A multi-informant study of the roles of stuttering severity, parenting styles, social participation and speech avoidance.

Levy Kardash Omer. *Journal of Communication Disorders* 2026;123 N.PAG-N.PAG.
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• Adolescents who stutter reported higher social anxiety than adolescents who do not stutter (child and parent reports). • In adolescents who stutter, speech avoidance predicted later social anxiety (child and parent reports). • In adolescents who stutter, stuttering severity was associated with parent-reported anxiety, but not beyond avoidance. • In adolescents who stutter, social participation was negatively related to social anxiety, but not beyond avoidance. • In adolescents who do not stutter, child social anxiety was related to avoidance; parent-reported anxiety to parenting styles. Adolescents who stutter are at increased risk for social anxiety, yet the factors underlying this vulnerability remain unclear. This study examined the contributions of stuttering severity, parenting styles, social participation, and avoidance of speech situations to social anxiety among adolescents who stutter compared with adolescents who do not stutter. Participants were 158 adolescents (79 who stutter and 79 who do not stutter) and their mothers. Adolescents who do not stutter were recruited as close friends or classmates of adolescents who stutter to enhance group comparability. Adolescents reported stuttering severity and avoidance of speech situations; parents reported parenting styles and social participation. Social anxiety was assessed using adolescent and parent reports. Analyses included paired-samples t tests, correlations, and regression models. Adolescents who stutter showed higher social anxiety than adolescents who do not stutter in both reports. Among adolescents who stutter, speech avoidance was associated with adolescent- and parent-reported social anxiety. Stuttering severity was associated with parent-reported social anxiety but was not significant beyond avoidance. Social participation was negatively associated with social anxiety but was not significant beyond avoidance. Among adolescents who do not stutter, adolescentreported social anxiety was associated with speech avoidance, whereas parentreported social anxiety was associated with authoritarian and permissive parenting styles. Speech avoidance emerged as the strongest correlate of social anxiety among adolescents who stutter. Interventions may benefit from targeting speech avoidance and promoting verbal engagement to help mitigate social anxiety in this population.

146. Uptake and Evaluation of a Crosslinguistic Nonword Repetition Test in Clinical and Research Contexts.

Polišenská Kamila Chiat Shula. *International Journal of Language & Communication Disorders (John Wiley & Sons, Inc.)* 2026;61(5): 1-10.
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Introduction: The Crosslinguistic Nonword Repetition Test (CL-NWR) was designed to accommodate the phonological diversity of human languages, providing a tool that may support the identification of Developmental Language Disorder (DLD) across different linguistic backgrounds. The test materials, including a PowerPoint game with recorded stimuli, administration guidelines, and scoring instructions, were available upon request. This study examines the uptake and application of the CL-NWR in clinical and research settings through a survey of individuals who have accessed the materials. The survey covered three main areas: (i) participant demographics; (ii) experience of using the CL-NWR task; and (iii) views on administration and scoring of the CL-NWR task. Methods: We explored views of CL-NWR users through an online survey delivered through the Qualtrics platform and distributed to 156 individuals who had requested CL-NWR materials up to November 2024. Follow-up reminders were sent at one- and two-week intervals to maximise response rates. Response formats included yes/no, multiple choice, Likert scales and open-ended text responses. Survey data were analysed through descriptive statistics and content analysis of open-ended questions. Results: A total of 109 respondents from 36 countries completed the survey, yielding a response rate of 70%. The test was most commonly used with multilingual children and those with suspected DLD. Notably, 92% of respondents indicated that the CL-NWR made a valuable contribution to their assessments. Qualitative responses highlighted its practical benefits as well as areas for refinement. Conclusion: The high response rate and overwhelmingly positive feedback suggest a high level of engagement and interest in the CL-NWR, particularly in multilingual populations. These findings will inform future developments of the CL-NWR test, ensuring its continued relevance and effectiveness in both clinical and research applications. The study also underscores the value of crosslinguistic tools in supporting equitable language assessment worldwide. WHAT THIS PAPER ADDS: What is already known on this subjectNonword repetition tasks are widely used to support the identification of Developmental Language Disorder across languages. The Crosslinguistic Nonword Repetition Test (CL-NWR) was developed as a language-neutral tool for multilingual populations, and a growing body of research has reported findings from diverse samples using the task. However, its uptake, usability, and application in clinical and research settings have not yet been systematically evaluated.What this study adds to existing knowledgeThis study provides the first large-scale evidence of global uptake and application of the CL-NWR across clinical and research contexts. Findings show high levels of use, particularly with multilingual children, and strong perceived value in assessment. The results highlight both the practical utility of the tool and areas for further development.What are the clinical implications of this study?The CL-NWR is a feasible and valuable tool for supporting language assessment, particularly in linguistically diverse populations. The identified need for clearer guidance on administration, scoring, and

developmental norms has informed the provision of additional materials and access instructions, supporting more consistent and informed use in clinical and research practice.

147. Using latent profiles to evaluate response to a language-based intervention

Capin P. Mesite L. Fall A.-M. Sainsbury R. Gillam S. Hall C. Gillam R. *Annals of Dyslexia* 2026;76(2): 364-388.
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Many children with oral language difficulties also experience challenges with word reading, as evidenced in the high comorbidity rate between developmental language disorders and dyslexia. The current study investigated a sample of students (n = 357) with language and literacy difficulties classified into latent classes based on pre-intervention performance on word reading and listening comprehension measures. Specifically, this study sought to determine the extent to which latent classes responded to an evidence-based, narrative language program at immediate post-test and a five-month follow-up time point, and whether performance varied as a function of class membership. Findings revealed that students in all latent profiles showed statistically significant improvements in narrative language at post-test, a primary target of the intervention. However, intervention effects varied at a five-month follow-up time point, with students with the greatest listening comprehension and word reading difficulties showing the most notable gains. Instructional response also varied according to performance on a narrative writing measure. These findings suggest that assessing initial performance on key variables may be able to help educators predict student response and adapt intervention plans to more effectively meet individual needs.Copyright © The Author(s), under exclusive licence to Springer Science+Business Media, LLC 2026.

148. Validating the Screening Tool for Autism in Toddlers and Young Children (STAT) in children aged 24-36 months in a low- to middle-income setting

Nguyen T.B.N. Ngo H.K.T. Dinh G. Nguyen A.N. *Egyptian Pediatric Association Gazette* 2026;74(1): 116.
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More details

Autism spectrum disorder (ASD) prevalence is increasing globally, including in low- and middle-income settings. Early screening is essential; however, screening tools require local validation. The Screening Tool for Autism in Toddlers and Young Children (STAT) has been incorporated into Vietnam's Ministry of Health guidelines, yet its diagnostic performance has not been formally evaluated. This cross-sectional study validated the STAT among 86 children aged 24-36 months with language delay attending a tertiary pediatric hospital in Ho Chi Minh City between December 2022 and August 2023. STAT results were compared with DSM-5-based clinical diagnoses, the diagnostic reference standard. The STAT was administered by certified speech therapists, and STAT results were not disclosed to the child psychologist conducting the DSM-5-based diagnostic evaluation. Diagnostic accuracy indices and receiver operating characteristic (ROC) analysis were performed to evaluate diagnostic performance and explore alternative cut-off values. The findings showed a predominance of male children (65.1%) and a high prevalence of ASD (74.4%). At the recommended cut-off of >= 2, STAT demonstrated high sensitivity (89.1%) but moderate specificity (50.0%), with positive and negative predictive values of 83.8% and 61.1%, respectively. The area under the ROC curve was 0.7656 (95% CI: 0.639-0.883), indicating fair overall discriminative ability. In an exploratory analysis, a data-derived cut-off of 2.5 yielded the highest Youden Index, with sensitivity of 73.4% and specificity of 68.2%. The exploratory 2.5 threshold requires independent validation before any change to the recommended >= 2 threshold is considered. Overall, these findings provide preliminary evidence supporting the existing STAT cut-off of >= 2 in similar high-risk clinical populations, while larger multicenter and community-based studies are needed to confirm the performance and generalizability of this cut-off.Copyright © The Author(s) 2026.

149. Variability of Preschool Stuttering During a Day.

Onslow Mark Thambyaiyah Jessica O'Brian Sue Packman Ann Lowe Robyn. *American Journal of Speech-Language Pathology* 2026;35(5): 2107-2114.
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More details

Purpose: Severity ratings (SRs) of children's stuttering assigned by parents and speech-language pathologists (SLPs) have advantages over methods based on stuttering counts. They are valid, simple, and convenient; without cost; and can be used without the child's awareness. The aim of this project was to study, for the first time, the use of an SR scale by parents and SLPs to track stuttering severity for pre-school children over a typical day. For that purpose, we used 10 case studies. Method: Participants were 10 preschool children who stuttered (3-4 years of age) and their parents. Each child's speech was audio-recorded by their parent for an entire day at home, commencing at approximately 8:00 a.m. During that day, an SLP made a randomly timed phone call, during which a 10-min sample of the child's speech was audio-recorded. At the end of the day, both before and after training in the use of a 10-point scale, parents assigned a "typical" SR score for their child's speech for the day. An independent SLP later assigned an SR to each 15-min segment of each child's recording from across the day. Results: The severity of all children's stuttering varied throughout the day, and in more than half the children, it varied by as much as 4-6 SR scale values. SRs showed no consistent trend of stuttering increasing or decreasing during the day. There was close correspondence between parent- and SLP-assigned SRs for the day. Parent training in the use of the scale, which occurred at the end of the day of recording, did not change that correspondence. A random 10-min speech sample provided a reasonably valid SR score to represent typical stuttering for the entire day. Conclusion: These findings can be

applied in clinical and research contexts where measurement of early stuttering may be used to monitor a child's speech for a substantive period.

150. Verbal Mediation During Shifting in School-Aged Children With Developmental Language Disorder

Baron L.S. Black K.B. Schafer A.L. Gul A. Fox A.B. Arbel Y. *Journal of speech, language, and hearing research : JSLHR* 2026; 1-13.
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PURPOSE: Children with developmental language disorder (DLD) often exhibit deficits in executive function. These deficits may be linked to less effective verbal mediation or the use of self-directed language to guide task performance. This study examined the role of verbal mediation during an executive shifting task. METHOD(S): Twenty-seven children aged 8-12 years (15 with DLD, 12 with typical development [TD]) completed a cued local-global task with verbal mediation (baseline) and without (articulatory suppression). Shifting performance was measured as accuracy and reaction time. Trial-type contrasts for mixing costs (general task demands) and switching costs (trial-level shifting) were examined. Analyses controlled for age and selective attention. RESULT(S): Children with DLD responded more slowly than their peers with TD but achieved comparable accuracy. All children were slower and less accurate during articulatory suppression compared to baseline. A significant three-way interaction for accuracy indicated that mixing costs were larger for children with DLD than TD at baseline, but they were the same under articulatory suppression. Two-way interactions for reaction time indicated that mixing costs were larger in the DLD group than the TD group and larger during articulatory suppression than baseline. CONCLUSION(S): The detrimental effect of articulatory suppression was greater for children with TD than children with DLD, which suggests that language ability contributed to executive function task performance. Verbal mediation may play a larger role in sustaining task goals than in making trial-level switching decisions during shifting tasks. There is a need to further explore verbal mediation mechanisms contributing to executive function in DLD.

151. Virtual adaptation of Camp Dream. Speak. Live.: Clinical outcomes of an intensive CARE Model intervention for children who stutter.

Byrd Courtney T. Coalson Geoffrey A. Werle Danielle Albaum Robyn L. C Winters Katie L. Young Megan M. *International Journal of Speechlanguage Pathology* 2026;28(5): 1019-1033.
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More details

PURPOSE: Camp Dream. Speak. Live. is an intensive, strengths-based, manualised treatment program for children who stutter, with no indirect or direct fluency goals. This study determined the effectiveness of a virtual adaptation of Camp Dream. Speak. Live. in reducing the adverse impact of stuttering and increasing communication competence., METHOD: Sixty-one children who stutter (ages 3 to 17 years) participated in Virtual Camp Dream. Speak. Live. pre- and post-treatment measures were identical to previous in-person administrations: (a) Self- and caregiver-report of cognitive and affective impact of stuttering (Communication Attitude Test for Children who Stutter, Overall Assessment of Speaker's Experience of Stuttering, PROMIS Paediatric Peer Relationship, and PROMIS Parent Proxy Relationships) and (b) unfamiliar clinician ratings of communication competence of impromptu presentations., RESULT: Significant post-treatment gains observed one week after treatment were reported for the Communication Attitude Test for Children who Stutter ($p < .05$), Overall Assessment of Speaker's Experience of Stuttering ($p < .001$), and PROMIS Peer Relationships Parent Proxy ($p < .05$). Significant gains in post-treatment communication competence were observed for seven of nine competencies (p-value range: .01 to .02). Pre-treatment stuttering frequency did not significantly predict changes in communication competence., CONCLUSION: Findings from Virtual Camp Dream. Speak. Live. demonstrate that the administration of the adapted telepractice format of this manualised program yields comparable findings as when administered in-person, suggesting promising implications when in-person provision and/or access is not feasible.

152. Virtual Reality Attention Tasks in Attention Deficit Hyperactivity Disorder: I. Behavioural Responses.

Kazazi Fjorda Howell Peter. *European Journal of Neuroscience* 2026;64(6): e70691.
Check for full-text availability

More details

Differences in executive functioning associated with working memory and different components of attention including sustained, selective, divided and attentional switching have been reported in people with attention deficit hyperactivity disorder. Traditional laboratory tasks have limited ecological validity, whereas existing virtual reality studies have focused mainly on sustained attention, with multi-attention-form assessment remaining relatively unexplored. Sixty-four participants (34 people with self-reported attention deficit hyperactivity traits and 30 neurotypical participants) were included. Participants were tested for stuttering, attention deficit hyperactivity disorder traits and phonological working memory and then completed 10 virtual reality tasks that measured all four forms of attention. The self-reported attention deficit hyperactivity disorder group showed significantly lower attention scores, higher stuttering scores and lower phonological working memory scores. Behavioural results from the virtual reality tasks revealed that this group differed in sustained attention. Lower accuracy, higher omission error rates and reduced sensitivity occurred in this group in the traditionally formatted task based on the continuous performance test (Task 2). Logistic regression showed that all measures, except for sensitivity in Task 2, significantly predicted group membership. Results from the questionnaires indicated that overall, all participants felt present and immersed in the tasks. Findings suggest that attentional differences are form-specific and mostly

observed under sustained attention tasks. Virtual reality can be used as an ecologically valid tool for detecting form-specific attentional differences under real-life scenarios. Copyright © 2026 The Author(s). European Journal of Neuroscience published by Federation of European Neuroscience Societies and John Wiley & Sons Ltd.

153. Visual Perspective Taking Training Improves Theory of Mind in Autistic Children

Tian M. Cao S. Li X. Xia W. Cheung H. Xiao X. Luo T. *Autism Research* 2026;19(8): e70309.
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More details

Autistic children exhibit developmental differences in theory of mind (ToM), which is associated with social impairment. While numerous interventions have targeted other ToM precursor skills, few studies have explored the effect of visual perspective taking (VPT) training on ToM. The present study aims to investigate the effectiveness of VPT training on ToM in autistic children. Sixty-six autistic children were initially recruited and randomly assigned to three groups. Forty-eight children (mean age = 5.75 years) completed the study and were included in the final analyses, comprising the VPT training group (n = 16), thought-bubble training group (n = 16), and control group (n = 16). Each training comprised 12 sessions of 30 min. Both the VPT and thought-bubble training groups demonstrated significant improvements in VPT and ToM compared to the control group. The present study is the first to directly examine the effectiveness of VPT training using table blocks in enhancing ToM performance in autistic children, thereby providing a novel approach for ToM development. Copyright © 2026 International Society for Autism Research and Wiley Periodicals LLC.

154. Vocabulary Breadth and Depth in Adults With Developmental Language Disorder

Wang T. Hilker C. Duff D. Hendrickson K. *Journal of Speech, Language, and Hearing Research* 2026;69(8): 3892-3904.
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More details

Purpose: Developmental language disorder (DLD) affects approximately 7%-11% of children and often persists into adulthood, contributing to long-term challenges in education, employment, and health. Although vocabulary challenges are welldocumented in children with DLD, relatively little is known about how these difficulties manifest in adulthood. The current study examines vocabulary knowledge in adults with DLD along two dimensions: Breadth (the number of words for which an individual can retrieve a meaning) and depth (quality of semantic knowledge for known words). Method(s): Vocabulary breadth was assessed using the standardized Peabody Picture Vocabulary Test-Fifth Edition (PPVT-5), while a novel scoring system was developed to evaluate vocabulary depth in a well-documented definition task (Wechsler Abbreviated Scale of Intelligence-Second Edition [WASI-II] Vocabulary subtest). Linear regression analyses were conducted to examine group differences between adults with DLD and peers with typical language (TL). Result(s): Adults with DLD (n = 39) scored significantly lower than did their peers with TL (n = 57) on both vocabulary breadth and depth. The vocabulary breadth measure (PPVT-5) yielded a numerically larger effect size than did the vocabulary depth measure (WASI-II). Conclusion(s): These findings characterize the long-term development of vocabulary skills in adults with DLD and highlight the importance of considering both vocabulary breadth and depth when assessing language profiles in adulthood.Copyright © 2026 American Speech-Language-Hearing Association.

155. Vocabulary performance of Malay school-age children in Malaysia: Starting points to developing language assessments for older children with developmental language disorder (DLD)

Tan L.J.N. Ahmad Rusli Y. Lee M.-L. Ab Rasat N.N.S. Rosdin R. Lourdes A.K. Mohd Ibrahim H. *International Journal of Speech-Language Pathology* 2026;28(4): 723-739.
Check for full-text availability

More details

Purpose: The unavailability of language assessments for older Malay children in Malaysia has turned the identification and management of children with language disorders into an arduous process. This has left many children with developmental language disorder undiagnosed and without proper support. This study aims to evaluate the utility of a vocabulary assessment designed for Malay school-age children who predominantly use Malay, focusing on comparisons between typically developing and children at-risk of language disorder to determine whether it can differentiate and highlight qualitative nuances between groups. Method(s): A total of 118 typically developing children aged 6;0 to 12;11 years (M = 109.20 months; SD = 19.35) completed a newly developed picture pointing receptive and word definition expressive vocabulary task. A small group of children at-risk of language disorder were then matched with typically developing children (n = 15) for comparison. Result(s): Both receptive and expressive subtests showed good reliability (alpha = 0.881; alpha = 0.915 respectively). Findings revealed that vocabulary scores increased with age and that children at-risk of language disorder had significantly poorer scores and qualitative responses compared to their typically developing peers. Conclusion(s): The vocabulary assessment demonstrates potential for evaluating vocabulary skills among Malay school-age children, with further research needed to establish reference scores for speech-language pathology therapeutic clinical application.Copyright © 2025 The Speech Pathology Association of Australia Limited.

156. What do they say and how? A comparative syntactic characterization of children with and without Developmental Language Disorder in European Portuguese.

Azevedo Mafalda Martins Alexandrina Lousada Marisa. *Journal of Communication Disorders* 2026;123 N.PAG-N.PAG.

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More details

• Multidimensional narrative LSA delineates the syntactic profile of DLD in European Portuguese. • Children with DLD show reduced productivity, diversity, complexity and accuracy. • Clause embedding, relative clauses, and clitic production were restricted in the DLD group. • LSA measures of productivity, diversity, and accuracy align with standardized syntactic tests. • Narrative LSA emerges as a sensitive clinical tool for syntactic assessment in EP. Syntactic difficulties are widely reported in children with Developmental Language Disorder (DLD), yet detailed evidence from European Portuguese (EP) remains scarce. Language Sample Analysis (LSA) offers an ecologically valid approach to examining children's syntactic production; however, its application requires language-specific data and validated, multidimensional measures. This study aimed to provide a detailed syntactic comparison between children with DLD with syntactic impairment and typically developing (TD) peers acquiring EP, using a multidimensional LSA framework complemented by standardized assessments. Thirty-two children (60.22 ± 8.04 months) with DLD were individually matched to 32 TD peers (60.50 ± 5.96 months) on age, sex, and socioeconomic status. All participants produced picture-based narratives, which were segmented into C-units and coded for syntactic productivity, complexity, diversity, accuracy, and the production of specific structures. Group differences and associations among LSA measures and between standardized assessments were analyzed. Across all dimensions, children in the DLD group produced significantly shorter utterances ($t(62) = 6.91$, $p < .001$, $d = 1.73$), fewer multi-argument predicates, lower syntactic diversity, and less subordination than their TD peers. Accuracy differences were large (PGU: TD.96 vs. DLD.62), with error patterns dominated by omissions and structural errors. Several syntactic constructions that emerged in TD narratives were not observed in the narratives produced by children in the DLD group. LSA measures showed moderate-to-strong correlations with standardized assessment scores, supporting their convergent validity. These findings provide a detailed characterization of syntactic production in EP-speaking children with DLD with syntactic impairment, and underscore the value of multidimensional LSA for identifying clinically relevant syntactic vulnerabilities that may not be fully captured by standardized assessments.

157. When Silence Masks Autism: Delayed Autism Diagnosis in an Adolescent With Deafness

King S.E. Ryst E. *Case Reports in Psychiatry* 2026;2026(1): 8974477.
Check for full-text availability

More details

A 13-year-old adolescent male was referred for an interdisciplinary autism assessment. His complex medical history included a traumatic delivery (with drop in heartrate and nuchal cord), neonatal hyperbilirubinemia, diagnosis of profound congenital hearing loss, diminished bile ducts on liver biopsy at 1 month of age, and a seizure disorder. Later, he was diagnosed with a significant global developmental delay with minimal communication in any modality. The youth received cochlear implants at the age of 2 years but was unable to tolerate them. Despite early intervention services and multiple stays in urban academic medical centers, he was not considered for a diagnosis of autism because his problematic behaviors, sensory sensitivities, and social and communication delays were attributed to his hearing loss and intellectual disability. It was not until the age of 13 that he was confirmed to have autism via a comprehensive interdisciplinary assessment based on adapted, standardized, evidence-based tools and expert clinical observations. This case highlights the importance of understanding and identifying the differences between hearing loss related behaviors and possible symptoms of a co-occurring neurodevelopmental disorder as well as the peril of diagnostic overshadowing in children with hearing loss.Copyright © 2026 Stephanie E. King and Erika Ryst. Case Reports in Psychiatry published by John Wiley & Sons Ltd.

D. Search strategy

Ovid Emcare <1995 to 2026 Week 38>
Ovid Emcare <2025 Week 45 to 2026 Week 38> (updates since 2026-09-02) - (28 records)

https://gbr01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fovidsp.ovid.com%2Fovidweb.cgi%3FT%3DJS%26CSC%3DY%26MODE%3Dovid%26PAGE%3Dtitles%26NEWS%3Dn%26D%3Demcr%26AUTOALERT%3D365223420&data=05%7C02%7Cadam.tocock%40nhs.net%7C6851133f492643e5963c08df1fa05258%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C639264445667577501%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=b0GX6vw%2F32zZQaMB2kC8TS2WRjnTQuOi3Ui5blC9%2FXI%3D&reserved=0

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003	1 or 2	349
004	exp speech sound disorder/	102

005 speech sound disorder*.tw,kf. 64
006 4 or 5 104
007 (stammer* or stutter*).tw,kf. 150
008 exp stuttering/ 146
009 7 or 8 162
010 3 or 6 or 9 607
011 autis*.tw,kf. 3575
012 exp autism/ 3924
013 11 or 12 4226
014 bilingual*.tw,kf. 609
015 exp bilingualism/ 175
016 14 or 15 624
017 ((parent* or teacher*) adj3 coach*).tw,kf. 121
018 (exp school teacher/ or exp parent/) and exp coaching/ 54
019 17 or 18 149
020 13 or 16 or 19 4947
021 exp "speech and language rehabilitation"/ 854
022 exp speech language pathologist/ 727
023 (((speech or language) adj2 (therap* or patholog*)) or SLT). tw,kf. 1155
024 21 or 22 or 23 1754
025 20 and 24 196
026 10 or 25 784
027 limit 26 to (infant <to one year> or child <unspecified age> or preschool child <1 to 6 years> or school child <7 to 12 years> or adolescent <13 to 17 years>) 525
028 limit 27 to updaterange="emca(20260902163407-20260925230629] 28"

Embase <1974 to 2026 September 29>
Embase Clinical Trials (updates since 2026-09-01) - (12 records)
Embase <1974 to 2026 September 29>
Embase Daily Updates (updates since 2026-09-01) - (11 records)
Embase <1974 to 2026 September 29>
Embase Weekly Updates (updates since 2026-09-01) - (87 records)
Embase <1974 to 2026 September 29>
Embase Preprint (updates since 2026-09-01) - (1 records)

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Set Search Results
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001 exp *developmental language disorder/ 322
002 Developmental Language Disorder*.ti,kf. 160
003 1 or 2 326
004 exp *speech sound disorder/ 104
005 speech sound disorder*.ti,kf. 77
006 4 or 5 108
007 (stammer* or stutter*).ti,kf. 216
008 exp *stuttering/ 209

009 7 or 8 219
010 3 or 6 or 9 638
011 autis*.ti,kf. 7387
012 exp *autism/ 6028
013 11 or 12 7836
014 bilingual*.ti,kf. 366
015 exp *bilingualism/ 148
016 14 or 15 366
017 ((parent* or teacher*) adj3 coach*).tw,kf. 306
018 (exp school teacher/ or exp parent/) and exp coaching/ 84
019 17 or 18 348
020 13 or 16 or 19 8452
021 exp "speech and language rehabilitation"/ 1671
022 exp speech language pathologist/ 890
023 (((speech or language) adj2 (therap* or patholog*)) or SLT). 2449
tw,kf.
024 21 or 22 or 23 3132
025 20 and 24 196
026 10 or 25 818
027 limit 26 to (infant <to one year> or child <unspecified age> 607
or preschool child <1 to 6 years> or school child <7 to 12
years> or adolescent <13 to 17 years>)
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Ovid MEDLINE(R) ALL <1946 to September 30, 2026>
Ovid MEDLINE(R) <July Week 05 2026 to September Week 4 2026> (updates since 2026-08-31) - (79 records)
Ovid MEDLINE(R) ALL <1946 to September 30, 2026>
Ovid MEDLINE(R) Epub Ahead of Print <September 30, 2026> (updates since 2026-08-31) - (no records)
Ovid MEDLINE(R) ALL <1946 to September 30, 2026>
Ovid MEDLINE(R) Daily Update <September 30, 2026> (updates since 2026-08-31) - (13 records)
Ovid MEDLINE(R) ALL <1946 to September 30, 2026>
Ovid MEDLINE(R) PubMed-not-MEDLINE <September 30, 2026> (updates since 2026-08-31) - (no records)
Ovid MEDLINE(R) ALL <1946 to September 30, 2026>
Ovid MEDLINE(R) In-Process & In-Data-Review Citations <September 30, 2026> (updates since 2026-08-31) - (no records)

https://gbr01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fovidsp.ovid.com%2Fovidweb.cgi%3FT%3DJS%26CSC%3DY%26MODE%3Dovid%26PAGE%3Dtitles%26NEWS%3Dn%26D%3Dmedall%26AUTOALERT%3D365223456&data=05%7C02%7Cadam.tocock%40nhs.net%7Caa1e544fc0ec4ac85afc08df1fa05480%7C37c354b285b047f5b22207b48d774ee3%7C0%7C1%7C639264445790601026%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=JipSZjBEFTcoFQxJGoJpk%2BXPSn0W3CU3DOMMNKj7R20%3D&reserved=0

Set Search Results
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001 exp Language Development Disorders/ 106
002 Developmental Language Disorder*.tw,kf. 183
003 1 or 2 233
004 exp Speech Sound Disorder/ 19
005 speech sound disorder*.tw,kf. 60
006 4 or 5 62
007 exp Stuttering/ 54
008 (stammer* or stutter*).tw,kf. 188

009 7 or 8 188
010 3 or 6 or 9 478
011 Autistic Disorder/ 548
012 autis*.tw,kf. 6990
013 11 or 12 6996
014 exp Multilingualism/ 228
015 bilingual*.tw,kf. 939
016 14 or 15 1044
017 ((parent* or teacher*) adj3 coach*).tw,kf. 108
018 (exp Parents/ or exp School Teachers/) and exp Mentoring/ 13
019 17 or 18 112
020 13 or 16 or 19 8098
021 exp "Rehabilitation of Speech and Language Disorders"/ 144
022 exp Speech-Language Pathology/ 104
023 (((speech or language) adj2 (therap* or patholog*)) or SLT). tw,kf. 1423
024 21 or 22 or 23 1490
025 20 and 24 102
026 10 or 25 567
027 limit 26 to "all child (0 to 18 years)" 171
028 limit 27 to updaterange="medl(20260831221230-20260930223947] ,medp(20260831221230-20260930215941],mesx(20260831221230-20260930203102],pmnm(20260831221230-20260930215643],prem(20260831221230-20260930220240]" 92

CINAHL searched via Ebscohost:

((((((XB (stammer* or stutter*))) OR ((MH "Fluency Disorders")))) OR ((((XB (speech sound disorder*))) OR ((MH "Articulation Disorders, Organic+")))) OR ((((XB (Developmental Language Disorder*))) OR ((MH "Language Development" AND MH "Language Disorders+")))))) OR ((((((MH "Rehabilitation, Speech and Language+")) OR ((MH "Speech-Language Pathology")) OR ((XB (((speech or language) N2 (therap* or patholog*)) or SLT))))) AND ((((((XB (autis*))) OR ((MH "Autism Spectrum Disorder")))) OR ((((XB (bilingual*))) OR ((MH "Multilingualism")))) OR (((((MH "Parents+" OR MH "Teachers") AND MH "Mentorship")) OR ((XB ((parent* or teacher*) N3 coach*)))))))))

Results: 6,168 before date limit of 09/2026 added, 31 after date limit added.

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