

Program Abstract

Overview

Specific expressive language delay (ELD) is an early childhood condition characterized by a substantial delay in a child's development of spoken language relative to receptive language skills and non-verbal intelligence. For example, a young child who is diagnosed with ELD may understand complete sentences but is unable to produce language at age-appropriate levels. The Expressive Language Delay (ELD) Treatment Program is a home- and clinic-based intervention that trains parents of young children diagnosed with ELD, with skills to improve their child's expressive language abilities. The ELD Treatment Program consists of seven 30-minute training sessions, in which parents receive training on seven language therapy skills. Parents are asked to practice each of these skills at-home with their child during the two-week intervals between training sessions. The evaluation of the ELD Treatment Program demonstrated short-term success in helping to improve the expressive vocabulary skills of children diagnosed with ELD.

Staffing Requirement/ Training

Clinical staff must have experience in parent training and in the treatment of developmental and behavioral disorders in order to implement this program.

Program Materials

This EIPARDD program package contains one complete set of curriculum materials needed to implement this program including:

- 1) Program Summary
- 2) Facilitator's Manual
- 3) Steps to Follow – Sessions 1 through 7
- 4) Written Assignments for Parents (7 total)
- 5) Evaluation Measures Resource List
- 6) Early Intervention Evidence-Based Practice Resource Guide

Program Abstract (continued)

FOCUS

- | | | | | | |
|--------------------------|-------------------------------------|-------------------------------------|---|--------------------------|--|
| <input type="checkbox"/> | General population | <input type="checkbox"/> | Psychosocial risk factors | <input type="checkbox"/> | Risk factors during pregnancy or birth |
| <input type="checkbox"/> | Physical impairment or disadvantage | <input checked="" type="checkbox"/> | Cognitive or language delay or disorder | <input type="checkbox"/> | Autism spectrum disorders |

Delivery

- Center-based
- Home-based
- Other: Clinic-based

Direct Participants

- Child
- Parent
- Child and Parent together

Child's Age at Start of Program

- | | | | | | |
|--------------------------|------------------------|--------------------------|-----------------|-------------------------------------|-----------------|
| <input type="checkbox"/> | Pre-Birth to 12 months | <input type="checkbox"/> | 12 to 24 months | <input checked="" type="checkbox"/> | 25 to 36 months |
|--------------------------|------------------------|--------------------------|-----------------|-------------------------------------|-----------------|

Duration

- Up to 3 months
- 4 to 12 months
- 13 to 24 months
- 25 to 36 months
- More than 36 months

Program Abstract (continued)

Evaluation Design

The evaluation of the Expressive Language Delay (ELD) Treatment Program utilized a quasi-experimental design that compared the outcomes of children who received a home-based treatment program for expressive language delay with the outcomes of children in the control group who did not receive the program. The primary outcomes evaluated in this study were child receptive vocabulary, expressive vocabulary, expressive verbal fluency, and articulation of vowels, consonants, and consonant clusters. Secondary outcomes of the study included an assessment of the prevalence of children who received community-based speech or language therapy services, an audiological assessment, and measures of intelligence.

Study Participants

Researchers enrolled a total of 94 children (ages 2 to 3) who were diagnosed with expressive language delay. This diagnosis of ELD included a testing profile consistent with substantial delay in expressive language skill for chronological age, with no accompanying deficit in receptive language skill or general cognitive skill, and no evidence of autistic disorder, pervasive developmental disorder, or apparent physical disability.

Assessments

Children participating in the study were assessed at the following four time points:

- 1) Pre-test
- 2) 6-month follow-up
- 3) 16-month follow-up
- 4) 37-month follow-up

This study utilized the following assessment measures:

- 1) Peabody Picture Vocabulary Test - Revised (PPVT)
- 2) Expressive One-Word Picture Vocabulary Test (One-Word)
- 3) Expressive subscale of the Illinois Test of Psycholinguistic Abilities (ITPA)
- 4) Templin-Darley Tests of Articulation, Second Edition
- 5) Audiological assessment
- 6) Leiter International Performance Scale
- 7) Wechsler Preschool and Primary Scale of Intelligence

Program Abstract (continued)

Summary of Results

The Expressive Language Delay (ELD) Treatment Program, a home- and clinic-based intervention that teaches parents skills to improve their child's spoken language ability, has demonstrated short-term success in helping to improve the expressive vocabulary skills of children diagnosed with ELD. Success is defined as substantial increases in expressive language skills during and immediately subsequent to treatment when compared with the control group. In contrast to the children in the control group, children in the ELD Treatment Program demonstrated substantial increases in their expressive vocabulary skills, which moved to a normal range at the 34-month follow-up assessment. However, by 44 months of age, the differences between the control and intervention group disappeared; both groups moved to the normal range despite their participation in the intervention. The study did not show long-term significant differences between treatment and control group in regard to their phonological problems. Thus, the ELD treatment program was effective in improving vocabulary skills immediately after treatment.

The EIPARDD Program Package

The ELD Treatment Program was selected by an Expert Panel of research scientists for inclusion in Sociometrics' *Early Intervention Program Archive to Reduce Developmental Disability (EIPARDD)*. The curriculum materials were obtained from the original developer of the program. Following acquisition of all materials, EIPARDD staff developed this *Program Summary*, assembled the evaluation resources, and prepared the EIPARDD program package. Finally, Sociometrics' archiving work was reviewed and approved by the original developer.

Contact Information

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Program Abstract (continued)

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