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Screening/ assessment in preschool children who stutter LogTest 4



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AIM(S) AND METHODS

- Early childhood stuttering is a common fluency disorder, which involves from 5 to 8% of children.
- The typical age of stuttering onset is 30–48 months with a mean of 33 months (Bloodstein & Ratner, 2008; Yari & Ambrose, 2005; 2013).
- For SLTs and other professionals it is challenging to identify children with risk factors for persistence of the stuttering (Pertijs et al., 2014; Costa, Ritto et al., 2022)
- Early intervention is very important, because it helps to prevent the negative impact of the stuttering to the child and family (ASHA 1994, 2006).

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SHORT INTRODUCTION

The form Screening test for persistent stuttering risk in preschool children (Faściszewska, 2022) its free.

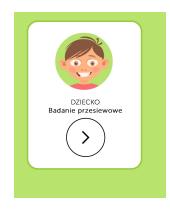
You have to log in page https://platforma.mtalent.pl/Learnetic/LogoTest_4

INCLUDES:

Parent Questionnaire is translated into Ukrainian, English, Russsian, Lithuanian etc

Child speech assessment any statement (words, sentences, narration) made by child may be recordered





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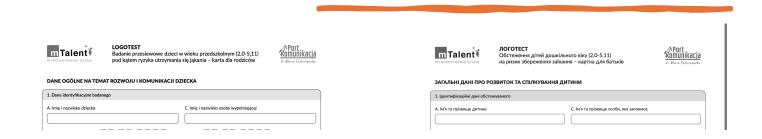
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SHORT INTRODUCTION

- Parent Questionnaire is translated into Ukrainian, English, Russsian, Lithuanian etc.
 - This screening can be completed by parents during the meeting.
 - It can also be sent to them by the SLT via email.
 - The average time to complete the questionnaire is approximately 15 minutes.
- This screening form is used to collect data and to start to be implemented in practice.



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RESULTS

Risk factors for the persistence of stuttering included in the questionnaire:

Data of child development and communication	Data of aspects of stuttering	Data of psychosocial aspects
	Presence of family history of stuttering	The child's awareness of stuttering
Gender	Most common disfluencies in child's speech	The child's response/ reaction to his/ her stuttering
Child language development	Time of occurrence and duration of stuttering behaviors	Parents'/carers' level of concern and anxiety
Developmental difficulties	Level of severity of stuttering symptoms (decrease, increase, remain at the same level)	Teassing/bullying
	Degrees of stuttering of severity (utterance, number of participations in communication, time pressure etc.)	Parents'/carers' attitude and reactions towards the child's speech
		Temperament

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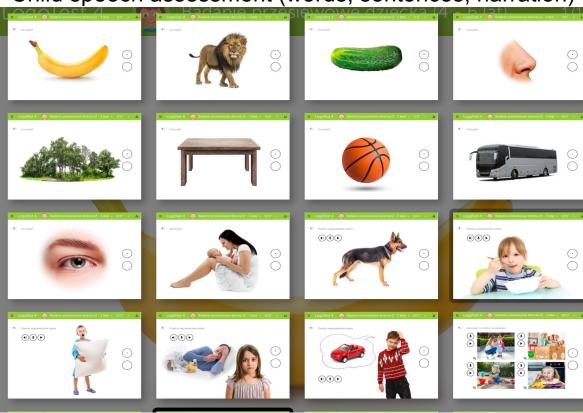
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RESULTS

Child speech assessment (words, sentences, narration)



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CONCLUSION:

- The aim of the screening is to help the speech therapist and the child's parents to decide
 on the further way to provide help for the child.
 - Four approaches are indicated:
 - 1) monitoring,
 - 2) consultation and counselling of the parents,
 - 3) referral for speech therapy diagnosis and therapy
 - 4) referral for consultation with other professionals.

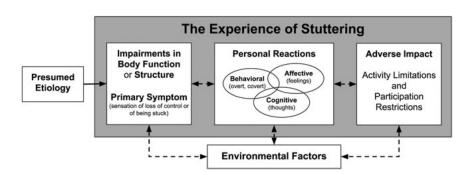
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CONCLUSION:

The questionnaire refers to the ICF model and to ASHA and Dutch recommendations (Pertijs, 2014)



Clinical Guideline

'Stuttering in Children, Adolescents and Adults'

This publication was initiated by:

NVST, Dutch Association for Stuttering Therapy
Demosthenes, Patient Association for (Parents of) Children, Adolescents and

Realisatio

СВО

Mandates:

NVLF, Dutch Association for Logopedics and Phoniatrics

NVST

Demosthenes

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