SECOND BIRTHDAY Report

OUR MISSION

FIRST WORDS Project is a model early identification and intervention program based in the Department of Communication Disorders at Florida State University. Staffed by speech-language pathologists and interdisciplinary consultants, we are funded to evaluate the communication development of children from 6 to 24 months of age in Leon County. For children who are delayed in communication development, we offer families a menu of service options at no cost to families or service providers, based on availability of grant funds. In addition to services provided in Leon County, we are developing educational materials for training of healthcare and childcare providers to build their capacities for earlier detection of communication problems in young children.

> IRST WORDS Project

Progress Report For Healthcare and Childcare Providers of Infants and Toddlers



WHY EARLIER IDENTIFICATION IS A CRITICAL NEED

Developmental delays in infants and toddlers are significantly under-identified, prohibiting early intervention for many children and families in need of services. Early intervention can prevent or decrease developmental delays in preschoolers, enhance school readiness, and increase academic success in school-age children.

- Every dollar spent on early intervention is estimated to save \$7.16 in later special education, crime, and welfare costs.
- Language development is one of the most critical school readiness skills. Children with language problems in preschool are very likely to have academic and behavior problems at school age.
- If a child does not have adequate emotional, physical, cognitive, and language stimulation early in life, neurons can be lost permanently, because the brain operates on a "use it or lose it" principle.

HOW CAN WE FIND CHILDREN WHO NEED SERVICES EARLIER?

A child's level of communication development may be the best indicator of the presence of a developmental delay.

- When serious health or physical impairments are not present, the first evident symptom that a child may not be developing typically is delayed language.
- Most children develop their first words between 12 and 15 months, and it is common practice to wait until a child is 18 to 24 months and still not talking to refer the child for an evaluation. To complicate this referral decision, some children who are not talking at 24 months will outgrow their language delay while others will have persisting language problems and associated academic problems.
- Research over the past two decades has identified the following seven prelinguistic milestones that predict later language development and promise earlier and more accurate identification:
 - 1) emotion and use of eye gaze,
 - 2) communication,
 - 3) gestures,
 - 4) sounds,
 - 5) use of words,
 - 6) understanding of words, and
 - 7) use of objects.

Children who are delayed in use of words only are very likely to outgrow their language delay. Children who are delayed in use of words and 2 or more other areas are likely to have persisting language problems.

 Instead of waiting for children to start using words, measuring these prelinguistic milestones is a promising solution to improve early identification.

Our Evaluation Model

The FIRST WORDS early identification system is a new referral and evaluation system for identifying children 6 to 24 months of age at risk for developmental disabilities. Our system is a three-step process designed to maximize the role of the family and minimize the time required by healthcare or childcare providers, thus enhancing effectiveness and cost-efficiency.

- STEP ONE: The first step is to screen communication using the <u>Infant/Toddler Checklist for Communication and</u> <u>Language Development</u> (Wetherby & Prizant, 1998), a one-page parent report form. We send families a report indicating either that their child is performing as expected for his/her age or that more information is needed.
- STEP TWO: For children performing below what is expected for their age on the Checklist, a more in-depth parent report tool is mailed to families. We send families a more detailed report summarizing how their child is communicating, any areas of concern, and what to expect over the next few months based on the information reported by the caregiver.
- STEP THREE: For children performing below age expectations based on parent report, we invite families to bring their child in for an evaluation and give the parents feedback about their child's strengths and any areas of concern both during the evaluation and in a written report. For children performing below what is expected for their age on the evaluation, we make referrals to services available in the community and offer services through our project to children who are not yet eligible for publicly funded services.

MENU OF SERVICES OFFERED TO FAMILIES BY FIRST WORDS PROJECT

FIRST WORDS Project offers a menu of service options to families to support communication development in children who may need extra help to reach their potential:

- Parent Education Workshops are offered in the community to provide information about communication with specific ideas about how to support children's development.
- Infant-Toddler Play Groups are offered at FSU and in the community to give caregivers the opportunity to talk to a speech-language pathologist about their child's development in a relaxed, informal, child-friendly setting with time for discussion, coaching, and play. Sessions focus on how their child communicates, how to respond in ways to promote their child's communication development, how to address communication development in everyday activities in the home, and how to deal with special issues such as behavior problems related to limited communication or oral/motor issues.
- ➤ Individualized, Family-Guided Intervention Programs are offered for families whose children have been evaluated by FIRST WORDS and both our staff and the family have specific concerns about the child's development. Sessions focus on individualized goals identified with families to enhance their child's communication development in everyday activities in the home.
- Referral for Services in the Community are made for children who need more specialized evaluation or who may qualify for services offered in the community.
- Monitoring Communication and Language Development with our evaluation tools is offered to families who are concerned about their child's development and want to find out how their child is progressing. For children under 24 months of age, we usually monitor development in 3-month intervals to detect growth. A child's growth rate is the best predictor of prognosis.

WHAT WE HAVE LEARNED FROM OUR SECOND YEAR

The FIRST WORDS Project is finishing its second year of funding and has established a liaison relationship with over 200 healthcare and childcare agencies and providers in Leon County who are distributing the Checklist. We have completed the initial validation studies to demonstrate the accuracy of the referral and evaluation measures.

 We have gathered over 1,500 Checklists and conducted follow-up evaluations on over 500 children. We have offered

a menu of service options to families and about 50 families have attended our parent education workshops, about 80 families have participated in the peer play groups, and about 40 families have participated in individualized intervention.

♦ We have studied the relationship between parent report measures and clinical evaluation. The results indicate highly significant correlations between our referral Checklist and our follow-up evaluation measures. This group includes a culturally diverse population with over 25% African American children, the largest minority residing in Leon County. We found a 16% overreferral and 7% underreferral rate for the Checklist, compared to the child's performance on the clinical evaluation. These findings support the

validity of parent report as a measure of early prelinguistic communication milestones.

 We also found high, significant correlations with all three of our measures and the size of a child's vocabulary at age 24 months. The strongest correlations were observed for sounds, use of words and understanding of words. These three measures, which were gathered between 12 and 21 months, were effective at predicting a child's relative performance on vocabulary production at 24 months of age.

 Preliminary findings suggest that our evaluation measure is more accurate in early identification than commonly used tests, such as the Denver Developmental Screening Test. Based on children's performance on standardized

> language testing, we found a 5% overreferral and 7% underreferral for our clinical evaluation and 18% overreferral and 4% underreferral for vocabulary production. Thus, our evaluation tool, which was collected up to a year before the standardized testing, has more precision than the vocabulary production measure, which was collected within a month of the standardized testing. These findings support the use of a collection of prelinguistic measures, rather than the use of words alone, to improve the sensitivity of early identification efforts.

> These validation studies demonstrate that our evaluation tools are effective at measuring early communication skills and predicting a child's relative performance on these measures up to a year later. We are currently following these children until they are at least 3 years of

age to gather more definitive measures of cognitive and language outcomes, since some of these children will catch up on their own. We also are gathering data on child and family outcomes to document the effectiveness of our early intervention program.



FIRST WORDS Project

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HOW CAN HEALTHCARE AND CHILDCARE PROVIDERS HELP?

We need your help in detecting communication problems earlier in young children. You can help by giving the Checklist to parents of young children. We are eager for you to give the Checklist to parents of any young child in Leon or surrounding counties, even if there are no concerns. With our grant funding, we are interested in gathering information about communication development from as many families as possible in this region. We are interested in both young healthy children and children whose families or service providers have concerns.

What If Families Have Concerns? Families are often the first to raise concerns about their child's development. Concerns raised by the majority of families are warranted, and therefore, it is important to give the Checklist to any family that has any concern about their child's communication development. Some families have concerns about their child, but their child is developing typically. It is important to reassure those families and answer questions that they may have about their child's development. For these families, we can monitor their child's development with our Caregiver Questionnaire to make sure their child is progressing as expected and provide information about typical development.

What If Families Are Not Yet Concerned? Some children are delayed but families are not yet concerned. It can be difficult for parents to learn that their child is not developing as expected. It is important not to alarm families and to offer support as concerns are raised. It can be confusing to families if one professional tells them that their child is doing fine and another indicates concern. You can help by becoming familiar with early indicators of communication problems. We will try to obtain a release of information from families who you refer and/or serve so that we can send you a copy of our written reports. In this way you can know which children you refer need monitoring and/or intervention. If we can provide intervention early, the child's chances for improvement are much greater.





Visit our website for a copy of our First Birthday Report, an updated description of our project and findings, and a current calendar of parent education workshops and infant-toddler play groups being offered in Leon County.

http://firstwords.fsu.edu

For comments, questions, or information, call us at (850) 644-8462



Florida State University Department of Communication Disorders