Preface

Despite the burgeoning of interest in the language development of children, there have been relatively few studies that have attempted to address themselves to such a research theme from an epidemiological point of view. Futhermore, there have been even fewer which have combined the epidemiological cross-sectional with the longitudinal approach. Such approaches have been the tradition in Newcastle upon Tyne, as it was in this city that Dr Muriel Morley undertook her now classical study described in her book *The Development and Disorders of Speech in Childhood* (1957; second edition, 1965; third edition, 1972).

General practitioners, paediatricians, psychologists and psychiatrists are frequently confronted with questions from parents about the long-term consequences of delay in the development of speech and language in the early years of life. A commonly held view was that, provided that there were no associated major physical handicaps, most children would outgrow such problems so that, later, there would be no trace whatsoever of the previous delay. It was generally appreciated that greater precision was necessary, but this was bedevilled by insufficient information about the subsequent development of those children to allow clinicians to undertake reasonably accurate prognoses. Trained and experienced physicians were aware, for instance, that even among the speech delayed children who had no physical handicap, some had a less favourable prognosis than others, but it is important to know which type of speech-delayed children had the better prognosis. Furthermore, such views were based almost entirely on clinical impressions, as few studies had attempted to put such impressions into perspective by studying the subject at an epidemiological level. In addition it is essential to ascertain the relative importance of biological and psychological factors in relation to each other and to the environment, as a greater understanding of these factors and their relationships will aid prognoses and indicate the likelihood of response to particular forms of treatment.

There was, therefore, a strong case for studying a total population of speech retarded children prospectively, with particular emphasis on their subsequent performance in speech and language development, their intellectual development, their educational progress and their behavioural functioning. It was also essential to attempt to classify the disorders encompassed by the symptom of speech delay. It is hoped that the study will not only make a contribution to prognosis and classification, but also to the complex interrelations involved.

The book is subdivided into two sections. Part I is concerned with the speech retarded sample and comprises seven chapters. The first chapter describes the principles upon which we based the selection of our study population. The second chapter reviews the relevant literature on environmental and social factors. The next two chapters describe the results of the extensive and detailed series of assessments of the children's cognitive and behavioural development, carried out when the children were six, seven and eight years old. The following three chapters are devoted to clinical and statistical classification which try to define subcategories more precisely, and to ascertain the clustering and correlation of features in relation to these.

Part II is concerned with a hearing-impaired sample; it was considered to be important to include this because deaf children constitute a major group suffering from varying degrees of speech retardation. The deaf group was compared with the same control group that was used for research into speech retardation, and with the speech retarded sample itself. Chapter 8 defines the principles for selection of our deaf sample and also describes the findings relating to social and maternal factors. Chapter 9 briefly reviews the literature concerning cognitive and behavioural development of deaf children. The two remaining chapters concentrate on the intellectual and language development, educational progress, and assessments of behaviour and personality. The final Summary attempts to integrate the main findings of our research, covering both speech retarded and deaf children.

The scope of the research was so broad that it necessitated collaboration beyond our basic research team. We are, therefore, pleased to acknowledge the generous help of Mr Lionel Evans, Headmaster of the Northern Counties School for the Deaf and his staff; Mr A.S. Moore, organizer for partially-hearing units, Northumberland, and his colleagues; Dr K. F. Bailey, Deputy Director of Education; Dr L. F. Mills, Principal Educational Psychologist; Dr B. Shaw from the office of the Medical Officer of Health; and the Directors of Education and Medical Officers of Health over the period of the study, all of the city of Newcastle upon Tyne. We are grateful to the Heads of the Schools and

their teaching staff who collaborated in rating the children's behaviour.

The study involved repeated examination of some 263 children over the early school years. The research depended entirely on the co-operation of the children and their mothers, and we are most grateful to them.

Indubitably the most important contribution from outside the research team was made by the late Dr Gerald Neligan. While he did not feel he had made a sufficient contribution to merit authorship of any of the chapters, this project was totally dependent on his generosity in relation to his Newcastle Child Development Study, which served as the source of material for our research. The editors received continued encouragement from Professor Sir Martin Roth and Professor Donald Court who were, at the time of the research, the respective Heads of the Departments of Psychological Medicine and of Paediatrics.

The research was originally planned by Professor I. Kolvin, Mrs Jane Nolan and Dr R. F. Garside. Mrs Nolan subsequently left the department and Dr H. I. J. van der Spuy and Dr T. Fundudis joined the team, later to be joined by Mrs Sandra George. The task of organizing the research, carrying it through its various stages, analysing the data and writing up the results was undertaken mainly by the three editors, who remained with the project throughout. Support was given to the editors by Dr H. I. J. van der Spuy and Mrs Sandra George. The major task of computer analysis was carried out by Mr P. Clarke, who is a member of the staff of Mr A. McNay, Statistician to the Newcastle Regional Health Authority.

A number of other collaborators were involved in various aspects of our research and, while it has not been possible to include them in this report, we nevertheless wish to express our indebtedness to them. They include the following: Mr J. W. Osselton, Senior Lecturer in Encephalography, University of Newcastle upon Tyne; Mrs Margaret Robson, Head Teacher, Nuffield Psychiatry Unit; Mrs Mary Harris, previously Head of Department of Speech Therapy, University of Newcastle upon Tyne and Mrs Dorothy Fisher (previously Muckle). Invaluable advice on audiometry was provided by Mr G. Chaytor, Regional Otologist; on method, by Dr T. T. S. Ingram of Edinburgh; Dr Michael Rodda and Professor R. Freeman critically reviewed the section on deaf children.

The research team is particularly indebted to Mrs Marjorie Blackburn, who conscientiously accepted responsibility for the administration of the research. Her efficiency and dedication was a major factor in enabling us to achieve a comprehensive assessment of the children and their families. She also accepted total secretarial responsibility.

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