

The Factor's Whom Influencing The Incidence of Speech Delay in House of Fatima Child Center Malang City

1st Anis Ansryori

Prodi Rekam Medis ITSK RS dr. Soepraoen Malang

anisansryori14@gmail.com

2nd Retno Dewi Prisusanti

Prodi Rekam Medis ITSK RS dr. Soepraoen Malang

3rd Arif Efendi

Prodi Rekam Medis ITSK RS dr. Soepraoen Malang

4th Dewi Anggraeni

Prodi Rekam Medis ITSK RS dr. Soepraoen Malang

ABSTRACT

The Ministry of Health of the Republic of Indonesia (Widati, 2012) reported that 0.4 million (16%) of under-fives in Indonesia have developmental disorders, hearing impairment, lack of intelligence and speech delay. Disturbance of speech and language development is a developmental disorder often found in children aged 3-16 years. The incidence rate ranges from 1% to 32% in the normal population (Soetjiningsih & Ranuh, U. N, 2014). Purpose: To know the Factors Affecting the Incidence of Late Speech In House of Fatima Child Center Malang City. Method: This study used a quantitative approach with a retrospective research design, with an analytic design. Subjects of children who have speech delay with hearing loss, autism, chromosomal abnormalities, ADD, ADHD, and CP. Accidental sampling technique. Result: Most of respondents who have delayed speech with ADD counted 35 (36,1%) respondents, ADHD counted 13 (13,4%) respondents, and Autism counted 10 (10,3%) respondents. Conclusion: The existence of the relationship between Autism, ADD, ADHD to the delay talk at the House Of Fatima Child Center Malang City.

Keywords: *Hearing Loss, Autism, Chromosomal Abnormalities, ADD, ADHD, CP, and Speech Delay.*

I. INTRODUCTION

Speech delay is one of the most common causes of developmental disorders in children. This disorder seems to be increasing day by day. Some data show that the incidence of children experiencing speech delays (speech delay) is quite high. Silva in New Zealand, as quoted by Leung, found that 8.4% of children aged 3 years experienced speech delays while Leung in Canada got the rate of 3% to 10%. In the

Children's Development Polyclinic Dr. During 2007 Kariadi obtained 100 children (22.9%) with complaints of speech and language disorders from 436 new visits (Clinic Child Development, Dr. Kariadi Hospital, 2007).

World health organisation (WHO) reports that 5-25% of preschool children suffer from it minor brain dysfunction including fine motor development disorders (Widati, 2012). Meanwhile, according to (Kay-Lambkin, et al., 2007) globally it is reported that children who experience disorders in the form of anxiety are around 9%, 11-15% have easy emotions, 9-15% of behavior disorders. The Ministry of Health of the Republic of Indonesia Dalam (Widati, 2012) reports that 0.4 million (16%) of Indonesian toddlers have developmental disorders, both fine and gross motor development, hearing loss, low intelligence and speech delays. Meanwhile, according to the Internal Health Office (Widati, 2012), 85,779 (62.02%) preschool children experience

Fine motor development. Speech and language development disorders are developmental disorders that are often found in children aged 3-16 years. The incidence rate ranges from 1% to 32% in the normal population (Soetjiningsih & Ranuh, U. N, 2014).

In 2012, the East Java Indonesian Pediatric Association (IDAI) examined 2,634 children from 0-72 months of age. From the results of examination for development found to be normal according to age 53%, doubtful (requires deeper examination) as much as 13%, development deviation as much as 34%. Of the developmental



deviations, 10% had gross motor skills (such as walking, sitting), 30% fine motor skills (such as writing, holding), 44% spoke language and 16% socialized independence. Based on the data above, it can be seen that the number of doubts and deviation in development is still quite large in Indonesia. This is due to the lack of parental knowledge of the stages of development of children under five and the attitudes and skills of parents who are still lacking in monitoring the development of their children (Nadhiroh, 2012).

Some of the main causes of delayed speech include mental retardation, distraction, hearing and maturation delay. Maturation delay is often called functional speech delay, including the mildest disorder and at a certain age it will improve. Other relatively rare causes are speech organ disorders, genetic or chromosomal abnormalities, autism, selective mutism, receptive aphasia, and environmental deprivation. Environmental deprivation can be caused by a quiet environment, two languages, socioeconomic status, wrong teaching techniques, parents' attitudes (Judarwanto, 2013).

II. METHODS

The research design used in this study was an analytical design with a retrospective approach.

III. RESULTS AND DISCUSSION

1. Autism * Speech Delay

Crosstabulation Count

		Speech Delay		All
		No, if not one of the 6 factors researched	Yes, if one of 6 factors researched	
Autis	No	60	27	87
Autis	Me			

		Speech Delay		All
		No, if not one of the 6 factors researched	Yes, if one of 6 factors researched	
Yes	10	0		10
Autis				
Me				
Total	70	27		97

Based on table 4.8, it is known that there were 10 respondents who were late speaking accompanied by Autism with a percentage of 10.3%.

Delays and deviations in Talking causes autistic children to have difficulty communicating and unable to understand other people's conversations. Some autistic children seem mute and are not even able to use motion signals when communicating with other people, so the use of sign language cannot be done. The voice that comes out is usually high pitched and sounds strange, tends to imitate, seems to memorize words but in fact they are unable to communicate. Although the pronunciation of words is quite good, there are many obstacles when expressing self-feelings through spoken language (Delphie, 2012).

Autism is a serious developmental disorder in children. Symptoms appear before the child reaches three years of age. Their development becomes disrupted, especially in communication, interaction and behavior. Children exhibit marked delays in cognitive and language development and display certain odd behaviors, may be spontaneously scratching or wagging their hands, always repeating what others have said, or displaying unusual interest in objects certain. (Ormrod, 2013).

People with autism show a distorted communication disorder. Communication disorders can be seen in the form of speech

delays, not speaking, speaking in language that cannot be understood, or speaking only in imitation (ecolalia). Autism is three to four times more common in boys than girls. (Maslim, 2011).

From the observations of researchers in the field and existing theories, it is found that there is a similarity, because most of the respondents who have speech delays accompanied by Autism. Autism disorders affect brain development disorders in children which result in not being able to communicate and unable to express their feelings and desires, so that the behavior of relationships with other people is disturbed.

2. ADD * Speech Delay

Crosstabulation Count

		Speech Delay		All
		No, if not one of the 6 factors researched	Yes, if one of 6 factors researched	
Autis	No Autis Me	57	27	87
	Yes Autis Me	13	0	13
Total		70	27	97

Based on table 4.10, it is known that the respondents who were late speaking with ADD were 35 respondents with a percentage of 36.1%.

Attention deficit disorder is an attention disorder that can be seen from the failure of children to give complete attention to something, it is easy to switch attention from one thing to another. And have difficulty concentrating if there are things going on around them, they usually need

a calm, quiet environment to stay focused (Suwerto. 2012).

From the observations of researchers in the field and The existing theory finds a similarity, because most respondents have speech delays accompanied by ADD (Attention deficit disorder). This disorder is caused by the habit of children who often use gadgets so that it will affect the brain's ability to get.

3. ADHD * Speech_delay

Crosstabulation Count

		Speech Delay		All
		No, if not one of the 6 factors researched	Yes, if one of 6 factors researched	
Autis	No Autis Me	57	27	87
	Yes Autis me	13	0	13
Total		70	27	97

Based on table 4.11, it is known that the respondents who were late speaking with ADHD were 13 respondents with a percentage of 13.4%.

Attention Deficit Hyperactive Disorder is a disorder of activity and attention (hyperkinetic) which is a fairly common psychiatric disorder with main symptoms such as hyperactivity and impulsivity that are inconsistent with the level of development of children, adolescents, or adults. Lots children with ADHD also have speech delays, gross and fine motor delays, have sensory problems or impaired sensory processing. It also seems to have difficulty sleeping at night, especially when parents try to bring it to bed (DSM-5, APA 2013).



From the observations of researchers in the field and the existing theory found an equation, because most of the respondents who have speech delays accompanied by ADHD (Attention Deficit Hyperactive Disorder). And it found the most common learning disabilities, such as difficulties with spelling, reading, writing and math.

IV. CONCLUSION

1. Incidence of speech delays accompanied by hearing loss as many as 2 respondents with a percentage of 2.1%.
2. Incidence of speech delays accompanied by autism was 10 respondents with a percentage of 10.3%.
3. Incidence of speech delays accompanied by chromosomal abnormalities as many as 5 respondents with a percentage of 5.2%.
4. Incidence of speech delays accompanied by ADD as many as 35 respondents with a percentage of 36.1%.
5. The incidence of delayed speech accompanied by ADHD was 13 respondents with a percentage of 13.4%.
6. Incidence of late speaking accompanied by CP as many as 5 respondents with a percentage of 5.2%.
7. There is a relationship between autism, ADD, and ADHD on speech delays because $X^2_{count} > X^2_{table}$ and the Asimp value. Sig < 0.05.

V. REFERENCES

- American Psychological Association. 2015. WHAT Dictionary of Psychiatry (2 volume set). Washington, D C : American Psychological Association.
- Anggraini, Wenty. 2011. Journal of "Speech Delay in Children Aged 5 Years" of Psychology, Faculty of Education, UNNES (accessed January 2017).
- Delphie, B. 2012. Learning Children with Needs Special. Bandung: Refika Aditama.
- Judarwanto Widodo. 2008. Speech delay-speech delay.
- Judith E. 2009. Unilateral Hearing Loss Is Associated With Worse Speech-Language Score in Children. Pediatrics Official Journal of The American Academy of Pediatric.
- Kay-Lambkin, F., Kemp, E., Stafford, K., & Hazell, T. (2007). Mental Health Promotion and Early Intervention in Early Childhood and Primary School Settings: A Review 1. Journal of student Welbeing. (vol 1 No.1). Australia: Hunter Institute of Mental Health.
- Maslim, Rusdi. 2013. Diagnosis of Mental Disorders, Brief Reference PPDGJ III. Jakarta: Department of Mental Medicine, FK-Unika Atmajaya.
- Nadhiroh. 2012. Deviations of Child Development.
- Ormrod, Jeanne. Ellis. (2008). Educational Psychology Developing Learners Sixth Edition (Educational Psychology Volume 2, 6th Edition). Translation: Amitya Kumara. Jakarta: Erlangga.
- Soetjiningsih & Ranuh, U.N (2014). Child Development, Edition 2. Jakarta: EGC Medical Book.
- Suwerto R. 2012. Speech Delays and Hearing Loss in Infants and Children. Committee. National Control for Hearing Loss and Deafness.



Widati, Tri. 2012. "Improving Children's Fine Motor Skills Through Paper Folding Methods in Group B Children TK ABA Gani Socokangsi Jatinom

Klaten Academic Year 2011/2012". Essay. Surakarta: Faculty Education, Muhammadiyah University of Surakarta.