



## **G20 Must Protect Children’s Capacity to Learn** ***CASLPA Says Child Health Initiatives Must Include Measures for*** ***the Early Identification of Communication and Hearing*** ***Disorders***

OTTAWA (June 22, 2010) This week, the leaders of the G8 and G20 nations will be meeting in Huntsville and Toronto to discuss, amongst other things, efforts to increase maternal and child health in the developing world. The Canadian Association of Speech-Language Pathologists and Audiologists (CASLPA) is supportive of these efforts, and hopes these discussions will include communication health, particularly initiatives that provide early identification and early intervention for speech, language and hearing disorders.

“Child health initiatives should focus on setting children on a course that maximizes their abilities to succeed,” said CASLPA President, Gillian Barnes. “Certainly, a large part of this is about preventing disease and improving nutrition, but communication provides the foundation for future academic and life skills, limitations to which can severely limit a child’s capacity to learn and impact their social and emotional potential.”

A simple, non-invasive and inexpensive test can identify hearing loss in newborns. Studies have found that infants with hearing loss that are identified and placed into early intervention programs by the age of 6 months perform significantly better on school and language measures, even when controlling for other factors like disabilities, gender and race. In Canada it is estimated that 8 to 12 per cent of pre-school aged children have some form of communication disorder or delay involving either speech or language. Most of these communication disorders are not identified until a child fails to begin speaking, generally when they are 18 to 24-months-old. Children with speech and language disorders suffer from greater behavioural disorders, tend to be bullied more often, and have more difficulty forming friendships.

“Failing to identify communication delays and disorders early poses the risk of restricting a child’s social, emotional and academic potential and thus limiting the effectiveness of later intervention and hindering learning,” says Barnes. “As children age, some problems cannot be undone, and even those that can may still hinder the development of other skills. What’s more, since learning is cumulative, difficulties in early periods will inevitably have a cascading effect for the rest of a child’s life. A slow start at the gate will quite literally mean that they are playing catch up for the rest of their lives.”

While the direct benefits to children of early identification initiatives are clear, they also offer good value for government in the long term. Studies have found that these programs reduce the need for future, more expensive treatment programs. A dollar spent on early identification programs can save ten in the future.

“A great deal of work is needed to improve the health of children in developing countries,” says Barnes. “But if the focus of these programs is to improve the potential of children in the developing world, we must be sure to equip them with the skills they will need as adults. Allowing speech, language and hearing disorders to remain unidentified and untreated makes this more difficult and, in some cases, impossible.”

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**CASLPA**, with more than 5,500 members, is the only national body that supports and represents the professional needs of speech-language pathologists, audiologists and supportive personnel inclusively within one organization. Through this support, CASLPA champions the needs of people with hearing and communications disorders. Visit CASLPA at [www.caslpa.ca](http://www.caslpa.ca)

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