REVIEW OF PSYCHOPEDAGOGY
REVISTA DE PSIHOPEDAGOGIE

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

DOI: https://doi.org/10.56663/rop.v13i1.70

Exploring the Prevalence of Speech and Language Disorders Among Children in Romania

Agheana Viorel, PhD[1]

Abstract

The study investigates the prevalence of speech and language disorders among children in Romania, based on data collected from a total of 160,622 children, including both school-aged children (105,653) and preschoolers (54,969). The findings reveal that 21,531 children were identified with speech and language disorders, accounting for an overall prevalence rate of 14.46%. The prevalence is higher among preschoolers (17.83%) compared to school-aged children (11.10%). The most common types of speech and language disorders observed include pronunciation/articulation disorders (79.51%), rhythm and fluency disorders (2.11%), reading and writing language disorders (7.78%), developmental language disorders (7.10%) and voice disorders (0.34). These results underscore the need for targeted early interventions, especially among preschool populations, to address the diverse range of speech and language difficulties identified. The study provides critical insights into the distribution and characteristics of speech and language disorders in Romanian children, emphasizing the importance of comprehensive screening and specialized support services to improve developmental outcomes.

Keywords: speech and language disorders, prevalence, Romania, preschoolers, school-aged children, pronunciation disorders, articulation disorders, rhythm and fluency disorders, reading and writing disorders, developmental language disorders, voice disorders, early intervention, screening.

Introduction

Language and speech are essential means of communication, and their development begins early in childhood. The pace of their development varies significantly from one child to another, being influenced by a range of biological, psychological, and environmental factors. Disruptions in the development of language and speech not only affect communication skills but also hinder a child's ability to acquire new knowledge and actively participate in society.

Speech refers to the ability to organize and articulate the sounds necessary for communication, involving complex and coordinated movements of the respiratory, laryngeal, velopharyngeal, and oral systems. Speech problems are characterized by difficulties in producing sounds, even though the affected individual knows what they want to communicate. These difficulties include fluency disorders, articulation disorders, and voice disorders.

On the other hand, language is a more complex process that involves both comprehension and expression. Receptive language refers to the ability to understand the meaning of words and grammatical structures, while expressive language focuses on conveying information, feelings,

[1] University of Bucharest, Faculty of Psychology and Educational Science, Romania
Corresponding Author:
Email: viorel.agheana@fpse.unibuc.ro

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

thoughts, and ideas. Language disorders can affect one or both dimensions, with or without associated speech problems. These difficulties include issues related to grammar (syntax), sound production (phonology), vocabulary (semantics), word meaning units (morphology), and the use of language in social contexts (pragmatics).

Language and speech disorders are among the most common developmental challenges in children, having a profound impact on educational performance, social adaptation, and overall well-being. These difficulties, which can range from isolated pronunciation issues to complex disorders of comprehension and expression, affect not only the child but also their family and educational community.

The prevalence of these disorders varies based on region, age, and access to specialized services, but international evidence suggests they represent a significant public health challenge.

In a Canadian study assessing a representative sample of 5-year-old kindergarten children, 180 out of 1,655 children tested were identified as having speech or language impairments (Beitchman et al., 1986). Based on these findings, it is estimated that between 16.2% and 21.8% of children in the general population would present some form of speech or language impairment. These statistics highlight the significance of early identification and intervention in addressing speech and language disorders to mitigate potential long-term educational and social challenges.

A 2012 study shows that 7.7% of children aged 3–17 years had a communication disorder; 5% speech problems, 3,3% language problems, 1,4% voice problems (Black, Vahratian & Hoffman, 2015).

In a 2016 report, the National Academy of Sciences estimated that the prevalence of speech and language disorders among children and adolescents in the United States, aged 3 to 21 years, ranges between 3% and 16% (NASEM, 2016). These disorders can have a profound impact on children and their families. Evidence suggests that children of school age who experience speech or language delays may be at a heightened risk for learning and literacy difficulties, including challenges with reading and writing (Catts & al., 2008).

In Romania, language disorders represent a significant issue for both preschool and school-aged children. Older statistics indicate that approximately 14.53% of preschool children experience some form of language disorder, highlighting a high prevalence in this age group. Additionally, for school-aged children, the percentage drops to 9.52%, indicating a decrease in frequency as children grow older, although the phenomenon remains significant (Verza, 2003).

Language and communication disorders pose a major challenge to the educational system, as they are critical factors that impact the social, emotional, and educational development of children. In Romania, Inter-School Speech Therapy Centers (Centrele Logopedice Interșcolare, CLI) play a central role in detecting, evaluating, and treating these disorders.

Inter-School Speech Therapy Centers (Centres Logopedice Interșcolare, CLI) in Romania represent a structured support system within the national educational framework, aimed specifically at children with special educational needs who experience speech, language, and communication disorders, as well as learning difficulties. Operated under the jurisdiction of County Centers for Educational Resources and Assistance (Centrul Județean de Resurse și Asistență Educațională, CJRAE), CLI units coordinate targeted therapeutic interventions across designated geographical areas. Each speech therapist is assigned a circumscription comprising a minimum of 500 children and students across kindergartens and schools, covering a spectrum from early childhood education to secondary grades (grades 0 to XII).

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

The primary objective of CLI is to identify, assess, and provide corrective therapy for a diverse array of speech and language disorders. These include articulation and pronunciation issues, rhythm and fluency disorders, written and reading language impairments, developmental language delays, voice disorders, and other communicative difficulties that can negatively impact school adaptation and social integration. Given the foundational importance of early intervention, the identification and preliminary screening of children with potential language disorders are prioritized at the beginning of each academic year. This initial phase involves comprehensive speech-language evaluations, generally in collaboration with family members and teachers, enabling the development of a nuanced diagnosis for each child. The therapeutic process is further refined by integrating assessments of environmental, educational, and familial factors that may influence language development.

Once a diagnosis has been established, individualized therapy plans are devised, and children are enrolled in a structured intervention schedule. Therapeutic sessions are conducted either individually or in small groups (two children per group), with session lengths typically lasting 45 minutes. The therapeutic methods employed span both general techniques, such as respiratory training, phonemic awareness exercises, and activities to strengthen motor functions of the speech apparatus, and targeted interventions, such as practicing phoneme articulation, auditory memory enhancement, and exercises for expressive and receptive language skills. Importantly, the therapeutic process is designed to adapt flexibly to each child's developmental stage, severity of impairment, and progress trajectory, which is monitored regularly through progress assessments and evaluations at critical milestones, including mid-year and end-of-year reviews.

The documentation and tracking system within each CLI is rigorous, enabling detailed monitoring of each child's journey. Key records include individual therapy plans, logopedic files, attendance registers, and diagnosis updates, all of which support a data-driven approach to ongoing adjustments in therapy methods. Additional tools, such as observation sheets and diagnostic inventories, enable a granular tracking of milestones in lexical, syntactical, and phonological aspects of language, while specific instruments such as vocabulary picture tests, language development assessments, and psychological age assessments (e.g., Descoeudres' test) further inform the therapeutic process.

CLI professionals contribute to the broader educational mission by participating in continuing professional development programs, seminars, and pedagogical research forums that foster the exchange of best practices in speech-language pathology. Through these efforts, CLI centers not only address individual therapeutic needs but also aim to strengthen systemic support for children with speech and language disorders, contributing to a more inclusive educational environment.

Method

This study explores the frequency and typology of language disorders in Romania, using data collected between 2022 and 2023 from Inter-School Speech Therapy Centers (CLI) across multiple counties. Analyzing the frequency of these disorders provides essential insights into intervention needs and helps inform educational and public health policies aimed at developing nationwide speech therapy support programs.

The study is based on a quantitative analysis of data collected from CLI during 2022-2023. The data was obtained from annual reports centralized at the county level and provided by the County Centers for Educational Resources and Assistance (CJRAE). However, data could not be collected

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

from the entire country, as some information is not available in public databases or reporting methods which did not allow for consistent and coherent data centralization.

The sample includes children from various educational institutions, from preschools to grade XII, in the counties of Constanța, Olt, Satu Mare, Teleorman, Dâmbovița, Vaslui, Timiș, Prahova, Mureș, Brăila, Vâlcea, Bucharest Municipality, and Arad. The total number of children examined in these centers is 160,622, of whom 21,531 were identified with at least one language disorder.

To determine the frequency of different types of disorders, speech therapy detection and diagnostic forms completed by school speech therapists in each center were used. Language disorders were classified according to CLI's standardized categories: pronunciation/articulation disorders, rhythm and speech fluency disorders, written-language disorders, developmental language disorders, voice disorders, and disorders associated with Down syndrome or autism. In each county, speech therapists record detected cases at the beginning of the school year and monitored children's progress throughout the year, providing essential information to assess the effectiveness of the speech therapy applied.

Data was processed using descriptive analysis techniques, employing percentages and averages to reflect the regional distribution of language disorder types. The interpretation of results also includes comparing the frequency of these disorders between counties, offering a detailed overview of the diversity and incidence of language disorders in Romania.

Findings

The analysis presented in this study provides a detailed perspective on the prevalence of language disorders among school-aged and preschool children across several counties in Romania. The collected data highlights the distribution of children examined and identified with language disorders, broken down by age groups and regions, along with the corresponding percentages for each group. This research emphasizes regional differences and the importance of early diagnosis and therapeutic interventions to support the optimal development of children's communication skills.

The data analysis reveals a varied distribution of language disorders across Romanian counties and provides overall frequencies for the types of disorders recorded. The findings offer a detailed view of the total number of children examined and those identified with language disorders in Romanian counties. Additionally, the specific categories of identified disorders are outlined, including pronunciation/articulation disorders, rhythm, and speech fluency disorders, written-language disorders, developmental language disorders, voice disorders, as well as those associated with Down syndrome and autism.

Table 1. *Distribution of language disorders across Romanian counties*

	Pronunciation/Articulation Disorders	Rhythm and Speech Fluency Disorders	Written-Language Disorders	Language Development Disorders	Voice Disorders	Language disorders associated with Down syndrome, autism	Total examined	Total detected
Constanța	664	52	83	128	3	62	20034	1951
Olt	519	18	30	45	8	6	8146	666
Satu Mare	471	1	4	24	0	31	6159	1228
Teleorman	304	1	13	30	0	24	5261	686
Dâmbovița	493	7	27	47	5	18	11795	1176
Vaslui	269	8	92	31	1	15	2595	525
Timiș	420	8	28	20	0	18	8379	902
Prahova	357	8	42	29	4	0	7647	1299

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

Mureș	813	13	61	58	1	16	14120	1815
Brăila	492	24	61	66	3	4	13708	1743
Vâlcea	373	5	116	48	1	32	6415	686
BUCUREȘTI	2229	27	91	151	5	85	44295	7019
Arad	1415	62	215	111	7	39	12579	1833

The total number of children examined, and the number of detected cases vary significantly from one county to another. For example, in Bucharest, 44,295 children were examined, of whom 7,019 were identified with speech disorders, representing a high proportion compared to counties like Vaslui, where only 2,595 children were examined and 525 were detected. Articulation disorders are the most common across all counties, with the highest absolute numbers in Bucharest (2,229 cases), Arad (1,415 cases), and Mureș (813 cases). This highlights that articulation difficulties are the primary category of speech disorders reported.

Next, we present the percentage distribution of different types of speech disorders in the counties included in the study. This type of analysis allows for a detailed understanding of the structure of speech disorder prevalence in each region, highlighting the predominant types of difficulties and significant regional variations.

Table 2. *Percentage distribution of speech disorders language disorders across Romanian counties*

Regiune	Pronunciation/Articulation Disorders (%)	Rhythm and Speech Fluency Disorders (%)	Written-Language Disorders(%)	Language Development Disorders(%)	Voice Disorders(%)
Constanța	66.94	5.24	8.37	12.90	0.30
Olt	82.91	2.87	4.79	7.19	1.28
Satu Mare	88.70	0.19	0.75	4.52	0.00
Teleorman	81.72	0.27	4.28	8.06	0.00
Dâmbovița	82.58	1.17	4.52	7.87	0.84
Vaslui	64.66	1.93	22.86	7.93	0.26
Timiș	85.02	1.62	5.67	4.05	0.00
Prahova	81.14	1.82	9.52	8.12	1.12
Mureș	84.51	1.35	6.34	6.03	0.10
Brăila	75.69	3.69	9.96	10.16	0.46
Vâlcea	64.87	0.87	20.86	8.35	0.17
BUCUREȘTI	86.13	1.04	3.52	5.83	0.19
Arad	76.53	3.35	11.92	6.94	0.44

In all the counties analyzed, articulation disorders represent the most frequent category, with percentages ranging from 64.66% (Vaslui) to 88.70% (Satu Mare). This indicates a common trend in the identification of these disorders, likely due to the fact that they are easier to observe and diagnose compared to other categories. Some counties, such as Vaslui (22.86%) and Vâlcea (20.86%), show higher percentages of language development disorders. These data might suggest either better awareness of this category in these regions or better access to diagnostic services. In contrast, in Timiș County, these disorders make up only 4.05%, indicating possible differences in diagnosis or underreporting. Speech rhythm and fluency disorders (e.g., stuttering) have relatively low percentages, ranging from 0.19% (Satu Mare) to 5.24% (Constanța). This distribution suggests

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

that, although less frequent, such disorders are recorded more often in certain counties, which could indicate either a higher actual prevalence or better awareness and reporting.

The percentage frequency of language disorders based on the provided data is as follows:

- Articulation disorders: 79.51%
- Speech rhythm and fluency disorders: 2.11%
- Written-reading language disorders: 7.78%
- Language development disorders: 7.10%
- Voice disorders: 0.34%
- Language disorders associated with Down syndrome, autism: 3.16%

These percentages indicate the distribution of disorders within the total sample.

By analyzing the data provided regarding the frequency of language disorders across different regions of Romania, we can observe that articulation disorders are the most frequent, accounting for 79.51% of all cases. This is followed by written-reading language disorders (7.78%) and language development disorders (7.10%). Speech rhythm and fluency disorders, voice disorders, and those associated with Down syndrome/autism have lower frequencies, each below 5%.

When comparing these data with other studies, we notice that the frequency of language disorders can vary significantly depending on the population studied and the diagnostic methods used.

In our study, we also analyzed the total number of school-age and preschool children examined and diagnosed with language disorders in various counties. This data allow for a comparative analysis between counties and age categories, highlighting several significant aspects:

Table 3. *Number of school-age and preschool children diagnosed with language disorders across Romanian counties*

	Examinaţi			**Depistaţi**		
	Şcolari	Preşcolari	**Total**	Şcolari	Preşcolari	**Total**
Constanta	14031	6003	20034	1009	942	1951
Olt	5001	2945	8146	269	397	666
Satu Mare	3710	2449	6159	585	643	1228
Teleorman	2956	2305	5261	275	411	686
Dâmbovița	7902	3893	11795	690	486	1176
Vaslui	2053	542	2595	378	147	525
Timiș	4700	3679	8379	528	376	902
Prahova	4328	3319	7647	614	685	1299
Mureș	9549	4571	14120	1066	749	1815
Brăila	8546	5162	13708	998	745	1743
Vâlcea	3367	2738	6415	335	351	686
BUCUREȘTI	30296	13999	44295	3818	3201	7019
Arad	9214	3364	12579	1165	668	1833

At the national level, the proportion of preschool children diagnosed is higher than that of schoolchildren. For example, in Satu Mare County, 26.25% of preschoolers were diagnosed with language disorders, compared to 15.77% of schoolchildren. This difference may be attributed to the higher sensitivity in detecting language problems in preschoolers, when communication skills are still developing.

The highest proportions of diagnosed children are observed in Vaslui County (27.13% for preschoolers) and Satu Mare County (26.25% for preschoolers). This may suggest either a higher actual prevalence of language disorders or greater diagnostic efficiency.

We have detailed the percentage of children examined who were diagnosed with language disorders, broken down by counties and age categories (schoolchildren and preschoolers).

Table 4. *Percentage of children diagnosed with language disorders across Romanian counties*

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

Region	Total Examined (Școlari)	Total Detected (Școlari)	Percentage Detected (Școlari) (%)	Total Examined (Preșcolari)	Total Detected (Preșcolari)	Percentage Detected (Preșcolari) (%)
Constanța	14,031	1,009	**7.19**	6,003	942	**15.69**
Olt	5,001	269	**5.38**	2,945	397	**13.48**
Satu Mare	3,710	585	**15.77**	2,449	643	**26.25**
Teleorman	2,956	275	**9.30**	2,305	411	**17.83**
Dâmbovița	7,902	690	**8.73**	3,893	486	**12.48**
Vaslui	2,053	378	**18.41**	542	147	**27.13**
Timiș	4,700	528	**11.23**	3,679	376	**10.22**
Prahova	4,328	614	**14.18**	3,319	685	**20.64**
Mureș	9,549	1,066	**11.16**	4,571	749	**16.38**
Brăila	8,546	998	**11.68**	5,162	745	**14.43**
Vâlcea	3,367	335	**9.95**	2,738	351	**12.82**
BUCUREȘTI	30,296	3,818	**12.60**	13,999	3,201	**22.86**
Arad	9,214	1,165	**12.64**	3,364	668	**19.86**

The highest percentages for schoolchildren are observed in Vaslui County (18.41%) and Satu Mare (15.77%), while for preschoolers, Vaslui (27.13%) and Bucharest (22.86%) record the highest values. These data may reflect both the actual prevalence of the issues and the efficiency of the diagnostic process in these counties.

The lowest percentage for schoolchildren is observed in Olt County (5.38%), and for preschoolers in Timiș County (10.22%). This could indicate difficulties in the early detection of disorders or a lower prevalence of these issues in these regions.

With a combined average of 22.86% for preschoolers and 12.60% for schoolchildren, Bucharest highlights both the size of its population and the higher level of access to speech therapy and educational services.

Table 5. *Distribution of children examined and identified with speech and language disorders*

Category	Total number of children examined	Total number of children detected	Total (%)
Schoolchildren	105,653	11,730	11.10
Preschoolers	54,969	9,801	17.83
Total	**160.622**	**21.531**	**14,46**

The national combined average (schoolchildren and preschoolers) indicates that 14.46% of children have been identified with language disorders. This result highlights that approximately one in seven children examined have communication difficulties, underscoring the magnitude of this issue at the national level.

For preschoolers, the prevalence of language disorders is 17.83%, higher than for schoolchildren, where it stands at 11.10%. This reflects the greater vulnerability of preschool children, who are in a critical stage of language development. The decrease in prevalence among schoolchildren may be attributed to early speech therapy interventions, the natural maturation of children, or other educational factors. However, a significant percentage of schoolchildren still require support for the development of communication skills.

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

Discussion

The data collected from the Inter-School Speech Therapy Centers (CLI) in Romania provide valuable insights into the distribution and frequency of language disorders among children from various regions of the country. These data allow for an in-depth analysis of the types of difficulties encountered, highlighting both the specificities of each region and the factors that may influence the prevalence of language disorders. This study reveals considerable differences in the rate of language disorders, attributed to both socio-economic factors and the accessibility of speech therapy resources.

1. Pronunciation and Articulation Disorders

The analysis suggests that pronunciation and articulation disorders represent the most frequent category, with a prevalence of 79.51% of all identified cases. This finding is also supported by other international studies, which indicate pronunciation difficulties as some of the most common language disorders in children. For example, in Bucharest, 86.13% of the examined children presented pronunciation disorders, compared to 82.91% in Olt County. These values suggest not only a higher prevalence but also a potentially higher rate of early detection, due to the accessible speech therapy resources in urban areas.

In Romania, the higher prevalence may reflect the structural difficulties of the Romanian language, characterized by phonetic and morphological complexity, which can pose a challenge for children in the language acquisition process. Thus, the importance of early diagnosis and therapeutic intervention becomes evident, with CLI being a key pillar in providing these services.

2. Written-Spoken Language Disorders

Disorders related to written-spoken language make up approximately 7.78% of all cases, with counties like Arad (11.92%) and Brăila (9.96%) having higher rates than the national average. These difficulties include dyslexia, dysgraphia, and other issues related to written language processing, directly affecting academic performance and the educational progress of children. The data are similar to internationally recognized trends: a meta-analysis estimated the global prevalence of developmental dyslexia (DD) in primary school children to be around 7.10% (Yang et al., 2022). Factors contributing to these difficulties include genetic predispositions, environmental factors, and, in Romania's case, a lack of accessible educational resources, especially in rural areas.

CLI in Romania plays an important role in addressing these difficulties, but in many cases, speech therapy interventions could be improved through additional training programs for speech therapists, focusing on dyslexia and reading-writing difficulties. This would increase therapy efficiency by adapting programs to meet the specific needs of affected children.

3. Language Development Disorders

A significant proportion of the children diagnosed have language development disorders, representing about 7.10% of the identified cases. For instance, Vaslui and Vâlcea counties have rates of 7.93% and 8.35% in this category, respectively. Studies report prevalence estimates of low language skills in children between 1 and 16 years. These rates range from 0.4% to 25.2%, with more stable estimations observed in studies of children aged 5 years and older, especially those applying updated diagnostic criteria and standardized assessments of receptive and expressive language (Hill et al., 2023).

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

In general, language development disorders are associated with delays in vocabulary acquisition, grammatical structure, and speech coherence, which can significantly affect academic performance and children's socialization (Verza, 2009).

Compared to other European countries, where intervention rates for such disorders are higher, Romania could benefit from implementing early intervention programs focused on vocabulary development and grammatical skills. The involvement of CLI is essential, but the implementation of an interdisciplinary approach, including psychologists and teachers, could optimize interventions for these disorders.

4. Speech Rhythm and Fluency Disorders

With an incidence of about 2.11% nationally, rhythm and fluency disorders (including stuttering) are less frequent but have a significant impact on a child's self-esteem and communication abilities. In Arad County, 3.35% of the examined children suffer from such difficulties, indicating a rate above the national average. Several studies have investigated the prevalence of stuttering in different age groups worldwide. The data are consistent with those of other studies. A study in Greece by Okalidou and Kampanaros (2001) found a stuttering prevalence of 2.2% in children aged 4–5. A large European study by van Borsel et al. (2006) found a stuttering prevalence of 0.58% in Belgium, with rates decreasing with age. In the United States, a study by the CDC (Boyle et al., 2011) reported a stuttering prevalence of 1.6% overall, with higher rates for younger children and a male-to-female ratio of 2.47. These studies highlight significant regional and age-related variability in stuttering prevalence.

Stuttering is often associated with psychological factors and stress, and interventions that incorporate relaxation and self-regulation techniques are essential. In Romania, CLI uses therapeutic methods tailored to each case, but access to therapy for children in rural areas remains a challenge.

5. Voice Disorders

The data show that voice disorders account for 0.34% of all language disorders identified nationally. This small percentage indicates that voice disorders are less common compared to other types of language disorders, such as pronunciation or articulation disorders. However, the analysis by county reveals significant variations, which may be influenced by factors such as access to diagnostic services, awareness of voice problems among parents and teachers, or the availability of speech therapy specialists. In the counties of Satu Mare, Teleorman, and Timiș, no cases of voice disorders were reported, and in Vaslui, Vâlcea, and Bucharest, the percentages are extremely low (below 0.30%). These figures may suggest either a low prevalence of these disorders or difficulties in the identification and reporting process. For example, the lack of specialists in rural areas or insufficient community awareness may lead to underreporting cases. In the counties of Olt (1.28%) and Prahova (1.12%), the highest percentages of voice disorders are recorded. These higher figures may indicate either a true higher prevalence due to local factors (e.g., exposure to polluted environments or unhealthy vocal practices) or increased efficiency in the identification and reporting of these disorders. Additionally, these counties may benefit from a better-developed network of speech therapists or more effective awareness campaigns.

6. Language Disorders Associated with Down Syndrome/Autism

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

Language disorders associated with Down syndrome and autism are reported at a low percentage, making up approximately 3.16% of the identified cases. However, there is an explanation related to the organization of education for children with disabilities in Romania. According to the law, children with disabilities in Romania have the right to attend mainstream schools (located near their homes) or special schools with a curriculum tailored to various types of disabilities (intellectual, visual, auditory). In special schools, there are dedicated therapy rooms where speech therapy is provided for all children with disabilities who need it. Additionally, Romania has many non-governmental institutions that provide support, including speech therapy for children with disabilities. The data related to children with Down syndrome or autism in our study include only children integrated into mainstream schools who participated in therapy sessions conducted at the speech therapy offices of Inter-school Speech Therapy Centers. Although the rate of these disorders is low, they require special attention, as they have a profound impact on communication abilities and social adaptation (Agheană, 2024). Furthermore, to improve the quality of interventions in Romania, CLI could benefit from enhanced integration of these methods, as well as expanded collaboration with other specialists in the field of special education psychology and inclusive education.

Conclusion

The conclusions of the study on the frequency of language disorders among children in Romania highlight a concerning reality but also provide clear directions for future interventions. The overall prevalence of 14.46%, with a higher rate among preschoolers (17.83%) compared to schoolchildren (11.10%), emphasizes the vulnerability of children in the early stages of language development. These data confirm the importance of early intervention, particularly in kindergartens, to prevent long-term negative effects on academic and social performance. The distribution of disorders shows a predominance of pronunciation and articulation disorders (79.51%), followed by written-reading language disorders (7.78%) and developmental language disorders (7.10%). This pattern is influenced both by the complexity of the Romanian language and by the accessibility of diagnosis and treatment in different regions. For example, in Bucharest, Arad, and Vaslui, higher detection rates can be attributed to a more structured diagnostic system, while lower percentages in other counties suggest possible gaps in educational or therapeutic resources. The study also highlights the importance of Inter-school Speech Therapy Centers (CLI) in the detection, evaluation, and treatment of these disorders. However, regional differences in frequency indicate the need for a unified national policy that supports the development of the network by increasing the number of school speech therapists, providing continuous training for therapists, adequately equipping centers, and creating interdisciplinary partnerships. Particularly, more complex disorders, such as those associated with autism or Down syndrome and generally with children with disabilities, require specialized and integrated approaches.

In conclusion, the research highlights the urgent need for structural and educational interventions to increase children's access to quality speech therapy services. Adopting a national strategy for language disorders, educating parents and teachers, and expanding CLIs and speech therapy services in underserved areas could significantly reduce the impact of language disorders on the development of children in Romania. This represents not only an investment in education but also a commitment to the fundamental rights of the child.

ISSN 2784 – 3092
ISSN – L 2784 - 3092
psychopedagogy.unibuc.ro

Reference

Okalidou, A., & Kampanaros, M. (2001). Teacher perceptions of communication impairment at screening stage in preschool children living in Patras, Greece. International Journal of Language and Communication Disorders, 36(4), 489–502.

Agheana, V. (2024). Terapia logopedică la copilul cu dizabilitate intelectuală. In A. Gherguț & A. Roșan (Eds.), Terapii și intervenții psihopedagogice la persoanele cu cerințe speciale (pp. 459–481). Editura Polirom.

Beitchman, J. H., Nair, R., Clegg, M., Patel, P. G., Ferguson, B., Pressman, E., & Smith, A. (1986). Prevalence of speech and language disorders in 5-year-old kindergarten children in the Ottawa-Carleton region. The Journal of speech and hearing disorders, 51(2), 98–110. https://doi.org/10.1044/jshd.5102.98

Black, L. I., Vahratian, A., & Hoffman, H. J. (2015). Communication Disorders and Use of Intervention Services Among Children Aged 3-17 Years: United States, 2012. NCHS data brief, (205), 1–8.

Boyle, C., Boulet, S., Schieve, L., Cohen, R., Blumberg, S., Yeargin-Allsopp, M., & others. (2011). Trends in the prevalence of developmental disabilities in US children, 1997–2008. Pediatrics, 34(3), 385–395.

Catts, H. W., Bridges, M. S., Little, T. D., & Tomblin, J. B. (2008). Reading achievement growth in children with language impairments. Journal of Speech, Language, and Hearing Research, 51(6), 1569–1579. https://doi.org/10.1044/1092-4388(2008/07-0259).

Hill, E., Calder, S., Candy, C., Truscott, G., Kaur, J., Savage, B., & Reilly, S. (2023). Low language capacity in childhood: A systematic review of prevalence estimates.. International journal of language & communication disorders. https://doi.org/10.1111/1460-6984.12944.

Van Borsel, J., Moeyaert, E., Rosseel, M., Van Loo, E., & Van Renterghem, L. (2006). Prevalence of stuttering in regular and special school populations in Belgium based on teacher perception. Folia Phoniatrica et Logopaedica, 58(5–6), 289–302.

National Academies of Sciences, Engineering, and Medicine (Eds.). (2016)Speech and Language Disorders in Children. (2016). In National Academies Press eBooks. https://doi.org/10.17226/21872.

Verza, E. (2003). Tratat de logopedie I, București, Editura Semne.

Verza, E. (2009). Tratat de logopedie II, București, Editura Semne.

Yang, L., Li, C., Li, X., Zhai, M., An, Q., Zhang, Y., Zhao, J., & Weng, X. (2022). Prevalence of Developmental Dyslexia in Primary School Children: A Systematic Review and Meta-Analysis. Brain Sciences, 12. https://doi.org/10.3390/brainsci12020240.