



**THE ROLE OF PARENTS IN CARING FOR CHILDREN WITH SPEECH DELAY:  
A SYSTEMATIC REVIEW**

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**ABSTRACT**

Speech delay is a developmental condition that affects children's communication, learning, and family interactions. This condition not only impacts the cognitive and social development of affected children but also poses substantial challenges for families, particularly in caregiving, communication, and adaptation processes. This study aimed to conduct a systematic review to synthesize qualitative evidence on the roles, experiences, and challenges of parents in caring for children with speech and language delay. The review was conducted according to PRISMA guidelines. Relevant studies published between 2020 and 2025 were systematically searched in PubMed, Sage Journals, Science Direct, Scopus, Taylor and Francis databases using Boolean operators and specific keywords. The PEO framework (Population, Exposure, Outcome) guided study selection, focusing on qualitative research related to parents (such as parents, parental role, caregiving), speech delay (such as speech delay, language delay, communication disorder), and children (such as toddlers, early childhood, pediatric). The Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Qualitative Research was used to assess methodological quality. Thematic synthesis revealed four overarching categories: (1) parental roles and responsibilities in providing daily stimulation, therapy practice, and advocacy; (2) challenges and burdens, including emotional stress, financial strain, and stigma; (3) coping and adaptation strategies through family support, spirituality, and personal resilience; and (4) interaction with social and service contexts, highlighting the importance of professional guidance and systemic accessibility. Parents play a central role in supporting children with speech delay, yet face significant emotional and practical challenges. Strengthening family centered care, enhancing professional parent collaboration, and reducing systemic barriers are essential.

Keywords: caregiving; children; parents; speech delay

**How to cite (in APA style)**

Badriah, L., Arief, Y. S., & Has, E. M. M. (2026). The Role of Parents in Caring for Children with Speech Delay: A Systematic Review. *Indonesian Journal of Global Health Research*, 8(1), 687–696.

<https://doi.org/10.37287/ijghr.v8i1.541>.

**INTRODUCTION**

Speech delay is a significant developmental concern characterized by delays or difficulties in speech and language acquisition, which can hinder children's ability to express thoughts and emotions effectively. This condition not only impacts the cognitive and social development of affected children but also poses substantial challenges for families, particularly in caregiving, communication, and adaptation processes. Globally, speech and language delays affect approximately 5-12% of young children, making them among the most common developmental disorders in early childhood. Studies show that without early diagnosis and intervention, speech delay can hinder cognitive development, reduce academic achievement, and negatively impact social emotional well being (Tan et al., 2019). In Indonesia, the issue is similarly urgent. National surveys and pediatric associations report that around 5-10% of preschool-aged children experience

speech delay, with certain cities showing prevalence as high as 15-21% in specific localities. These rates have been increasing over recent years, likely due to greater awareness, environmental risk factors, and changes in family practices (Fitri et al., 2025).

Families often bear emotional, financial, and social burdens, with caregiving responsibilities frequently falling disproportionately on mothers, leading to increased stress and potential family conflicts (Hutrika et al., 2024). The lack of verbal stimulation, excessive gadget use, and limited family involvement can exacerbate speech delay and complicate the adaptation process. Furthermore, insufficient knowledge and ineffective coping strategies may heighten chronic stress and impede both family adaptation and the child's development (Hasanah & Nor, 2023). Several risk factors contribute to speech delay. These include reduced verbal stimulation, extended exposure to screens or gadgets, limited parental education, and insufficient knowledge about early childhood communication expectations. Delay in gross motor milestones, low exclusive breastfeeding duration, and poor social interaction are also significant correlates (Tan et al., 2019).

Parents are central in caring for children with speech and language delay. Their roles encompass facilitating language stimulation, guiding and supporting therapy adherence, and providing emotional and communicative support. However, while clinical and therapeutic interventions have been studied in depth, there is a lack of comprehensive systematic reviews that synthesize qualitative evidence about parents' roles, experiences, and challenges in caring for such children. Therefore, this systematic review aims to explore and synthesize the role of parents in caring for children with speech and language delay. By integrating qualitative studies across different global contexts, the review seeks to inform healthcare practice, early intervention policies, and family centered support systems that enhance outcomes for both children and their families.

## **METHOD**

This systematic review was conducted using 5 electronic databases, (PubMed, Sage Journals, Science Direct, Scopus, Taylor and Francis) to identify the relevant studies published from 2020-2025. The search strategy included a combination of keyword related to parents (such as parents, parental role, caregiving), speech delay (such as speech delay, language delay, communication disorder), and children (such as toddlers, early childhood, pediatric). Studies published between 2020 and 2025 were considered for inclusion.

The selection criteria in this study were determined based on the PEO framework (Population, Exposure, Outcome) and study design. The inclusion criteria were: (1) studies focusing on parents caring for children with speech delay; (2) studies exploring parental roles, responsibilities, and caregiving experiences; (3) outcomes related to parental perceptions, challenges, and coping strategies in caregiving; (4) qualitative study design such as phenomenology, grounded theory, ethnography, case study, or other qualitative approaches; and (5) studies published in English between 2020 and 2025. This exclusion criteria were: (1) studies not addressing parental roles in caring for children with speech delay; (2) studies focusing on other developmental disorders; (3) studies not available in full text; and (4) commentaries, editorials, abstracts only, case reports, case series, meta analyses, conference proceedings, and discussion papers.

Two authors (LL and EM) independently screened all relevant titles and abstracts against the eligibility criteria. Any discrepancies were discussed and resolved through mutual consensus under the supervision of the third author (YS). The same procedure was applied in the full text review stage. The purpose of the data extraction process in this systematic review was to collect and organize information from the included studies in accordance with the research objectives. Data were extracted on key study characteristics, including author, year of publication, country, study design, population (parents of children with speech and language delay), research objectives, methods, and analytical approach. In addition, findings related to parental roles, responsibilities,

perceptions, challenges, and coping strategies in caring for children with speech and language delay were extracted for synthesis.

The quality of the included studies was assessed using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Qualitative Research. This tool consists of ten items that evaluate methodological quality, including congruity between research methodology and objectives, adequacy of data collection, representation of participants' voices, ethical considerations, and overall credibility of the findings. Two authors (LL and EM) independently appraised the seven included studies using the JBI checklist. Any discrepancies in scoring or interpretation were resolved by consensus under the supervision of the third author (YS). The results of the appraisal were used to determine the trustworthiness of the evidence before synthesis.

Data from the included studies were synthesized using a thematic synthesis approach as outlined by Thomas & Harden (2008). This process involved three steps: (1) line by line coding of relevant text, (2) grouping the codes into descriptive themes, and (3) developing analytical themes that reflect higher level interpretations across studies. The full texts of the seven included studies were imported into NVivo 12 software to assist with data management and coding. The author (LL) conducted the initial coding process line by line, focusing on findings related to parental roles, responsibilities, perceptions, challenges, and coping strategies in caring for children with speech and language delay. Two authors (EM and YS) reviewed the coding framework, discussed the descriptive themes, and contributed to the refinement of analytical themes. Any disagreements were resolved through consensus discussions among the reviewers. According to the PRISMA flowchart (Fig. 1), the following steps are taken in conducting an article or literature search.



Fig. 1. PRISMA flow chart of study selection

A total of 336 records were identified through electronic database searches (PubMed = 201, Sage Journals = 34, Science Direct = 26, Scopus = 15, Taylor & Francis = 60). After removing duplicates, 176 records remained. Titles and abstracts were screened, and 95 records were excluded because they did not meet the eligibility criteria. The full texts of 81 articles were assessed, of which 74 were excluded as they did not fit the inclusion and exclusion criteria, such as not addressing parental roles in caring for children with speech and language delay, focusing on other developmental disorders, or lacking qualitative design. Finally, 7 studies met the eligibility requirements and were included in the synthesis. A total of seven studies were included in this review, published between 2021 and 2025. The majority of studies originated from Indonesia (3

studies), followed by Malaysia (2 studies), and single studies from Brazil (1 study) and a cross national sample across 10 countries (1 study). This indicates that Indonesia contributed the largest number of studies on parental roles in caring for children with speech delay within the reviewed period. In terms of publication year, the earliest included articles were published in 2021, while the most recent was in 2025. The distribution shows an increasing trend in publications after 2021, with more studies appearing in 2023–2025, suggesting growing attention to the topic in recent years. The total sample size across all studies was approximately 40 parents/caregivers (with individual studies ranging from single case studies to groups of 20 participants). Most studies recruited mothers of children aged between toddlerhood and early childhood with speech delay. Overall, the included studies highlight that recent research on speech delay caregiving is concentrated in Southeast Asia, particularly Indonesia and Malaysia, with emerging international contributions.

The quality of the seven included studies was assessed using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Qualitative Research. This checklist consists of ten items evaluating methodological rigor, congruity between research objectives and methods, data collection, data analysis, interpretation of results, and the representation of participants’ voices. Each study was independently appraised by two author (LL and EM), while author (YS) acted as the conflict resolver in case of disagreements. All studies scored between 7 and 10 out of 10 on the checklist, indicating acceptable to high methodological quality. No article was excluded on the basis of quality appraisal, as all studies met the minimum threshold score of 7/10. Thematic synthesis of the seven qualitative studies revealed several key outcome findings related to the role of parents in caring for children with speech delay and was organized into four overarching categories parental roles and responsibilities, challenges and burden, coping and adaptation, and interaction with social and service contexts.

## RESULT

Table 1.  
Article Analysis

Author/Year & Country	Study Design, Methodology and Sample Characteristics	Findings, Themes, and Recommendations
Seresht et al., (2022) Belgia	Qualitative descriptive phenomenological approach, the researchers purposively recruited 20 mothers of children aged 3–9 years with speech delay.	The findings revealed four main themes and several subthemes: Intrapersonal suffering, Feeling empty, Interpersonal conflicts, Need for balance. The authors recommend that health professionals and therapists pay greater attention to the inner suffering of these mothers, provide psychological support, and ctively involve them in counseling and intervention processes.
Fernandes & Souto, (2021) Brasil	Qualitative study, 13 parents / caregivers of children with Speech Delay. Interviews semi-structured, thematic content analysis.	Three major themes: (1) Families generally see family participation as important; some participate actively. (2) Barriers: contextual/environmental and personal factors that hinder participation outside therapy clinic. (3) Some parents do not understand need for family involvement and criticize assistance provision. Include caregivers/families in therapeutic planning as much as the child; consider caregivers’ perceptions; context / daily function; humanization & family centered care.
Okitasari et al., (2023) Indonesia	Qualitative case study, single participant. Data collection via observation over roughly one semester, interviews with parents, emotional state when unable to communicate, and parent background.	Four major themes / findings (1) Speech Clarity Issues child mispronounces or omits sounds H, Z, X at start or end of words; speech intelligibility limited except for mother. (2) Emotional Impact, child often emotional when unable to express feelings verbally. (3) influence of parent role & background, parental role and background are among factors influencing worsening speech; need

Author/Year & Country	Study Design, Methodology and Sample Characteristics	Findings, Themes, and Recommendations
Mahira et al., (2025) Indonesia	A qualitative study using a phenomenological approach. Participants were mothers of children diagnosed with speech delay, recruited through purposive sampling. In depth interviews were conducted to explore the mothers' lived experiences, sources of stress, and coping mechanisms in caring for their children. Data were analyzed thematically using an inductive method and triangulation to ensure validity.	for parental support emphasized. (4) school performance & teacher support, despite speech delay, child's school language subject performance not poor; teacher uses alternative language learning methods; school environment motivates child. Recommendations: increased parental support in home setting to complement teacher's efforts use of alternative or motivating language learning methods by teachers, focus on emotional wellbeing of child when speech delay impairs communication and possibly targeted intervention for specific speech errors (e.g., sound substitutions/omissions of H, Z, X etc.).
Alias and Ramly (2021) Malaysia	This qualitative case study was conducted in Malaysia and involved two parents, each with a child experiencing speech delay. Participants were selected using purposive sampling. Data were collected through semi structured interviews and document analysis (parents' personal notes during speech therapy sessions). Thematic analysis was performed using ATLAS.ti software	Three main themes emerged: (1) Emotional reactions to diagnosis, mothers experienced shock, sadness, denial, and frustration upon learning about their child's speech delay; (2) Coping strategies, mothers used both <i>emotion focused</i> and <i>problem focused coping</i> , such as seeking social support, increasing faith or prayer, and engaging in therapy sessions; (3) Influence of family support, family involvement and understanding reduced mothers' stress and improved resilience. The study recommends providing continuous counseling and education for parents, strengthening family based support systems, and fostering collaboration with speech therapists to enhance parental well being and child development outcomes.
Anggraini & Ramadhani, (2021) Indonesia	Qualitative descriptive study. Data were collected through interviews, observation, and documentation. Participants: parents of early childhood children diagnosed with speech delay.	Five key factors influenced parental involvement in speech activities at home: perceived language development, emotion, knowledge, child's performance, and support. Parental motivation was strengthened by guidance from speech therapists, observed child progress, and family support. The study recommends ongoing training and support from therapists to empower parents in conducting effective speech activities at home, emphasizing that active parental involvement is crucial for improving children's speech development
Hasanah & Nor, (2023) Malaysia	A qualitative descriptive study using a case study approach. Data were collected through observation, in depth interviews, and documentation. The participants were the parents of	Findings/Themes: (1) Emotional Support: Parents show affection, motivation, and patience during speech development struggles. (2) Instrumental Support: Providing therapy routines, educational games, and regular communication. (3) Informational Support: Parents seek information from therapists, teachers, and online sources about speech stimulation. (4) Social Support: Engaging extended family and community to help the child's communication progress. Recommendations: Enhance parent education on early speech stimulation, encourage collaboration between families and speech therapists, strengthen emotional and social support networks for parents managing children with speech delay. The study found that parents played a key role in stimulating their child's speech development through consistent daily practice and emotional support. Three main themes emerged: (1) Parental Efforts and Consistency, parents

Author/Year & Country	Study Design, Methodology and Sample Characteristics	Findings, Themes, and Recommendations
	one child diagnosed with speech delay. The study focused on the parents' strategies, interactions, and support efforts in assisting their child's speech development at home.	continuously encouraged their child to speak by repeating words, using simple language, storytelling, and integrating speech stimulation into daily routines; (2) Emotional and Motivational Support, parents showed patience, affection, and motivation to build the child's confidence and reduce frustration; and (3) Collaboration with Professionals, parents actively communicated with teachers and speech therapists to align intervention strategies. The study recommended that parents maintain verbal interactions at home, limit screen exposure, and collaborate closely with professionals to ensure consistent progress in speech therapy. Educational institutions were also advised to provide counseling and training programs to strengthen parental knowledge in supporting children with speech delay.

### Parental Roles and Responsibilities

Parents' involvement extended well beyond fulfilling the basic needs of their children with speech and language delay. They were expected to take on multiple roles, including being language facilitators, emotional supporters, home based educators, and coordinators with professional services. In many cases, this meant integrating speech therapy exercises into everyday routines, such as during play, mealtime, or storytelling, which required significant time and dedication (Alias & Ramly, 2021). Several studies also highlighted how parents served as bridges between their children and the outside world, interpreting children's needs and advocating for them in educational or clinical settings (Hasanah & Nor, 2023). The caregiving role was not only functional but also deeply emotional. Parents described how caring for a child with delayed communication shaped their identity and family relationships. While some parents perceived this responsibility as a source of pride and purpose, others experienced it as overwhelming and burdensome. The duality of these roles reflects the complexity of parenting in this context where responsibility brings both empowerment and strain simultaneously. This underscores the importance of viewing parental roles not as static duties but as evolving processes shaped by family dynamics, cultural expectations, and service environments (Hasanah & Nor, 2023).

### Challenges and Burden

The challenges experienced by parents were multifaceted and interconnected. Emotional stress was consistently reported, with mothers in particular describing persistent worry about their child's future and a sense of guilt for not providing adequate stimulation or care (Seresht et al., 2022). Physical fatigue and financial strain often compounded these feelings, as therapy sessions required significant resources, and in some cases, parents had to give up employment opportunities to provide full time care. (Tan et al., 2019). Social stigma was another recurring burden. Parents reported that relatives, neighbors, and even educators sometimes misunderstood speech and language delay, perceiving it as laziness or poor parenting (Okitasari et al., 2023). This stigma not only heightened parents' isolation but also limited their access to social support. Moreover, gendered expectations intensified the caregiving burden, as mothers were often expected to bear the majority of caregiving responsibilities, while fathers were less engaged, either due to work demands or cultural norms. The convergence of these challenges highlights how parental burden is shaped not just by the child's condition but also by social, cultural, and structural determinants (Anggraini & Ramadhani, 2021).

### Coping and Adaptation

Despite substantial burdens, parents demonstrated remarkable resilience through diverse coping strategies. Social support, particularly from extended family and community networks, played a critical role in reducing stress and enhancing parents' sense of competence (Anggraini & Ramadhani, 2021). Spirituality and religious faith were also prominent across multiple studies, serving as sources of hope, comfort, and meaning making in the caregiving journey. These practices allowed parents to reframe their experiences, sustain optimism, and maintain long term motivation in supporting their children (Tan et al., 2019). Parents also developed individualized strategies of adaptation. These included restructuring family routines, breaking caregiving tasks into manageable steps, and creating informal peer networks with other parents of children with similar conditions. While these strategies demonstrated adaptive flexibility, their effectiveness was influenced by the resources available within the family's cultural and socioeconomic context (Saminder Singh et al., 2025). For example, parents from higher resource settings often had better access to therapy services and professional guidance, while those from lower resource environments relied more heavily on personal resilience and community support. This variability underscores the importance of tailored interventions that build upon existing family strengths while addressing systemic gaps (Fernandes & Souto, 2021).

The relationship between parents and the healthcare and educational systems was found to be a crucial determinant of caregiving experiences. In supportive contexts, parents described collaborative partnerships with therapists, where professionals not only delivered therapy but also guided parents in how to reinforce learning at home (Hasanah & Nor, 2023). Such collaboration empowered parents and reduced their sense of isolation, enhancing both caregiving confidence and child outcomes (Fernandes & Souto, 2021). However, several barriers persisted across settings. Limited availability of speech therapy services, long waiting times, and inconsistent follow up care left many parents feeling neglected by the system (Okitasari et al., 2023). In some countries, lack of awareness among professionals further exacerbated parental frustration, as parents often felt they had to educate service providers about their child's condition. Cultural differences also shaped parental experiences with services (Mahira et al., 2025). In collectivist societies, community and family networks often provided substantial informal support, while in more individualistic contexts, parents relied heavily on professional services, highlighting inequalities when these services were inaccessible (Harding et al., 2024). Overall, the synthesis demonstrates that parents play a pivotal role in caring for children with speech and language delay, but their experiences are shaped by emotional burdens, cultural perceptions, and the availability of professional and social support. Strengthening parental knowledge, reducing stigma, and improving accessibility of speech therapy services are crucial to supporting both children and their families.

## **DISCUSSION**

This study reviewed the seven selected articles from various countries and that examined parents' roles in caring for children with speech and language delay. Thematic synthesis of these studies produced four consistent outcome domains: (a) Parental roles and responsibilities (daily language stimulation, therapy practice at home, advocacy), (b) Challenges and burden (emotional strain, financial/time costs, stigma), (c) Coping and adaptation (family and community support, religious/spiritual resilience, practical strategies), and (d) Interaction with social and service contexts (collaboration with therapists, barriers in service access and quality). Parental roles and responsibilities, across studies, parents especially mothers were described as principal actors who integrate therapy into daily routines, reinforce therapist recommendations, and act as advocates for their children (Hasanah & Nor, 2023). Evidence for this outcome is consistent across multiple settings (Indonesia, Malaysia, Brazil, Belgium), indicating a robust qualitative signal that parental engagement is central to children's progress.

Challenges and burden, the evidence consistently shows moderate to strong support that parents experience significant psychosocial and practical burdens (stress, guilt, financial strain, limited spousal support) (Okitasari et al., 2023). These findings are repeated across the included studies and

appear relevant to clinicians, service planners, and policymakers who aim to reduce caregiver burden (Anggraini & Ramadhani, 2021). Coping and adaptation, studies report varied coping strategies (social support, spiritual coping, routine adjustments). The strength of evidence is moderate: coping mechanisms are frequently mentioned but are heterogeneous in form and culturally mediated (Anggraini & Ramadhani, 2021).

Interaction with social and service contexts, there is consistent evidence that quality of professional support and service accessibility materially shape parents' experiences. Parents who reported collaborative relationships with therapists described greater confidence and more effective home practices; conversely, long waits and inconsistent guidance undermined parental efforts. This outcome has direct relevance for healthcare providers and service managers (Novianti & Anggraini, 2024). The findings of this review hold important implications for multiple stakeholders. For healthcare providers, the evidence underscores the need for parent focused guidance that is both practical and feasible in home contexts (Anggraini & Ramadhani, 2021). Clear instructions on daily language stimulation activities, along with proactive and consistent communication between therapists and families, can strengthen family centered care and improve outcomes for children with speech and language delay (Hasanah & Nor, 2023).

For families and service users, the synthesis highlights the value of recognizing common stressors such as emotional strain, stigma, and limited knowledge, as well as the practical coping strategies that parents frequently adopt (Novianti & Anggraini, 2024). These include integrating therapy into family routines, creating peer support networks, and drawing strength from religious or community based resources. Such strategies are not only adaptive but also transferable, suggesting that peer to peer sharing and support groups could serve as effective interventions (Tan et al., 2019). For policymakers and program planners, the evidence emphasizes the urgency of investing in accessible and continuous speech language services that go beyond clinical interventions. Parent education programs, financial and social support mechanisms, and strategies to reduce logistical barriers are essential to sustaining effective home-based caregiving. Addressing these systemic challenges may reduce caregiver burden while simultaneously enhancing children's developmental outcomes (Alias & Ramly, 2021).

The synthesized qualitative evidence suggests that interventions aiming to improve speech and language outcomes should explicitly integrate parent support components: (1) practical training for feasible home activities, (2) psychosocial support to address caregiver stress, and (3) system level changes to reduce access barriers. Future research should broaden participant diversity (include fathers, wider socioeconomic ranges), report reflexivity and contextual detail more fully, and evaluate family centered supports in mixed methods designs to bridge lived experience insights with measurable child outcomes.

## **CONCLUSION**

Based on a comprehensive review of seven articles qualitative studies exploring the role of parents in caring for children with speech and language delay. The findings highlight four central themes: (1) parents are the primary agents of daily language stimulation, therapy practice, and advocacy; (2) caregiving is associated with significant emotional, financial, and social burdens, often disproportionately carried by mothers; (3) families employ diverse coping and adaptation strategies, including reliance on social networks, spirituality, and personal resilience; and (4) parents' experiences are strongly shaped by the accessibility and quality of professional and community services. These findings suggest that supporting parents is critical to improving outcomes for children with speech and language delay. Practical implications include the need for healthcare providers to deliver clear, feasible guidance for home based practices, establish consistent collaboration with families, and develop culturally sensitive interventions. Policymakers should prioritize accessible and continuous speech language services, invest in parent education, and

address barriers such as stigma and financial strain.

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