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## REVIEW ARTICLE

# The Impact of Brain Developmental Delay on the Learning Process During the Early Childhood Phase

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## ABSTRACT

This article investigates how early childhood learning processes are affected by delayed brain development. The crucial phases of brain development are discussed, along with the ways in which environmental and genetic variables can cause developmental delays. The prefrontal cortex (PFC) and hippocampus, two important learning brain regions, are examined in connection to language, motor, cognitive, and social-emotional development. The article explores the effects of neurodevelopmental disorders like as autism spectrum disorder (ASD) and attention deficit/hyperactive disorder (ADHD) in more detail and offers solutions for therapeutic assistance, early intervention, and educational approaches. The need of early diagnosis and intervention for the best learning results is emphasised in the work.

**Keywords:** brain development, developmental delays, neural connectivity, synaptic pruning, neurodevelopmental disorders, educational therapy

## 1. INTRODUCTION TO BRAIN DEVELOPMENT IN EARLY CHILDHOOD

The brain grows and changes rapidly at early childhood. At the rapid process of synaptogenesis, a child's brain will developed 80% of its adult volume by the age of three (Mackes et al., 2020). This early stage is critical for the development of cognitive, physical, and social skills, which lay the groundwork for subsequent learning. Brain regions such as the PFC, hippocampus, and cerebellum are especially crucial in early childhood development. The PFC, which is in charge of executive skills like attention, problem solving, and decision making, develops during childhood and adolescence (Kolk and Rakis, 2022). The hippocampus, which is vital for memory formation, and the cerebellum, which is essential for motor coordination, are both experiencing major development during this time (Jacobi et al, 2021).

Developmental milestone aids have been set and used in detecting delays in brain growth. However, these milestones are not always fulfilled on time, and delays in motor abilities, language acquisition, and social interaction may indicate developmental difficulties (Nelson et al., 2024). Delays in one area of development can affect others. Language delays, for example, might interfere with communication, affecting social connections and cognitive abilities. While it is critical to notice when development deviates from usual patterns, it is also critical to comprehend developmental heterogeneity among children. Some children may achieve some milestones later than others, although this is not always a concern. However, chronic delays that impair a child's capacity to connect with their surroundings and learn may indicate the need for intervention.

Brain development is shaped by a combination of genetic and environmental factors. Genetics determine the basic framework for brain growth, while experiences in the early years' environment influence how the brain's neural circuits are formed and strengthened (Mishra et al., 2021). Factors such as nutrition, sensory experiences, exposure to language, and emotional support play significant roles in shaping brain development. Children who experience enriched and stimulating environments tend to have better cognitive and social outcomes, as positive stimuli promote neural growth and strengthen synaptic connections.

Early diagnosis of developmental delays enables timely intervention, potentially mitigating the harmful impact on learning and behaviour. Educational therapy, speech therapy, occupational therapy, and specialised education programs are most effective when implemented early in childhood, when the brain is most 'malleable' or 'plastic'. Thus, knowing early brain development is critical for recognising and proactively treating deficiencies in order to assure children's best learning outcomes (Lipkin et al., 2020).

During infancy and early childhood, neural-connectivity occurs at an alarming rate. Millions of synapses are created. This enables the brain to process and store vast amounts of information. The peaking of the synaptic density enables rapid learning and adaptation to the environment. However, this surge in synaptic formation is followed by a crucial phase known as '*synaptic pruning*', where unused or weak neural connections are eliminated. This pruning process is highly dependent on environmental stimuli and experiences (Scholl et al., 2021).

When a child is not adequately exposed to diverse and enriching experiences, critical connections may fail to develop or persist, potentially hindering cognitive and emotional growth. This explains why stimulating educational environments and early interventions are vital. Such conditions help shape the brain's architecture by reinforcing essential neural pathways while pruning away less critical ones. Proper synaptic pruning improves the brain's efficiency, enabling it to focus on processes and behaviours essential for survival, learning, and adaptation (Wang et al, 2020).

Despite accounting for only 2% of total body mass, the brain utilises around 20% of the body's energy (Steiner, 2020). Sleep is essential for meeting energy demands and preserving neural health. Sleep allows the brain to consolidate memories, remove metabolic waste products, and replenish energy stores. The glymphatic system, which works predominantly during sleep, eliminates toxins and promotes brain regeneration, maintaining optimal cognitive performance (Frazer et al., 2021).

Sleep also maintains the balance of neurotransmitters and hormones required for emotional stability and learning. Without enough sleep, the brain struggles to maintain an energy balance, resulting in cognitive deficiencies, emotional swings, and poor decision-making. Thus, the interdependence of neural connectivity, pruning, and sleep underscores the brain's intricate need for energy conservation and renewal, especially during the formative years when neuroplasticity is at its peak (Simon et al., 2022).

## **2. CONSEQUENCES OF BRAIN DEVELOPMENTAL DELAYS**

During typical brain development, neuronal networks form strongly, and synaptic pruning refines these connections in response to external cues and experiences (Westacott & Wilkinson, 2022). Neuronal connectivity and synaptic pruning are disrupted when the brain growth is delayed. This results in long-term changes in brain structure and functions. These mechanisms may be compromised in developmental delays, resulting in either an oversupply of weak, disorganised connections or an underdeveloped essential pathway.

## **2.1 Disrupted Neural Connectivity**

In the studies conducted by Lukito et al. (2020), in cases of brain neurodevelopmental delay, including ASD, ADHD and intellectual disabilities, the brain may generate abnormal neural connections. This can result in abnormal communication among brain areas. Children with ASD frequently display hyperconnectivity in certain areas, such as the PFC, as well as decreased long-range connection between regions essential for integrating social, emotional, and cognitive activities. This imbalance can cause issues with information processing, sensory integration, and social relationships. Similarly, in ADHD, poor connection between the default mode network (DMN) and executive control networks can show as inattention and impulsivity (Harikumar et al., 2021).

## **2.2 Altered Synaptic Pruning**

Neuronal synaptic pruning is an essential process for optimising brain efficiency. Such function is impaired during brain developmental delays. Excessive pruning causing the loss of critical brain connections is commonly seen in some neurodevelopmental diseases. As suggested in the studies conducted by Johnson & Hyman (2022), excessive synaptic pruning throughout adolescence may contribute to the cognitive abnormalities seen in schizophrenia. However, in contrast, insufficient pruning can result in synapse congestion, as seen in ASD. This lack of refinement can overload brain circuits, lowering information processing efficiency and contributing to issues with focus, learning, and behavioural regulation.

As the adaptability of the brain is disrupted by the impairment of the neural connectivity and pruning, it impedes the development of cognitive, emotional and social skills, resulting in recurrent delays in meeting developmental milestones. This disruption can also trigger inflammatory responses and oxidative stress, which further damage neurons and synapses. The brain expends more energy to manage and repair this damage, contributing to fatigue and cognitive difficulties (Schurhoff & Toborek, 2023). Such disruptions may increase the brain's energy demands, worsening symptoms such as difficulty in sustained attention, and reliance on compensating mechanisms (Amaral-Silva & Santin, 2023). Early interventions aimed at these disrupted processes, such as educational, emotional and behavioural therapies that promote optimal connectivity environmental enrichment, are crucial for preventing long-term consequences and promoting healthy brain development.

## **3. IMPACT OF DELAYED BRAIN DEVELOPMENT ON LEARNING**

Different developmental delays are associated with different cortical and subcortical parts of the brain. Thus, developmental delays can appear in a variety of ways, depending on the part of the brain involved. A range of impairments can be induced by the developmental delays. Cognitive delays, being one of them, are defined by the sluggish development of PFC associated executive functions associated with mental skills such as problem solving, reasoning, and working memory (Carvajal-Flores et al. 2020). According to Dayananda et al. (2023), children with cognitive impairments may have impaired hippocampus and struggle to grasp and remember new information, which might impair their academic achievement.

Developmental delays in early life can alter the core cognitive and executive functioning skills required for optimal learning. It has a significant impact on learning processes. According to Carvajal-Flores et al. (2020), the PFC, which is critical for attention, working memory, and problem solving, grows gradually and may be delayed in children with developmental problems (Willoughby et al., 2017). When this region develops more slowly, children may struggle with staying focused during classroom tasks, staying focus, following directions, regulating emotions and managing their behaviour. These challenges immediately restrict their capacity to interact with learning materials, participate in group activities, and achieve academic success. During developmental delays, hippocampus as associated with long term memory, may also be affected. Children with delayed hippocampus development may have difficulty retaining information and concepts learning. It deeply affects not only academic learning but also the acquisition of everyday skills (Dayananda et al., 2023), making it difficult for them to build on prior knowledge and understand more complex ideas subsequently.

Children will developmental delay is often seen to have language development simultaneously as language acquisition requires the coordinated functioning of several brain areas, such as Broca's area and Wernicke's area. These areas are associated with speech production and language comprehension, respectively (Hasan et al., 2024). The delay in the development of these areas often cause children to have difficulty in understanding spoken language, and challenges in expressing ideas. Speech development delays can lead to a limited vocabulary, difficulties constructing phrases, and understanding issues. As language is also a tool for social interactions and forming relationships, linguistic deficiencies also affect engaging in meaningful exchanges with peers and adults and challenges to learning. Language delays are frequent among children with ASD or intellectual disabilities.

Children who struggle with fine or gross motor skills may have motor delays. Motor delays are problems with physical coordination, such as walking, running, or utilising hands for tasks like writing or painting. This can also impede learning, as they face difficulty participating in activities that require hand-eye coordination, such as drawing, writing, or even manipulating objects (Araujo et al., 2020). As the motor coordination is affected, children with such delays may face independence issues as they struggle to participate in classroom activities or physical education. These delays could result from abnormalities in the development of brain areas involved for movement and motor control, such as the cerebellum.

In the studies conducted by Vandesande et al., (2022), children with developmental delays often display social-emotional delays and social communication deficits. These delays may cause them to face challenges in developing attachments, dealing with peers, or controlling emotions. The children may also exhibit aggressive and anxious behaviours, which can have an impact on their relationships and ability to participate in class activities.

Together, these delays can create a cascade effect, where difficulties in one area of development, such as attention or language, exacerbate challenges in other areas, such as memory or social interaction. Such multi-faceted challenges may also lower confidence and learning motivation, which can further impede the children's academic and social performance.

## **4. CAUSES OF DEVELOPMENTAL DELAYS**

Many factors causing developmental delays in early childhood have been identified World Health Organisation. However, these variety of factors could be broadly classified into genetic, environmental and prenatal influences. Understanding these causes is crucial for identifying when a child is at risk and for ensuring that appropriate interventions are provided.

### **4.1 Genetic Factors**

According to Setijowati et al. (2022), genetic disorders such as faulty genes or chromosomal defects can result in developmental delays interfering with normal brain development. In the case of Down syndrome, children with such syndrome are often seen to have an extra chromosome 21. They often display speech delays, difficulties in motor coordination and frequent cognitive deficits. Similarly, as noted by Zhang et al. (2022), in the case of Fragile X syndrome, the genetic illness is caused by X chromosomal abnormalities. Children with Fragile X are often seen to have social communication challenges, learning disabilities and intellectual deficits. These genetic diseases can alter brain development in predictable ways, allowing for early identification and intervention.

## **4.2 Environmental Influences**

A child's environment has a substantial impact on brain development. The quality of caregiving, access to nourishment, exposure to pollutants, and levels of cognitive stimulation can all help or stunt growth (Farid et al., 2020). For example, children reared in neglectful or impoverished households are more likely to experience developmental delays due to a lack of engaging experiences that stimulate brain growth. These children frequently have fewer opportunities for learning, social contact, and cognitive engagement, which can impede the development of critical abilities.

### **(i) Traumatic Brain Injury (TBI)**

In the studies conducted by Keena and his colleagues (2023), TBI in children, resulting from falls, vehicle accidents, sports injuries, or physical abuse, can have profound and long-lasting effects on cognitive, emotional, and physical health. TBIs vary in severity, but even mild injuries can disrupt normal brain development and function. Cognitive impairments associated with TBI include difficulties with memory, attention, and executive functioning, which are crucial for academic performance and daily activities. Children with TBI frequently show more irritability and problems with self-control and emotional regulation, therefore emotional regulations and behaviour management issues are rather typical and common (McDonald and Genova, 2021). These altered behaviour and mental impairments may impede cognitive development and are detrimental to meaningful relationship formation with family and friends. Social dysfunction may lead to poor social communication skills as well.

Early intervention and rehabilitation programs often include cognitive therapy, educational therapy, emotional and behavioural therapy, occupational therapy, physio therapy, and psychological support etc to address the multifaceted needs of the child. These therapies could buffer long term harmful consequences and are crucial mitigating factors. Family involvement and support in the rehabilitation process is also essential. Supportive home and school environments can significantly enhance the brain's neural plasticity and recovery. Most importantly, neurotransmitters being synthesise during such therapy programs are essential in promoting neural connectivity and maintenance (Prigatano et al., 2021).

### **(ii) Chronic Stress and Adverse Childhood Experiences (ACEs)**

Chronic stress and ACEs, such as abuse, neglect, neglect, and domestic violence, have profound and lasting effects on brain development. Chronic stress can cause dysfunction in the body and increase the stress hormone cortisol. High cortisol levels can impair neural connections, leading to delayed development of brain regions and functions, such as the PFC involved in executive function and emotion regulation (Nivens et al., 2024). Children with high ACE scores often have problems with attention, motivation and impulse control, and are susceptible to mental health issues such as depression, anxiety and post-traumatic stress disorder (PTSD).

The effects of multiple ACEs can lead to greater risks, leading to greater growth and health problems. Interventions to reduce the impact of ACEs focus on creating a stable, supportive environment and providing mental health support (Shonkoff, 2017). Early identification of children at risk through screening in health and education settings can facilitate timely intervention. Therapies such as cognitive behavioural therapy (CBT) have been shown to be effective in helping children cope with and recover

from trauma (Peters et al., 2021). Providing support to parents and caregivers is also important as it increases their ability to provide a supportive and nurturing environment. Addressing the root causes of ACEs, such as poverty, drug use, and domestic violence, through community leadership and community programs is critical to their prevention and to reducing their impact on brain development (Shonkoff, 2017).

### **(iii) Malnutrition**

Poor cognitive development and developmental delays result from undernourished during a vital phase of brain development. Brain development depends on vital nutrients such iodine, iron, and fatty acids; shortages of these nutrients might be catastrophic (Khandelwal et al., 2020). Intellectual disability is a risk for iodine deficiency in pregnant and early childhood; it can also result in symptoms such as cretinism and slow growth, both of which are marked by extreme mental retardation (Kiely et al., 2021). Myelination, neurotransmitter function, and overall brain development—all of which result in poor mental functions, reasoning, and learning—are affected by iron deficit, especially in early childhood. Critical for the integrity and operation of the nervous system are omega-3 fatty acids present in fish and certain vegetable oils. Lacking these fat molecules could cause behavioural issues and cognitive deficits (Kiely et al., 2021).

Neglect of nutrition not only has a direct impact on brain growth but also an indirect on mental and physical development by means of illnesses and infections that exacerbate underdevelopment of the latter. Dealing with malnutrition entails making sure expecting mothers get enough nutrition, promoting breastfeeding, and giving young children and infants complementary feeding. Also effective in lowering the occurrence of malnutrition are supplementary programs including salt fortification with iodine and iron. Integrating education, health, and nutrition in early childhood programs can go a long way toward counteracting malnutrition and supporting brain growth. Constant endeavours to solve food insecurity and enhance access to healthy meals are critical to keep children from becoming malnourished and damaging their growth and brain development (Kiely et al., 2021).

### **(iv) Exposure to Violence**

Exposure to violence, whether conscious or perceived, can have profound and lasting effects on brain development. Children, who have been abused physically or emotionally, often experience significant stress, which can alter the structure and function of brain regions responsible for emotion regulation and cognition, such as the amygdala and PFC (Mueller & Tronick, 2020). These changes can cause anxiety, anger, and problems with learning and memory. Continued activation of the stress response system leads to elevated cortisol levels, which damage neural connections and inhibit the growth of new neurons, particularly in the hippocampus, which is critical for memory and learning (Knezevic et al., 2023). Children who experience violence are susceptible to PTSD, depression, and other psychological problems. The effects of violence on the developing brain manifest themselves in a variety of behavioural problems, including impulsivity, hyperactivity, and the inability to form healthy relationships (Hamdan & Hallaq, 2021).

Strategies to help children who have experienced abuse should focus on creating a safe and nurturing environment. Psychological interventions, such as cognitive behavioural therapy (CBT), can help children process and recover from traumatic events. School programs that promote learning and social well-being will also benefit. These policies and strategies seek to help families impacted by disasters and lower aggression and provide affect children the access to support and treatment will lower the adverse effects of violence on brain development and bolster resilience and recovery (Peters et al., 2021).

### **(v) Mental Health of Parents**

Parents' mental health issues can have a long-lasting consequence on the brain development of their children. Children sometimes grow up in contexts of such negative environment might have their intellectual and emotional development disrupted when their parents have psychological issues such

anxiety, depression, or trauma. Such difficulties can change the organisation and operation of key brain areas related in cognitive and emotional processing (Jiang et al., 2021). Including irritability and anxiety, such modifications could also add to problems with memory, learning, and emotional regulation.

Chronic exposure to parental emotions distress can trigger stress response behaviours in children, leading to elevated cortisol levels. This elevated cortisol level affects the neurogenesis of the hippocampus and also the synaptic pruning of the PFC (Parenteau et al., 2020). These areas associated with memory and learning are important for a healthy brain development. Mental health problems in parents have been linked to an increased likelihood of psychological problems in their children, including post-traumatic stress disorder, depression and other disorders, as well as behavioural problems such as impulsivity, impulsivity and the inability to form healthy relationships.

Support for parents with mental health issues should crucially emphasise the need of establishing stable, caring and loving family environments. Trauma-focused cognitive behavioural therapy (TF-CBT) and other evidence-based psychological treatments can help parents to develop better coping strategies and provide a loving home environment for their children (Peters et al., 2021). Children also greatly benefit from school-based initiatives encouraging critical thinking, perseverance, and emotional well-being. Supporting families and dealing with parental psychiatric health call for well-planned social and institutional initiatives. Giving access to mental health services and thorough support systems can help to reduce the effect of parental difficulties on brain development in children, therefore supporting resilience and recovery in both children and parents (Werlen et al., 2020).

#### **(vi) Socioeconomic Status (SES)**

One of the most important risk factors for brain development and poor cognitive results is low socioeconomic status. Particularly common among children from poor socioeconomic backgrounds are lack of resources, education, and healthcare (biological development hindering elements). The SES related environmental influences include exposure to aggression, absence of intellectual stimulation, bad nutrition, as well several other factors impairing brain development and performance (González et al., 2024).

According to Li et al. (2021), teenagers from low-income groups showed variations in brain regions linked with language, memory, and executive function compared with their wealthier counterparts. Young as they were, these people showed a strong tendency for aggression, academic issues, and developmental slowness. Moreover, low fetal brain development can result from inadequate prenatal care and maternal stress; SES might also affect brain development even before birth. Interventions to reduce the impact of low socioeconomic status on brain development have focused on improving access to education, healthcare, and nutrition. Research shows that early childhood education programs such as Head Start can improve cognitive and social development outcomes for children from low-income families. In addition, a key to reducing the impact of socioeconomic status on brain development is creating policies that address income disparities and provide financial support to low-income families. Children from low SES families need comprehensive strategies that integrate health, education, and social services to enhance their development and increase equity in developmental outcomes (Li et al., 2021).

#### **(vii) Sleep deprivation**

Sleep deprivation in children can have a significant impact on brain development and function. Good sleep is essential for mental function, memory formation, and emotional regulation. Sleep deprivation can affect attention, learning, and problem-solving skills, leading to behavioural problems such as inattention and aggression (Spruyt, 2021). Chronic sleep deprivation can affect their physical health, leading to problems such as obesity, a weakened immune system, and an increased risk of mental health problems. The developing brain is vulnerable to sleep deprivation because it relies on sleep to perform critical functions, such as building synapses and forming neural connections.

Children who do not get enough sleep may have problems with schoolwork and social interactions, including irritability and emotional problems. Establishing good sleep is essential for supporting brain development. Parents and caregivers can promote sleep hygiene by establishing a consistent bedtime, ensuring a calm and restful sleep, and reducing the amount of time awake before bedtime (Jarrin et al., 2020). Addressing sleep disorders, such as sleep apnea or restless legs syndrome, with medical help can improve sleep quality and overall health. Schools and communities can help promote good sleep by educating families about the importance of sleep and providing resources to manage sleep-related problems. Research on the effects of sleep on brain development continues to highlight the important role of adequate sleep in promoting cognitive and emotional well-being in children (Spruyt, 2021).

#### **(viii) Lack of Healthcare**

Brain development such as untreated health issues, hearing and vision problems can be greatly affected by restricted access to healthcare. Developmental delays can all slow cognitive and physical development. Zhong and his colleagues (2022) find that children not provided with early medical attention when required correlates to more developmental delays and long-lasting health issues. Poor healthcare can lead to missed opportunities for early diagnosis and treatment of conditions such as autism, ADHD and other mental health disorders that can have long-term effects on learning and behaviour (Malik-Soni et al., 2022).

Regular health check-ups, vaccinations, and testing are essential for early detection and treatment of potential problems. If hearing and vision problems are not treated promptly, they can seriously interfere with a child's ability to learn and communicate with the world around them, leading to speech delays and poor academic performance (Zhong et al., 2022). Access to adequate health care, including preventive measures, mental health care, and specialized treatment, is essential for brain health.

Promoting fairness in health results and development depends crucially on public health measures enhancing access of all children, irrespective of economic level, to medical services. Public health initiatives that offer information and support to families could also significantly help guarantee that youngsters get the treatment they need. Further research and activism are necessary to tackle inequality in access to medical services and create plans to offer all children with complete and integrated services (Zhong et al., 2022).

#### **(ix) Prenatal Factors**

Brain development can be much influenced by the mother's overall health throughout the period of pregnancy, especially diet, level of stress, and toxin exposure. Undernourishment of mothers may cause underdeveloped brain areas, which in turn produce intellectual and physical handicaps in their children (Fitzgerald et al., 2020). Lacking critical nutrients including omega-3 fatty acids, iron, and folate can hinder brain growth and cause long-term learning disabilities.

Furthermore, important in brain development are prenatal environmental influences including exposure to toxins, disease, stress, and maternal health. Pregnant maternal infections including rubella and Zika virus could lead to brain damage as well as neurodegenerative diseases (Ganguli & Chavali, 2021). The release of stress hormones from the physical and emotional anguish of childbirth can change the structure and functioning of the brain, hence affecting its development and raising the likelihood of health issues later in life. Normal brain development might be upset by exposure to environmental pollutants including lead, mercury, and pesticides, therefore cause cognitive and behavioural issues (Iqbal et al., 2020). Reducing these risks depend on promoting maternal health by means of prenatal treatment. Prenatal care should encompass health screening, diet support, stress control, and immunization prevention. Prenatal brain development depends largely on public health initiatives that help mothers to improve their health and lower environmental exposure. Early childhood care depends much on informing expecting mothers about the need of a healthy lifestyle and equipping them with techniques to reduce stress and avoid substance abuse. The aim of research now under way is to find methods of safeguarding brain health by studying how the prenatal setting influences brain development.



By and large, family care including environmental, mental, and physical health is vital in preventing neurodegenerative diseases and supporting healthy brain development (Howard & Khalifeh, 2020).

### **(x) Maternal Drug Use**

Fetal Alcohol Syndrome (FAS) is a well-known prenatal developmental disorder. Maternal alcohol consumption during pregnancy can affect brain function in the developing brain, leading to physical and mental disabilities (Popova et al., 2020). Children with FAS often have developmental delays, intellectual disabilities, and problems with motor coordination and social interaction. Maternal drug use during pregnancy exposes the developing fetus to harmful substances, which can cause a variety of neurological disorders and long-term intellectual and behavioural disabilities. Alcohol, drugs, and tobacco are very dangerous, and alcohol abuse can lead to FAS as characterised by brain abnormalities, intellectual disabilities, and behavioural problems. Children with FAS often have problems with attention, learning, memory, and executive function, which can persist into adulthood (Kautz-Turnbull & Petrenko, 2021). Prenatal exposure to drugs such as opioids and cocaine has been associated with Neonatal Abstinence Syndrome (NAS), which is characterised by withdrawal symptoms, and can lead to long-term developmental problems, including impairments in cognitive function, emotional regulation, and attention (Martins et al., 2019).

Smoking in pregnant mothers is linked with low birth weight, preterm birth, and an increased likelihood of ADHD (Havdahl et al., 2022). Among the ways compounds impair brain development are changes in neurotransmitter systems, disruptions of brain growth, and generation of oxidative stress, toxic for brain cells. Early behavioural modification and early detection are key to managing birth outcomes. Multidisciplinary approach including health experts, educators, and social services is the foundation of thorough care and support for children isolated from their families (Morgan et al., 2021). Prenatal drug exposure can be lowered and results for mothers and their children improved by means of antenatal programs that offer substance abuse rehabilitation, education, and support. Developing approaches designed to prevent them depends greatly on additional research on the therapy of neurodevelopmental problems (Kautz-Turnbull & Petrenko, 2021).

## **5. CONCLUSION**

Each of these developmental delays and specific learning disabilities can cause many developmental issues for their children. With appropriate programs and support for parents, and educational strategies such as educational therapy, emotional and behavioural therapy for children, children with developmental and learning disabilities can also make significant progress and reduce the long-term negative effects of developmental delays. Understanding the practical factors that contribute to these conditions is essential for creating effective educational strategies and systems to help children succeed and reach their full potential.

Educational strategies often include a comprehensive psychoeducational diagnostic assessment, evaluation and profiling (PDAEP), and preparation of an individualised education plan (IEP) specifying the targeted interventions (Chua & Harjit, 2022). These programs may include speech and language therapy, which focuses on delays in communication skills, and occupational therapy, which helps children develop motor coordination, and daily living skills that change over time through extra work, cognitive breaks, or specialized instruction to address specific learning problems. Teachers and educators should also be trained in the effective implementation of these strategies, to ensure that children with developmental delays can participate in the learning process.

Consequently, one must thoroughly analyse, review, assess, and evaluate developmental delays, learning disorders, handicaps, and challenges so as to assist in the creation of more effective therapy techniques and approaches. A child's developmental, social, and emotional health needs depend on this special approach. Research shows that early treatment works well in tackling these delays before they get embedded and hard to change. Moreover, essential are family-based treatments given that

parents and other caregivers greatly contribute to promoting the growth of kids with developmental issues. Parents who learn behaviour management strategies, communication skills, and developmental markers can help households offer good support at home and in the surrounding area (Grenier-Martin & Ricard, 2022).

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Author has declared that no competing interests exist.

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## REFERENCES

- Amaral-Silva, L., Santin, J.M. Synaptic modifications transform neural networks to function without oxygen. *BMC Biol* 21, 54 (2023). <https://doi.org/10.1186/s12915-023-01518-0>
- Araujo, D. M., Santos, D. C. C., & Lima, M. C. M. P. (2020). Cognitive, language and motor development of infants exposed to risk and protective factors. *International Journal of Pediatric Otorhinolaryngology*, 138. Article ID: 110353. <https://doi.org/10.1016/j.ijporl.2020.110353>
- Chua, A. C. K., & Singh, H. s/o H.S. (2022). Psychoeducational diagnostic assessment, evaluation & profiling on children for educational therapists: A proposed procedure. *Early Years Research*, 2(1), 29-35.
- Dayananda, K. K., Ahmed, S., Wang, D., Polis, B., Islam, R., & Kaffman, A. (2023). Early life stress impairs synaptic pruning in the developing hippocampus. *Brain, Behaviour, and Immunity*, 107, 16-31. <https://doi.org/10.1016/j.bbi.2022.09.014>
- Farid, A., Maqbool, S., Ullah, E., Ali, A., & Farid, Z. (2020). Risk factors in children presenting with developmental delay. *Pakistan Armed Forces Medical Journal*, 70(3), 812-17.
- Frazer, M. A., Cabrera, Y., Guthrie, R. S., & Poe, G. R. (2021). Shining a light on the mechanisms of sleep for memory consolidation. *Current Sleep Medicine Reports*, 7, 221-231. <https://doi.org/10.1007/s40675-021-00204-3>
- Fitzgerald, E., Hor, K., & Drake, A. J. (2020). Maternal influences on fetal brain development: The role of nutrition, infection and stress, and the potential for intergenerational consequences. *Early Human Development*, 150. Article ID: 105190. <https://doi.org/10.1016/j.earlhumdev.2020.105190>
- Ganguli, S., & Chavali, P. L. (2021). Intrauterine viral infections: impact of inflammation on fetal neurodevelopment. *Frontiers in Neuroscience*, 15. Article ID: 771557. <https://doi.org/10.3389/fnins.2021.771557>
- González, L., Popovic, M., Rebagliato, M., Estarlich, M., Moirano, G., Barreto-Zarza, F., ... & Pizzi, C. (2024). Socioeconomic position, family context, and child cognitive development. *European Journal of Pediatrics*, 183(6), 2571-2585. <https://doi.org/10.1007/s00431-024-05482-x>
- Grenier-Martin, J., & Rivard, M. (2022). Managing challenging behaviours at home without services: The perspective of parents having Young children with intellectual and developmental disability. *Journal of Developmental and Physical Disabilities*, 34(2), 373-397. <https://doi.org/10.1007/s10882-021-09804-x>

- Howard, L. M., & Khalifeh, H. (2020). Perinatal mental health: A review of progress and challenges. *World Psychiatry*, 19(3), 313-327. <https://doi.org/10.1002/wps.20769>
- Iqbal, A., Ahmed, M., Ahmad, S., Sahoo, C. R., Iqbal, M. K., & Haque, S. E. (2020). Environmental neurotoxic pollutants: A review. *Environmental Science and Pollution Research*, 27, 41175-41198. <https://doi.org/10.1007/s11356-020-10539-z>
- Jacobi, H., Faber, J., Timmann, D., & Klockgether, T. (2021). Update cerebellum and cognition. *Journal of Neurology*, 268, 3921-3925. <https://doi.org/10.1007/s00415-021-10486-w>
- Jarrin, D. C., Awad, Y. A., Rowe, H., Noel, N. A., Ramil, J., & McGrath, J. J. (2020). Parental expectations are associated with children's sleep duration and sleep hygiene habits. *Journal of Developmental & Behavioural Pediatrics*, 41(7), 550-558. <https://doi.org/10.1097/DBP.0000000000000818>
- Jiang, N., Xu, J., Li, X., Wang, Y., Zhuang, L., & Qin, S. (2021). Negative parenting affects adolescent internalizing symptoms through alterations in amygdala-prefrontal circuitry: A longitudinal twin study. *Biological Psychiatry*, 89(6), 560-569. <https://doi.org/10.1016/j.biopsych.2020.08.002>
- Johnson, M. B., & Hyman, S. E. (2022). A critical perspective on the synaptic pruning hypothesis of schizophrenia pathogenesis. *Biological Psychiatry*, 92(6), 440-442. <https://doi.org/10.1016/j.biopsych.2021.12.014>
- Hamdan, S., & Hallaq, E. (2021). Prolonged exposure to violence: Psychiatric symptoms and suicide risk among college students in the Palestinian territory. *Psychological Trauma: Theory, Research, Practice, and Policy*, 13(7), 772-782. <https://doi.org/10.1037/tra0001043>
- Harikumar, A., Evans, D. W., Dougherty, C. C., Carpenter, K. L., & Michael, A. M. (2021). A review of the default mode network in autism spectrum disorders and attention deficit hyperactivity disorder. *Brain Connectivity*, 11(4), 253-263. <https://doi.org/10.1089/brain.2020.0865>
- Hasan, F., Kalra, N., Siddique, N. A., Kumar, P., & Kumar, V. (2024). Broca's aphasia: A detailed review of its features, origins, diagnosis, and management. *International Journal of Chemical Studies*, 12(5), 8-14.
- Havdahl, A., Wootton, R. E., Leppert, B., Riglin, L., Ask, H., Tesli, M., ... & Stergiakouli, E. (2022). Associations between pregnancy-related predisposing factors for offspring neurodevelopmental conditions and parental genetic liability to attention-deficit/hyperactivity disorder, autism, and schizophrenia: The Norwegian mother, father and child cohort study (MoBa). *Journal of the American Medical Association (JAMA) Psychiatry*, 79(8), 799-810. <https://doi.org/10.1001/jamapsychiatry.2022.1728>
- Kautz-Turnbull, C., & Petrenko, C. L. (2021). A meta-analytic review of adaptive functioning in fetal alcohol spectrum disorders, and the effect of IQ, executive functioning, and age. *Alcoholism: Clinical and Experimental Research*, 45(12), 2430-2447. <https://doi.org/10.1111/acer.14728>
- Khandelwal, N., Mandliya, J., Nigam, K., Patil, V., Mathur, A., & Pathak, A. (2020). Determinants of motor, language, cognitive, and global developmental delay in children with complicated severe acute malnutrition at the time of discharge: An observational study from Central India. *PLoS One*, 15(6). Article ID: e0233949. <https://doi.org/10.1371/journal.pone.0233949>
- Keenan, H. T., Clark, A., Holubkov, R., & Ewing-Cobbs, L. (2023). Longitudinal developmental outcomes of infants and toddlers with traumatic brain injury. *JAMA Network Open*, 6(1). Article ID: e2251195. <https://doi.org/10.1089/neu.2018.5687>
- Kiely, M. E., McCarthy, E. K., & Hennessy, Á. (2021). Iron, iodine and vitamin D deficiencies during pregnancy: epidemiology, risk factors and developmental impacts. *Proceedings of the Nutrition Society*, 80(3), 290-302. <https://doi.org/10.1017/S0029665121001944>
- Knezevic, E., Nenic, K., Milanovic, V., & Knezevic, N. N. (2023). The role of cortisol in chronic stress, neurodegenerative diseases, and psychological disorders. *Cells*, 12(23). Article ID: 2726. <https://doi.org/10.3390/cells12232726>
- Kolk, S. M., & Rakic, P. (2022). Development of prefrontal cortex. *Neuropsychopharmacology*, 47(1), 41-57. <https://doi.org/10.1038/s41386-021-01137-9>
- Li, X., Lipschutz, R., Hernandez, S. M., Biekman, B., Shen, S., Montgomery, D. A., ... & Bick, J. (2021). Links between socioeconomic disadvantage, neural function, and working memory in early childhood. *Developmental Psychobiology*, 63(6). Article ID: e22181. <https://doi.org/10.1002/dev.22181>

- Lipkin, P. H., Macias, M. M., Norwood, K. W., Brei, T. J., Davidson, L. F., Davis, B. E., ... & Voigt, R. G. (2020). Promoting optimal development: identifying infants and young children with developmental disorders through developmental surveillance and screening. *Pediatrics*, 145(1). Article ID: e20193449. <https://doi.org/10.1542/peds.2019-3449>
- Lukito, S., Norman, L., Carlisi, C., Radua, J., Hart, H., Simonoff, E., & Rubia, K. (2020). Comparative meta-analyses of brain structural and functional abnormalities during cognitive control in attention-deficit/hyperactivity disorder and autism spectrum disorder. *Psychological Medicine*, 50(6), 894-919. <https://doi.org/10.1017/s0033291720000574>
- Mackes, N. K., Golm, D., Sarkar, S., Kumsta, R., Rutter, M., Fairchild, G., ... & ERA Young Adult Follow-up team. (2020). Early childhood deprivation is associated with alterations in adult brain structure despite subsequent environmental enrichment. *Proceedings of the National Academy of Sciences*, 117(1), 641-649. <https://doi.org/10.1073/pnas.1911264116>
- Malik-Soni, N., Shaker, A., Luck, H., Mullin, A. E., Wiley, R. E., Lewis, M. E., ... & Frazier, T. W. (2022). Tackling healthcare access barriers for individuals with autism from diagnosis to adulthood. *Pediatric Research*, 91(5), 1028-1035. <https://doi.org/10.1038/s41390-021-01465-y>
- Martins, F., Oppolzer, D., Santos, C., Barroso, M., & Gallardo, E. (2019). Opioid use in pregnant women and neonatal abstinence syndrome: A review of the literature. *Toxics*, 7(1). Article No.: 9. <https://doi.org/10.3390/toxics7010009>
- McDonald, S., & Genova, H. (2021). The effect of severe traumatic brain injury on social cognition, emotion regulation, and mood. *Handbook of Clinical Neurology*, 183, 235-260. <https://doi.org/10.1016/B978-0-12-822290-4.00011-6>
- Mishra, A., Patni, P., Hegde, S., Aleya, L., & Tewari, D. (2021). Neuroplasticity and environment: A pharmacotherapeutic approach toward preclinical and clinical understanding. *Current Opinion in Environmental Science & Health*, 19. Article ID: 100210. <https://doi.org/10.1016/j.coesh.2020.09.004>
- Morgan, C., Feters, L., Adde, L., Badawi, N., Bancalé, A., Boyd, R. N., ... & Novak, I. (2021). Early intervention for children aged 0 to 2 years with or at high risk of cerebral palsy: International clinical practice guideline based on systematic reviews. *Journal of the American Medical Association (JAMA): Pediatrics*, 175(8), 846-858. <https://doi.org/10.1001/jamapediatrics.2021.0878>
- Mueller, I., & Tronick, E. (2020). The long shadow of violence: The impact of exposure to intimate partner violence in infancy and early childhood. *International Journal of Applied Psychoanalytic Studies*, 17(3), 232-245. <https://doi.org/10.1002/aps.1668>
- Nelson, C. A., Frankeberger, J., & Chambers, C. D. (2024). An introduction to the HEALthy Brain and Child Development (HBCD) study. *Developmental Cognitive Neuroscience*, 69. Article ID: 101441. <https://doi.org/10.1016/j.dcn.2024.101441>
- Nivens, C., Schwarz, E. B., Rodriguez, R., & Hoyt-Austin, A. (2024). Adverse childhood experiences and developmental delay in young US children. *Maternal and Child Health Journal*, 28(1), 5-10. <https://doi.org/10.1007/s10995-023-03864-5>
- Parenteau, A. M., Alen, N. V., Deer, L. K., Nissen, A. T., Luck, A. T., & Hostinar, C. E. (2020). Parenting matters: Parents can reduce or amplify children's anxiety and cortisol responses to acute stress. *Development and Psychopathology*, 32(5), 1799-1809. <https://doi.org/10.1017/S0954579420001285>
- Peters, W., Rice, S., Cohen, J., Murray, L., Schley, C., Alvarez-Jimenez, M., & Bendall, S. (2021). Trauma-focused cognitive-behavioural therapy (TF-CBT) for interpersonal trauma in transitional-aged youth. *Psychological Trauma: Theory, Research, Practice, and Policy*, 13(3), 313-321. <https://doi.org/10.1037/tra0001016>
- Popova, S., Dozet, D., & Burd, L. (2020). Fetal alcohol spectrum disorder: can we change the future?. *Alcoholism, Clinical and Experimental Research*, 44(4), 815-819. <https://doi.org/10.1111/acer.14317>
- Prigatano, G. P., Braga, L. W., Johnson, S. F., & Souza, L. M. (2021). Neuropsychological rehabilitation, neuroimaging and neuroplasticity: A clinical commentary. *NeuroRehabilitation*, 49(2), 255-265. <https://doi.org/10.3233/NRE-218024>

- Scholl, C., Rule, M. E., & Hennig, M. H. (2021). The information theory of developmental pruning: Optimising global network architectures using local synaptic rules. *PLoS Computational Biology*, 17(10). Article ID: e1009458. <https://doi.org/10.1371/journal.pcbi.1009458>
- Schurhoff, N., Toborek, M. Circadian rhythms in the blood–brain barrier: impact on neurological disorders and stress responses. *Molecular Brain*, 16, Article No.: 5. <https://doi.org/10.1186/s13041-023-00997-0>
- Setijowati, E. D., Suprpti, H., Sugeng, M. W., & Wulandari, R. D. (2022). Chromosome aberration on growth and developmental disorder. *Jurnal Kedokteran Brawijaya*, 32(2), 104-110. <https://doi.org/10.21776/ub.jkb.2022.032.02.5>
- Shonkoff, J. P. (2017). Breakthrough impacts: What science tells us about supporting early childhood development. *Young Children*, 72(2), 8-16. <https://doi.org/10.17226/9824>
- Simon, K. C., Nadel, L., & Payne, J. D. (2022). The functions of sleep: A cognitive neuroscience perspective. *Proceedings of the National Academy of Sciences of the United States of America*, 119(44), e2201795119. <https://doi.org/10.1073/pnas.2201795119>
- Spruyt, K. (2021). Neurocognitive effects of sleep disruption in children and adolescents. *Child and Adolescent Psychiatric Clinics of North America*, 30(1), 27-45. <https://doi.org/10.1016/j.chc.2020.08.003>
- Steiner, P. (2020). Brain fuel utilization in the developing brain. *Annals of Nutrition and Metabolism*, 75(Suppl. 1), 8-18. <https://doi.org/10.1159/000508054>
- Vandesande, S., Van Keer, I., Dhondt, A., & Maes, B. (2022). The social-emotional functioning of young children with a significant cognitive and motor developmental delay. *International Journal of Developmental Disabilities*, 68(4), 462-473. <https://doi.org/10.1080/20473869.2020.1805574>
- Wang, H., Qin, C., Zhang, Y., & Fu, Y. (2020). Neural pruning via growing regularization. *arXiv preprint arXiv:2012.09243*. <https://doi.org/10.48550/arXiv.2012.09243>
- Werlen, L., Gjokaj, D., Mohler-Kuo, M., & Puhon, M. A. (2020). Interventions to improve children's access to mental health care: A systematic review and meta-analysis. *Epidemiology and Psychiatric Sciences*, 29. Article No.: e58. <https://doi.org/10.1017/S2045796019000544>
- Westacott, L. J., & Wilkinson, L. S. (2022). Complement Dependent synaptic reorganisation during critical periods of brain development and risk for psychiatric disorder. *Frontiers in Neuroscience*, 16. Article ID: 840266. <https://doi.org/10.3389/fnins.2022.840266>
- Willoughby, M. T., Magnus, B., Vernon-Feagans, L., Blair, C. B., & Family Life Project Investigators. (2017). Developmental delays in executive function from 3 to 5 years of age predict kindergarten academic readiness. *Journal of Learning Disabilities*, 50(4), 359–372. <https://doi.org/10.1177/0022219415619754>
- Zhang, W., Li, D., Pang, N., Jiang, L., Li, B., Ye, F., ... & Yin, F. (2022). The second-tier status of fragile X syndrome testing for unexplained intellectual disability/global developmental delay in the era of next-generation sequencing. *Frontiers in Pediatrics*, 10. Article ID: 911805. <https://doi.org/10.3389/fped.2022.911805>
- Zhong, B. L., Xu, Y. M., & Li, Y. (2022). Prevalence and unmet need for mental healthcare of major depressive disorder in community-dwelling Chinese people living with vision disability. *Frontiers in Public Health*, 10. Article ID: 900425. <https://doi.org/10.3389/fpubh.2022.900425>