

**Safe Fluids: Preparing the Right
Thickness Every Time**

Authors: Janet Lockhart, Tim Rader
Publisher: Thinking Publications
Distributor: Brijan Resources
822 Burton Loop NW
Edmonton, AB T6R 2J2
Ph: (800) 567-1147
Cost: \$70.00 Canadian
Reviewer: Leah Mackie, MSLP(C), Reg. S-LP (AB), Grey Nuns
Community Hospital and Health Centre, Edmonton
Alberta

Clinical Speech-Language Pathologists are responsible for diagnosing and treating individuals with swallowing impairments in an effective and consistent manner. One of the ways dysphagia therapists treat swallowing difficulties experienced on liquids is by thickening the fluids to a various of levels. Although a thicker liquid may allow some individuals to swallow safely, thicker is not always better. Sometimes, a thicker consistency can actually be more problematic for an individual. It is important that the prescribed thickness level is adhered to in order to avoid complications such as aspiration and penetration of the liquid into the laryngeal vestibule. However, as Glassburn and Deem (1998) have proven, there is little to no intra-rater or inter-rater reliability when using the "eyeball" method of mixing various liquid consistencies. They recognized the need for a standardized procedure when mixing consistencies for evaluation and treatment. Such a procedure would help to ensure that the liquid consistencies deemed safe on evaluation are in fact the consistencies the individual would be swallowing on a daily basis.

Lockhart and Rader have attempted to address this issue with their product called *Safe Liquids: Preparing the Right Thickness Every Time*. Through their product, they have endeavoured to provide individuals across settings a method to evaluate the "thickness" of a liquid in a quick, easily replicated fashion.

The rationale for the need to replicate a certain viscosity level and the procedure for doing so are outlined in an 8 page booklet and a 15 minute video format. Time standards have been developed for the flow rate of 6 different liquid viscosity levels using 2-oz. of the material. These standards are provided for reference in the booklet and on a laminated viscosity chart. An 8-oz. funnel with an 8-mm aperture is also provided in order to complete the procedure. A stopwatch and 2-oz. measuring cup is recommended but not provided.

The procedure consists of pouring 2-oz. of the fluid into the 8-oz. funnel provided and then timing how long the fluid has a continuous flow through the funnel into a cup. You would then compare the time value to the chart and if necessary, add thickener or water as appropriate in order to attain the prescribed viscosity level. There are tolerance ranges to each of the 6 levels, ranging from 1 second with the thin liquids to 15 seconds with the honey liquids. Alternatives to the procedure are described in the video such as demarcating the 2-oz. level on the 8-oz. funnel with a black felt

pen or using a 2-oz. funnel with an 8-mm aperture. Either alternative would eliminate the need for a 2-oz. measuring cup. As well, the option of using a second hand on a watch or clock versus a stopwatch is discussed. During the clinical trials, the 8 oz funnel was found to be cumbersome while also working the stopwatch.

Lockhart and Rader have developed a well-explained, easily replicated method for determining the viscosity level of liquids. This would, in theory, improve the consistency with which individuals are provided fluids at the recommended thickness level. These authors are not the first to recognize the need for such a program. Mann and Wong in 1996 developed the line spread technique in order to assess the viscosity or thickness of a fluid. However, unlike Lockhart and Rader they did not develop standards to which you could compare your fluids against or tolerance ranges. The fact that Lockhart and Rader did develop a set of standards and tolerance ranges provides the consumer with a frame of reference. The difficulty with their normative set is that it involves 6 different thickness levels. Most working clinicians find it difficult if not impossible to assess and to provide a diet with six different liquid viscosity levels. One of the only ways six different liquids would be readily accessible in a large institution would be to employ the "point of use" mixing procedure. This would involve having the direct service provider thicken each individual glass of fluid before providing it to the dysphagic individual. This may not be the optimal due to the great variability seen in the viscosity levels when using this method (Glassburn & Deem, 1998) and the time constraints experienced by the direct service providers which reduces compliance (Mills, 1999). The National Dysphagia Diet Project undertaken by the ADA and ASHA has set out to develop a standardized set of labels and viscosity levels for fluids on a dysphagia diet. Their preliminary data recommends four levels of thickness, thin, nectar-like, honey-like and spoon-thick. This grading and labeling system appears to be the norm in the clinical practice. Given the fact that six levels with unique labels are provided in the Lockhart and Rader product, it is difficult to use their standards immediately in your setting, as you do not know where on the continuum your liquids would fall. Prior to using the standards you would need to correlate their fluid labels to the levels used in your setting. You would also need to complete this preliminary ground work if using the line spread technique (Mann & Wong, 1996). The line spread technique is not commercially available, however once the reference circles were devised and standards created this could also provide you with greater consistency in attaining viscosity levels. The National Dysphagia Diet also provides final viscosity ranges for these four types of fluids, however a method for measuring just how thick is thick is not mentioned. This is where Lockhart and Rader's product would be very useful after the completion of some preliminary investigations regarding the labels for fluids. This product would be viable in a wide range of settings from a large institution to an individual caregiver's attempts to be consistent when preparing a thick fluid. The video demonstration of how to complete the procedure is very useful and informative, as is the demonstration of the inconsistency with the "eyeball" method of mixing. There may be some question as to when to stop timing the flow for the thicker consistencies. The authors state to

stop timing at the first break in flow, however, this was not demonstrated on the video with the thicker fluids. Despite these minor difficulties, this product is a good first commercial attempt at enabling the everyday person to become more consistent in mixing fluids and in raising the awareness level regarding this very important aspect of dysphagia management.

Glassburn, D.I., Deem, J.F. Thickener viscosity in dysphagia management: variability among Speech Language Pathologists. *Dysphagia* 13: 218-222, 1998.

Mann, L.L., Wong, K.W. Development of an objective method for assessing viscosity of formulated foods and beverages for the dysphagic diet. *J Am Diet Assoc.* 96(6): 585-588, 1996.

Mills, R.H. Dysphagia Therapy & Dysphagia Management. *Conference Presentation*, October, 1999.

Pediatric Hearing Instrument Fitting: A Phonak Video Focus

Author: Richard Seewald, PhD; Shane Moodie, MCISc; Judith Gravel, PhD; and Ora Buerkli-Halevy, MS
Publisher: Phonak
Cost: \$30.00
Reviewer: Rhiannon Jones, Wild Rose Audiology Clinic Ltd., Edmonton, Alberta

The *Pediatric Hearing Instrument Fitting* video was created to introduce and demonstrate a scientifically-based, systematic approach to the fitting of amplification for infants and young children. The video is organized into three sections, which correspond to different stages of the approach. The first section addresses the early detection and measurement of hearing loss. It focuses on the use of insert earphones to precisely define the child's binaural hearing sensitivity. It also defines and demonstrates how to obtain a real-ear-to-coupler difference (RECD).

The second section applies the results of the RECD procedure to the selection and fitting of appropriate amplification. It highlights the difference between fitting adults versus children, focusing on the unique acoustical properties of children's ears and the need to compensate for this with as much accuracy as possible.

The third section of the video demonstrates the electroacoustic hearing instrument verification procedure based on the Desired Sensation Level (DSL) prescriptive method. DSL is a computer-assisted approach designed specifically to provide children with an amplified speech signal that is consistently audible and comfortable across the frequency range. The use of flexible programmable hearing instruments to further individualize the child's fitting, and the need for a family-centered habilitation program are stressed.

The videotape comes with a booklet designed to supplement the video focus, providing pertinent figures and a list of printed references. Both the booklet and the video provide useful clinical hints, (e.g., how to obtain a tight fit between the insert earphone and an older/stretched earmold.)

The creators of the video do not address children who are difficult to test or uncooperative with probe tube measurements. Under ideal circumstances, binaural hearing sensitivity and individual RECD values can be obtained. Realistically, it is not always possible to obtain these measurements and average RECD values for infants and young children of various ages (which are provided by DSL) are an important clinical alternative. An explanation of how these average measures can be used to improve the accuracy of pediatric hearing instrument fittings would be helpful for parents and clinicians working with children who are difficult to test.

The intended audience for this video is ambiguous. Some portions of the video are appropriate for audiologists, either beginning clinicians or those who are unfamiliar with the DSL prescriptive method. Other less technical portions are more appropriate for parents. While attempting to embrace both audiences, this presentation falls somewhere in the middle. The demonstration-based format and logical presentation may give audiologists the confidence to apply these procedures in their everyday practices and provides a unique function in the training of students to the procedure. Parents may find the video helpful to familiarize them with the techniques to be used, and to inspire confidence that appropriate methods are being used to fit their child.

The reviewed video provides an excellent summary of a systematic child-centered approach to pediatric hearing instrument fitting. Those audiologists who do not use this approach will see demonstrated a scientifically-based method for fitting children with hearing instruments. For clinicians who already use this approach, it will serve as confirmation of satisfactory practice.

Once Upon a Sound: Literature-Based Phonological Activities

Author: Linda Smith-Kiewel & Tracy Molenaar Claeys
Publisher: Thinking Publications (© 1998)
Cost: \$67.00 + 10% shipping with a minimum of \$5.00 + 7% GST
Reviewer: Karen Miller, Affiliation, MSLP, Reg. SLP(AB) SLP(C), Mill Woods Public Health Centre,

Program Description: *Once Upon a Sound: Literature-Based Phonological Activities* was developed to improve the phonological skills of three to eight year old children with unintelligible speech. It can also be used with children exhibiting delays in the areas of language development, phonological awareness and early literacy skills. The program was primarily designed for speech-language pathologists. It is recommended that other professionals and early childhood educators use this program only with the guidance of a speech-language pathologist.

The authors, Linda Smith-Kiewel and Tracy Molenaar Claeys (1998) describe this program as using "classic, familiar children's literature to help children acquire specific phonological patterns" (p. 1). The phonological patterns chosen and the cycles remediation approach used by Smith-Kiewel and Molenaar Claeys are based on information from Hodson and Paden's (1991) book *Targeting intelligible speech: A phonological approach to remediation*.

Once Upon A Sound is organized into six sections. The first section of the book provides an overview on how the program was developed and includes suggestions for users and settings. This includes a general description of the program and specific goals targeted. It also contains information on the use of literature in remediation programs, a cycles approach to phonological remediation, and phonological awareness. Application of this pro-



gram with voice and fluency disorders is also presented. General instructions on how to set up and use the materials in the program follows.

The second and third major sections of this resource are labeled 'Primary Target Patterns: Early Developing Patterns' and 'Secondary Target Patterns.' In these two sections 29 lesson plans targeting eleven phonological patterns are outlined. Each lesson is based on a story from classic children's literature. Within each lesson a target sound is chosen along with target words and activities for the 'Opening Center,' 'Listening Center,' 'Practice Center,' 'Art Center,' and 'Home Practice.'

Appendix information is located in the fourth section. There are appendices for home practice, data forms, illustrated alphabet, examples of phonological cycles, and program data results.

The fifth and sixth sections of this program are comprised of a bibliography and a reference section.

Evaluation

The authors provide an excellent review of the importance of using children's literature as well as how to use a cycles phonological remediation approach. A second strength of this resource is its clear description of the centers to be used during each of the lessons (i.e., opening, listening, practice and art centers).

The actual lessons are clearly written, easy to follow and can be used in their entirety or in part. The literature choices for each pattern are excellent. Many of the stories are familiar to families and are readily available from bookstores and libraries. The authors of this program clearly outline the goals, materials needed, and procedures for each center activity in the lesson plans. Helpful, easy to read hints, optional materials, and optional activities are highlighted in separate boxes at the side of each page.

The black and white reproducible activity sheets provided for the children are clear and child friendly. Coil ring binding allows for photocopying, although a binder format would make these pages easier to copy.

Another strength of this program is the nature and flexibility of the center activities. They can be readily pulled out and used to enhance other programs developed by speech-language pathologists. In addition, other center activities can be added or modified within this program.

During evaluation of this program a few limitations were observed. The family letters are good for families who have a relatively high literacy level; however the length and vocabulary may be too difficult for many caregivers.

A second limitation of the program is the 'listening center.' Many speech and language programs do not have access to listening centers as described in this program (i.e., headphones connected to an amplifier into which the speech-language pathologist speaks). The authors do recognize that amplification equipment may not be readily available and indicate that children can listen while words are spoken clearly to them.

Although this program indicates that it is designed for children ages three to eight years, it is quite focused on use in schools more so than in-clinic preschool speech and language programs.

Recommendations

The *Once Upon a Sound: Literature-Based Phonological Activities* program is a welcome addition to speech-language pathologists' treatment resources. It would be especially useful for clinicians that work in preschool programs, speech and language preschool treatment groups, individual treatment, and group therapy

with kindergarten and school aged children. This resource provides an excellent source of ideas to practice phonological skills using familiar and easily accessible children's literature. This resource can be considered for use in its entirety or in part, as it would be beneficial and appropriate in both contexts.

The inclusion of movement oriented play activities and games would improve the overall program, especially ones that allow children to interact with each other. From my experience, activity helps to maintain children's interest in a more natural context, as well as providing a facilitative learning environment.

Smith-Kiewel and Molenaar Claeys recognize the need for parental involvement to achieve success. However, they do not provide a description for involving parents in the center activities. The inclusion of parents in the treatment activities would provide additional learning opportunities for them as well as their children.

Overall, *Once Upon a Sound: Literature-Based Phonological Activities*, reflects current thinking on treatment approaches to remediating phonological disorders. It demonstrates a strong basis in current research information and recognizes the strength of using children's literature in remediation programs.

References

Hodson, B., and Paden, E. (1991). *Targeting intelligible speech: A phonological approach to remediation*. San Antonio, TX: Pro-Ed.

Smith-Kiewel, L., and Claeys, T. (1998). *Once upon a sound: Literature-Based Phonological Activities*. Eau Claire, Wisconsin, Thinking Publications.

Normal Communication Acquisition: An Animated Database of Behaviours

Author: Kristine S. Retherford, Ph.D.
Publisher: Thinking Publications 1996 Brijan Resources Ltd.
822 Burton Loop NW Edmonton AB
Cost: \$110.00

Reviewer: Deborah Healey, MA CCC-SLP
Capital Health Region Speech Program

Normal Communication Acquisition: An Animated Database of Behaviors (NCA) is a collection of data containing referenced research findings and developmental descriptions of significant milestones. It is a textbook for the computer and has many user-friendly ways to obtain information about a variety of topics within normal development.

NCA is designed to be a useful clinical tool for professionals working with children, with or without developmental delays, as well as students and parents. Information may be accessed within a variety of formats, and many behavioural entries contain additional information such as examples of and activities to enhance behaviors, as well as parent summaries of behaviors.

In addition to referenced normative data and descriptions of behaviors, NCA includes tables showing the relationship between behaviors in the entry and other behaviors and animations demonstrating behaviors. Cross-referenced information regarding the data and abbreviated descriptions of behaviors suitable for creating screening and observational checklists are also provided.

Within NCA, you may search for information regarding major components of development, including fine motor, gross motor, cognition, comprehension and production of syntax and semantics, phonology and pragmatics. Searches may be conducted based on chronological age within the developmental periods from birth to twelve years of age. One may also search the database for contributions by a specific author.

While browsing the database, the user may build a collection of marked items to review, organize and print later, in several different formats. You may print information in a variety of ways including checklists, parent handouts, full behavioural entries and activities to enhance developmental behaviors. You may organize your work by age or developmental component and amend your work with references.

System Requirements

Normal Communication Acquisition: An Animated Database of Acquisition is a computer program formatted on CD-ROM. System requirements are listed in the CD-ROM insert and are as follows:

For Windows:

- PC 386, 4MB available RAM, or better
- Super VGA or better
- Windows 3.1, Window 95, or newer
- CD-ROM drive
- 500K free hard disk space

For Macintosh:

- 030 with 4MB available RAM or better
- colour display
- Apple System Software version 7.1
- CD-ROM drive
- 500K free hard disk space

The NCA disk includes the installers for QuickTime for Windows (needed to run the animations of developmental behaviors, and Adobe Acrobat Reader (needed to read and print tables and information).

Evaluation

The most challenging aspect of using NCA was loading it on the computer (which was a reflection of my basic computer skills, rather than a reflection on the program!). I was unable to install it successfully on my computer at work, and I was unable to troubleshoot the cause of the technical difficulty. However, it worked well on my home computer.

Once properly installed, I was impressed by how easy NCA was to use. When you open NCA, the Title screen appears. From there you may use the Help button to learn how the title screen works. The Help button appears on every screen to identify how the buttons work on each page. From the title screen, you choose the Main Menu. The Main Menu offers several features of NCA to use. These include browsing the database (by age range or component), the author index (to search or print references), tables, figures and animations, printing options and marked items.

I highly recommend using the tutorials located in the Appendix of the Introduction to NCA when first learning how the program works. They are designed to help users become familiar with the program and information contained in the database. I found them to be quite effective.

Normative data and information included in the database were varied, as were the tables and figures. As in any textbook, there was contradictory information, given that many authors' works were cited. The onus was on the user to determine which information was pertinent to their search. I particularly liked being able to search for information and mark citations as I found ones I needed. At the end of my search, I was able to look at the information that I had marked, choose ones that suited my purpose and print them. What I liked most was that every citation was marked with the reference, which you could print off as well. Imagine never having to write a reference page again!

I can envision many uses for NCA professionally. It would be an invaluable tool for collecting information regarding normal development for presentations, workshops and classes. Agencies could customize parent checklists and handouts with referenced information. NCA would be useful in assisting professionals with referrals to other agencies. Administrators may use NCA while writing the annual report for their program or writing proposals for new programs and initiatives. NCA may also be made available to parents as a starting point for obtaining basic information regarding normal development, as it is quite user-friendly and very well organized.

Based on my review of this material, I would give it two thumbs up. However, if a second edition were released, there would be a few additions that I would recommend. Although there was a Help button, its use was limited to describing how to use the screen with which you were working. I would have found it more helpful had it contained troubleshooting tips, such as what you could try if your computer would not play the animations, or if the charts and tables would not print properly.

Limitations in processing were also demonstrated. When I was printing information from the database, I could not continue to look through the database at the same pace. It responded quite slowly when I tried to use it. Finally, a wonderful addition to a future CD-ROM would be live video clips of behaviors rather than animations. Although the animations were good, a larger range of information could be conveyed. For example, video and audio taped segments could range from typical expressive language or phonology at certain ages, or how two- or three-year old climb stairs.

In summary, I found Normal Communication Acquisition: An Animated Database of Behaviors to be a useful tool for the clinic. I would recommend its purchase for our parent lending library, as well as clinical and administrative purposes. Hopefully this CD-ROM inspires the creation of other CD-ROM databases in our field.

La puce à l'oreille (1999)

Publisher: N.A.P. Editions, Vitry, France

Cost: 175 French francs (including p & p)

Reviewer: Jeanne Claessen, School of Communication Sciences and Disorders, McGill University, Montreal

N.A.P. Editions, France, published in 1999 a collection of three small storybooks, entitled *La puce à l'oreille*. The author, Sylvain Fuchs, is professor at Le Centre Expérimental Orthophonique et Pédagogique in France.

These storybooks, targeting increasing levels of auditory comprehension, are aimed at 2-8 year old children and more specifically at children with hearing impairments and those having difficulty understanding stories. No recommended age levels are specified for the individual storybooks.



The collection's premise is to help develop children's auditory comprehension of stories facilitated by pictures. The author purports to do this differently by simplifying the storyline and by making the illustrations self-explanatory. In my opinion he has succeeded better with the latter than with the former.

The books

1. *l'Ourson* (Little Bear) (15cm x 15cm) (level 1 - lowest - of storytelling comprehension)
2. *Qui a volé la petite souris?* (Who stole the little mouse?) (15cm x 9cm) (level 2)
3. *Léo Mangetout* (Leo Eats-Everything) (9cm x 15cm) (level 3)

Books #2 and #3 are attractive in design and storyline. *Qui a volé la petite souris?* (29 pages) is the story of a little girl, Lucie, who loses a tooth. Her mother tells her to place it under her pillow; a little mouse will come to get her tooth and leave her a small gift. Lucie, however, stays awake, intent on catching the mouse. She succeeds and places it in a cardboard box with food and water. The mouse chews its way out and disappears. She discovers the cat has eaten the mouse and succeeds in niggling a dizzy-looking mouse from the cat's stomach. She sets the mouse free and admonishes it to be aware of cats.

Léo Mangetout (27 pages) is into eating everything and anything nonedible; he loathes spinach with white sauce (a French dish). With his cat and his dog as increasingly desperate witnesses, he manages to access the medicine cabinet and to take in all the medications. He turns red. The story relates his efforts to change back from being red all over to his original skin colour (pink) by eating white foods, and failing this, trying foods of different colours. Eating all this food makes him very sick and he ends in bed for several days. One day he wakes up pink again. Once again, he dashes for the fridge, to the animals' horror, but it is to reward them with pet food.

I loved the illustrations in these books; they are colourful, funny, with a wide range of very vivid emotions displayed through bodily gesture and facial expressions; also the actions are well illustrated. But these stories are not always logical and fail to get across a message to the child, or if they do, it's the wrong one. For example, in the former story no link is made between setting the mouse free and how it will now again be able to leave gifts in exchange for lost teeth. In the latter story, in spite of its warning on the final page that children should not help themselves to medication, the message is sent that too much food, *not* taking excess medication, will make a child sick! Taking too much medication changes skin colour; the logical conclusion to reach, therefore, is that experimenting with medications is fun, as long as you don't overeat afterward!

With regard to the author's objectives to build story comprehension skills, I don't think these have been met. The vocabulary, idioms and grammar are high level in books #2 and #3, and would need to be explained by a parent or professional using these books with the child. For example, there are many lengthy and grammatically complex (e.g. embedded) sentences. In addition, some words, idioms and concepts will be foreign to Canadian French speaking children; for example the tooth fairy represented by a mouse. The books' strength are the illustrations: they are very effective in expressing actions, emotions and facial expression. For this alone the books can be enjoyed - in any language for that matter.

In its design and content, the first book, *l'Ourson* is different from the other two books. The illustrations in the first part of the book are unattractive and too vague, making for a long-winded

story: over 12 pages a pale blue teddy bear made up of fine lines (wool) against a background of corrugated cardboard is slowly becoming unravelled as he is pulling at the wool hanging from his leg and rolling it (i.e. himself) into a ball (p. 12). The remaining six pages are more colourful and lively; they depict an old lady picking up the ball of wool in front of her and starting to knit a sweater, with as the end result the bear knitted into the front of the sweater. There is no text. The 18 page story, supposedly self-explanatory, is in fact far-fetched and difficult to make sense of, also for older readers, myself included. A final page gives written and illustrated instructions on how to gather wool into a ball. Step 3 instructs to roll the wool in *perpendicular* fashion ("*perpendiculairement*") ... Besides its unappealingness for reasons mentioned, many children may not be able to relate to its subject matter, or will find it uninteresting. Note that *l'Ourson* was developed with the lowest aural comprehension level in mind.

Most suitably I see this collection of three books fit on the shelves of young children with normally developing language skills in French speaking countries in Europe (Speech-Language Pathologists or Audiologists working with French speaking Canadian children need to be aware of the limited application of these books due to cultural/language differences). However, if chosen for therapy purposes, *La puce à l'oreille* could expose the child to new vocabulary, idioms, and concepts; further, discussion could be encouraged, especially about emotions: in fact, *Léo Mangetout* and *Qui a volé la petite souris?* would seem particularly suited for children who have difficulty understanding and/or expressing emotion.

Tales have Been Told: Activities for Higher Level Syntax (1997)

Author: Catherine Harkins May
Publisher: Thinking Publications (800)225-GROW
Cost: \$67
Reviewer: Marie Eldon, MSLP (C),
Tevie Miller Heritage School
Edmonton, AB

In creating *Tales Have been Told: Activities for Higher Level Syntax*, the author hopes to address several key areas in which upper elementary and higher school age students have difficulty within the classroom. Specifically, she states her goals as being to improve the awareness, understanding, and use of different text types, passive voice structures and adjectival clauses. She indicates that comprehension and productive use of these complex syntactical structures is a necessary skill to succeed in the classroom. As such, this book is geared towards speech-language pathologists (SLP), learning disabilities specialists, resource room teachers, general education teachers and teachers of English as a second language (ESL).

The author begins the book by providing a good overview of the literature and background information on passive voice, adjectival clauses, reauditorizing, processing load, text types, and story grammar elements. Within the 374-page book, there are 9 lessons. Each lesson targets new passive (e.g. A new school is being built; My wallet had been stolen by someone) and adjectival clause structures (e.g. The dog, which Jamie took for a walk, was friendly; The girl, who won the race, is happy), and is divided into three parts which, follow a similar structured format.

Part 1 involves becoming familiar with the folktale, from which many

subsequent activities revolve around. Activities include developing vocabulary, semantic webbing/mapping, associating, analyzing story grammar, story mapping, retelling the folktale, and filling in a lesson summary. This section alone is very useful to the clinician targeting narrative development.

Parts 2 and 3 focus on learning and practicing the specific passive and adjectival structures chosen for the unit. The structures are first explained and modeled in carefully designed interactions using picture cards. Then multiple opportunities for the student to orally practice these forms are provided. Examples from the folktales are eventually used as stimulus items. Each activity is designed to build on the others, decreasing the scaffolding to place more responsibility on the learner to become independent at generating the specific structure. The author provides a helpful hierarchy of prompts and cues to progress the student through. In section three (adjectival clauses), an expository text is introduced, which focuses on a theme or topic from the folktale and contains the specific form being targeted. Other activities include producing negatives, questions, a passive rhyme/poem based on the folktale, and mixing and matching cards containing adjectival clauses.

Each lesson in the book includes all the handouts required for each activity. Two illustrations are also provided to accompany both the folktale and the expository text. Lessons 1-9 are organized progressively, starting from the simplest passive (i.e. simple present, past, future tense) and adjectival forms (i.e. which, who) and moving to more complex structures (i.e. passives with modals and the adjectival clause whom). The lessons are designed to be used collectively, but individual lessons can be used independently and in any order the clinician chooses. However, the order in which the author presents the targets does follow the most logical progression. In terms of the appropriateness and functionality of these targets as syntax goals, the earlier lessons are the most useful. The student is more likely to encounter these structures in both oral and literate language, therefore comprehension of these advanced forms is vital to the student. Some of the other targets are relatively low frequency structures and not widely used. Irregardless, the lessons provide an opportunity for the learner at this stage of syntactic development to "...increase their flexibility to process and produce language at the literate end of the oral literate continuum." (Paul, 1995). Acquiring these skills will likely have a large impact on their academic success and self-esteem.

The author recommends this book for use with language learning disabled children in grades 4+, ESL learners, and adults with traumatic brain injury or other neurological difficulties. For children with language learning disabilities, this material is very challenging. Some of the terminology used in the appendices, which, talk about forming the passive voice, and adjectival clauses, contain difficult concepts for even normal language learners to comprehend, despite the author's valiant attempt to simplify it. Modifications to some of these appendices will be necessary. When determining if this resource is suitable for use with a particular client, take into account environmental needs, ability to talk about language, and their current syntactic level.

Although syntax is the primary focus, the use of narrative and expository text present some other valuable learning opportunities. For instance the student is exposed to different expository text formats (e.g. descriptive, comparison/contrast, cause-effect etc), which provides a good opportunity to discuss how different structures are organized and teach key vocabulary that is used with each. Lessons on how to organize paragraphs and develop topic sentences with supporting details can also be accomplished using the book. Suggestions for extension activities for working on nar-

ratives include having the student write a retelling of the folktale with illustrations or create a new story modeled after the original, modifying important elements (i.e. characters, setting etc) (e.g. The Three Little Wolves and The Big Bad Pig). Other uses for this book include the development of critical thinking skills and figurative language.

This book would be particularly useful to the SLP, who works collaboratively with the classroom teacher and other learning specialists. The content of the book fits nicely into the curriculum areas of social studies and language arts. Literature is one of the best platforms from which to provide intervention and form those important connections between the oral-literate continuum. These language lessons are very functional and interesting for the participant.

In summary, this book is very well organized and useful to the professional targeting higher-level syntax skills. The lessons within this book address several key areas, which, can be problematic for language learners. The use of folktales makes these lessons appealing to any age group. Professionals working in school settings will find these lessons incorporate nicely into the classroom curriculum. It is rare and appealing to see resources that are functional and require little modification to be used in the classroom.

References

Paul, Rhea (1995). *Language Disorders from Infancy through Adolescence: Assessment and Intervention*. St.Louis: Mosby-Year Book, Inc.

