

# Current Canadian Clinical Concepts

An intensive five week articulation program was implemented at the Glenrose Hospital, Edmonton, Alberta, Summer 1981, for preschool children (4½-6 years) exhibiting multiple articulation errors in conversational speech. A feature based phonological approach was used within a functional language based framework. On the basis of a pre-treatment imitative articulation measure, inaccurate phonological patterns within and across children were identified and group and individual treatment goals determined. Post-treatment results revealed improved articulation of specific target sounds with feature generalization for the phonological process categories of place, manner, and voicing. Positive aspects of the program included feature generalization across several phonemes, high levels of child motivation, and parent education and involvement. A short term intensive group approach to articulation treatment has proven to be an effective avenue of intervention for Speech Pathologists Ingrid Roth and Anne Lopushinsky.

Comments, suggestions and contributed articles should be sent to the Co-ordinator:

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## INTENSIVE TREATMENT PROGRAM FOR CHILDREN WITH MULTIPLE ARTICULATION ERRORS

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An articulation program was implemented at the Glenrose Hospital in the summer of 1981 to accommodate both the phonological and linguistic aspects of children's mis-articulations. The program utilized a feature based phonological approach to articulation treatment within a functional language based framework. The goals of the articulation program were to

- 1) facilitate intelligible speech, correct articulation of specific phonemes, and appropriate rhythm, intonation, and stress;
- 2) incorporate functional articulation goals through a language

based program;

- 3) train parents to facilitate correct articulation and provide opportunities for carryover of articulation skills to conversational speech;
- 4) develop individualized workbooks to help parents analyze their child's speech, set appropriate goals, and carry out language based articulation training.

Referrals were accepted from Glenrose School Hospital assessments/programs, direct physician referrals, and indirect physician referrals (i.e., from other Edmonton speech pathology agencies). Six children were selected

on the basis of the following criteria:

- 1) 4½ to 6 years of age (mean age = 5½ years),
- 2) multiple articulation errors in conversational speech and possible moderate motor speech planning problems,
- 3) oral structures within normal limits,
- 4) stimutable at the sound or word level for a number, but not necessarily all, of articulation errors,
- 5) possible mild expressive language delay related to articulation disorder,
- 6) no major physical, cognitive, or behavioral problems,
- 7) normal hearing.

The children's articulation skills were analyzed pre- and post-treatment by the Broen CVC Articulation Analysis (Broen, 1981). Inaccurate phonological patterns within and across children were identified and deviant phonological features common to most children were selected for group intervention. In addition, specific error sounds were selected as target sounds for each child.

The program ran for two hours per day, Monday through Thursday, for a five week period. All articulation activities were language based with primary emphasis given to vocabulary building and pragmatic aspects of communication. Unifying themes and concepts were presented weekly. Target words selected from each theme were emphasized in receptive and expressive speech and language activities. Each session included 1) free play and socialization activities, 2) homework review, 3) group listening and sound activities (i.e., use of minimal word pairs focusing on the phonological process categories of place, manner, and voicing), 4) individual articulation therapy (maximum of ten minutes per session), 5) snack, 6) production of meaningful phrases (using target vocabulary), 7) fine motor activities, and 8) parent discussion/homework.

All children's pre- and post-treatment measures indicated improvements in the feature categories of place, manner, and voicing, as well as improvements in specific target sound productions (Nikolai & Seidel, 1982).

The following positive aspects of the program were noted:

- 1) minimal word pairs served as an efficient and effective means of initiating changes in the children's phonological patterns;
- 2) positive attitude changes towards speech were found for both children and parents;
- 3) potential for generalization opportunities within the program and to the home environment was good;
- 4) opportunities for extensive language and phonological sampling were found within all program activities.

It is anticipated that this program will be re-implemented in future summers given a preschool population need for such a program and staff availability. Recommendations for future application of this program include

- 1) use of an enforceable clinician/parent contract for attendance and completion of homework activities,
- 2) parental involvement in planning and implementation of activities,
- 3) use of clinician-directed observations,
- 4) individual treatment on the fifth day,
- 5) inclusion of language goals,
- 6) use of home language and phonology sampling, and
- 7) written parent evaluation of the program.

In summary, it is felt that an intensive group program emphasizing receptive and productive training with minimal word pairs in a language based framework is an effective way to treat preschool children with multiple articulation errors. Such programming provides the opportunity to effect articulation changes across several phonemes, maintain high levels of child motivation, and allow for parent education and involvement.

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