



HALDIMAND-NORFOLK HEALTH UNIT

COMMUNICATION MATTERS

A NEWSLETTER FOR PARENTS, TEACHERS, EARLY LEARNING PROVIDERS AND CAREGIVERS OF PRESCHOOL-AGED CHILDREN.

What happens during speech therapy?

Let's say that after an assessment, a Speech-Language Pathologist (SLP) from our team has recommended therapy for your child. You know that the purpose of therapy is to help your child communicate clearly and efficiently. But you may wonder what the actual therapy sessions will be like. Given that no two sessions are exactly the same, this is a natural thing for you to wonder about! Over the next few editions of **Communication Matters**, we'd like to introduce you to the range of therapy types, or interventions, which we offer, and help you understand why your child's SLP recommended a specific type of intervention for your child.

Our team members provide the following intervention types:

- Monitoring and Parent Consultation.
- Home Program.
- Individual Intervention.
- Group Intervention.
- Parent Training.
- Caregiver Consultation.

Some of these interventions can only be provided by a registered SLP, while others are conducted by Support Personnel under the supervision of a registered SLP. Our team consists of four SLPs, **Lori Holstein, Karen Gibson, Jennifer Moore and Rita Taylor**, and three Support Personnel, Communicative Disorders Assistant (CDA) **Lisa Columbus**, Speech and Language Assistant (SLA) **Shauna Barrow** and Parent Program Assistant (PPA) **Becky Pow**.

In this issue, we'll look at **Individual Intervention**, which may be provided by any of our SLPs, our CDA or our SLA.

Individual Intervention (IT)

IT may be recommended for a variety of reasons. Group treatment, parent training and home program are usually offered first. However, if the SLP feels that more focused treatment is necessary, individual sessions are planned. Individual treatment may



target articulation or sound-error difficulties, or it may target language goals such as increasing vocabulary and sentence length. Whatever the specific goals, you will always be an active participant in your child's therapy sessions and home followup.

IT is scheduled in 12-session blocks. This means that we ask you

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to commit to bringing your child to one of our clinics for 12 sessions, either once a week for 12 weeks or twice weekly for six weeks. At the end of a block, your child's SLP will reassess and, with your input, determine the next step to take.

If your child's therapy is provided by one of our Support Personnel, you'll get a Management Plan. This form outlines the goals that the SLP, with your input, has identified for your sessions. It also gives you the contact information you need if you have to cancel or change a session time. The Management Plan is important to us because it helps the CDA or SLA plan sessions and communicate with the SLP about the progress your child makes. It's important to you because it tells you clearly what the targets are.

Language Intervention:

If your child is asked to come for individual treatment targeting vocabulary, concepts, sentence length or parts of speech (e.g., pronouns such as he, she), a typical session may be theme-based. Examples of themes are animals, body parts, people and places or describing words. Some structured activities may be in place such as colouring, story time, a game or a craft.

As well, unstructured activities focused on the theme of the day may be introduced. For example, you and your child may spend time in the session playing with a barn and farm animals if you are targeting animals as a theme. You may pretend to dress and feed a doll if you are targeting body parts, or use a doll's house with male and female figures if you're working on pronouns.

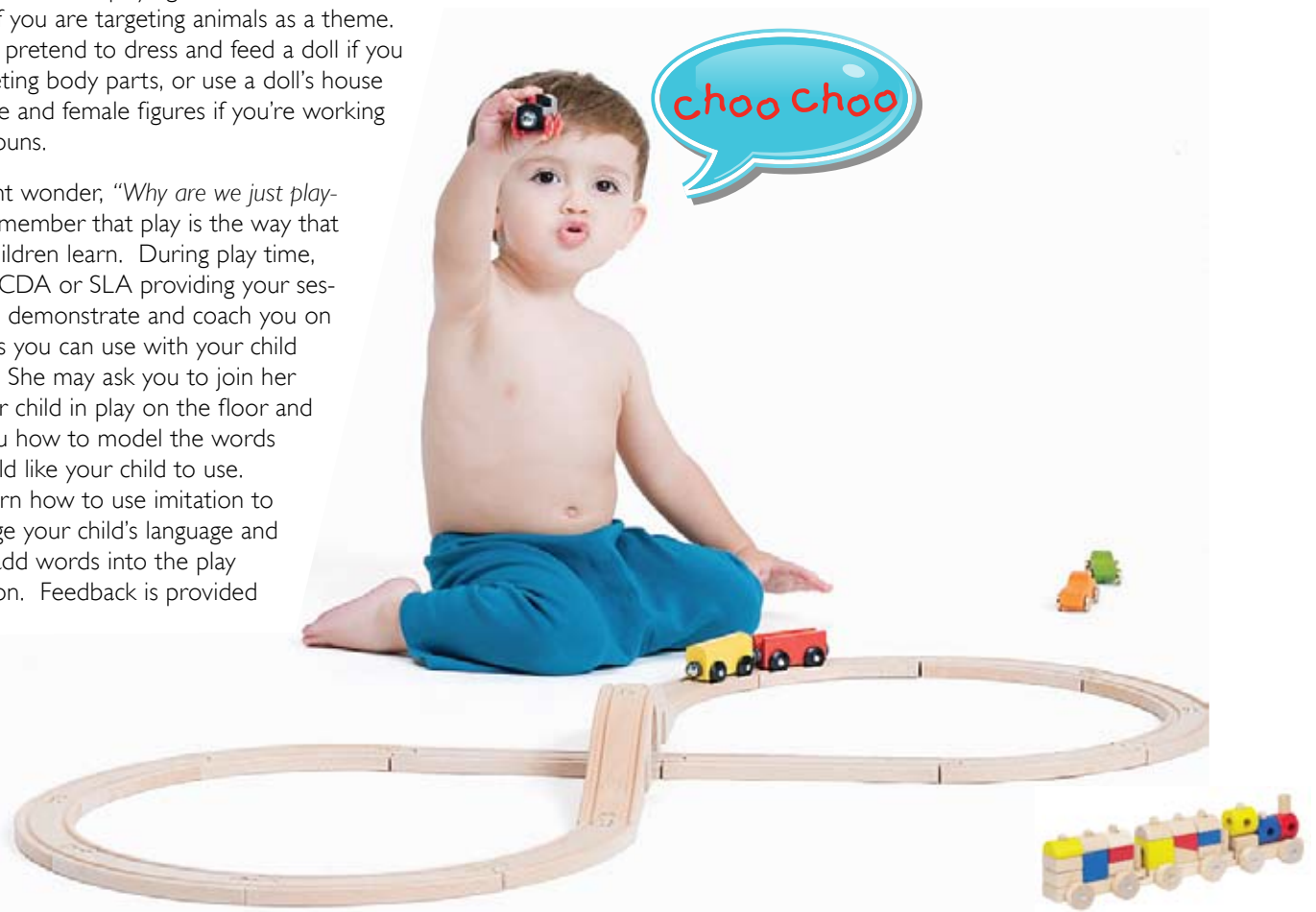
You might wonder, "Why are we just playing?" Remember that play is the way that young children learn. During play time, the SLP, CDA or SLA providing your sessions will demonstrate and coach you on strategies you can use with your child at home. She may ask you to join her with your child in play on the floor and show you how to model the words you would like your child to use. You'll learn how to use imitation to encourage your child's language and how to add words into the play interaction. Feedback is provided

and you will have a chance to practice the strategies and ask questions before trying them at home on your own.

For some children, the SLP may recommend the use of pictures, Picture Communication Symbols (PCS), gestures or Signed English in addition to speech. These additional (or augmentative) systems can reduce children's frustration if oral speech is really difficult for them. Research tells us that the use of augmentative communication often results in an increase in speech, rather than a dependence on the non-vocal system, as some parents fear. If your child's SLP has recommended an augmentative system, she will be helping you to learn and use it effectively with your child during your sessions.

Speech Sound Therapy

If your child is having difficulty producing speech sounds, you may be asked to come in for individual treatment sessions focusing on improving articulation, phonology, and/or oral motor skills. Articulation is the physical production of speech sounds. Phonology refers to a child's use of the sound rules of a language, which most of us learn unconsciously in early childhood. If a child isn't learning the rules naturally, sometimes we need to increase his or her awareness of how speech sounds work in English. Oral motor skills refer to the ability to move and coordinate the muscles of breathing and speech in order to produce



speech sounds. A child may have difficulties in any or all of these areas that result in a recommendation for individual intervention.

A typical speech sound session might begin with an introduction of the sound being targeted. The SLP, CDA or SLA may use story books that feature many occurrences of the sound. For example, if your child was working on the sound “s” at the beginning of words (as in sun), the session might include sharing the book *Silly Sally*. You’ll notice that the SLP, CDA or SLA may not read all of the words as written, but might share the book with you and your child in a way that stresses the target sound.

Another way to introduce and stress the target sound is through the Jolly Phonics program. This program, which is used in many local Kindergarten classes, provides your child with a picture and action as a reminder of what sound they are working on. For example, if your child is practicing the “s” sound, he or she may colour a picture of a snake and learn a hand gesture similar to the movement of a snake.

Once you and your child have had lots of opportunities to hear the target sound, you’ll share many activities to practice saying the sound in fun and creative ways. Your child may put a puzzle together and practice saying the sound to earn the puzzle pieces. You may all play a game together that features words that start with the target sound. Your child may colour and cut out cards with pictures of words containing their practice sound, and take them for home practice. Your child will gradually learn to master the sound all by itself, in syllables, in words and, finally, in phrases or sentences. Every session looks a little different depending on the age of your child, the sound being targeted, the level of practice and the person who is planning your session. Regardless of the games that are played and the structure of the session, you will be shown how to work with your child at home to continue practice throughout the week. Homework activities are provided to help in this process.

If your child has oral motor difficulties, your SLP may give you additional exercises to help strengthen the oral musculature. She may recommend lots of repetition of the sound by itself or the sound in single words, to develop coordination of the muscles. Speech is a motor activity, similar to any other thing we learn to do physically. Some people learn it more naturally than others, just like some people are “natural” athletes. Others require more practice. But just like learning to swim, play tennis or ride a bike, practice makes perfect! Your child won’t master sounds with just one or two short visits with us each week. Your involvement in home practice is critical.

Our main goal for every child is that he or she becomes a confident communicator who enjoys interacting with others. So, whatever the goals are of your child’s individual intervention sessions, you can be sure that the sessions will be fun!



Literacy Tip

It’s Never Too Early

Even very young children benefit from being exposed to pictures and books. Children start to learn about books, stories and language long before they are ready to read. Books provide opportunities for children to learn about new and interesting things they may not otherwise see, and provide the opportunity for closeness between you and your child.

As infants and toddlers, children will not “read” books, but they can “share” books with you. They may simply flip the pages, hold them backwards or upside down, chew on them or stack them in a pile. As they grow older they learn to hold the book correctly, to look at the pictures, begin to notice the words and enjoy hearing the story that goes with the pictures. By allowing your child to explore books right from the start, you teach your child that reading can be a fun, enjoyable activity.

When choosing books for infants, choose books that:

- Have bright, colourful pictures.
- Have only one picture per page.
- Are made of heavy board, vinyl or cloth.
- Have interesting things to touch and feel.
- Have simple language and few words on a page.

When choosing books for older babies and young toddlers, choose books that:

- Are made of thick board or cloth.
- Have real photographs of people and animals.
- Have real photographs of family members.
- Have pictures of different activities like going to the store or library.
- Have interesting things to touch and feel.
- Have simple stories and very little writing on the page.
- Have rhythm or song with lots of repetition.

High Interest Activities

Some children are reluctant or passive communicators. Trying to coax them by asking questions or telling them, "Say this," often results in less communication rather than more. Instead, try to encourage your child to communicate with you by following his or her lead (talking about what interests him/her), taking turns in play, and providing models of simple language and **WAITING** so the child has a chance to take part in the conversation. You can also try some of these activities, which motivate many reluctant communicators:

Using toys that arouse curiosity and motivation:

- Balloons (blow them up and let them deflate slowly).
- Bubbles.
- Wind-up toys.
- Toys with one piece hidden or missing.
- A favourite toy (or food item) in a clear plastic jar with a tight lid.
- A family photo stuck into a picture book.

Using daily situations and showing your interest and excitement in them:

- Watching traffic out the window.
- Opening the mailbox or looking at flyers and catalogues together.
- Unpacking grocery bags.
- Playing "peek-a-boo" while you make beds.
- Letting your child pour ingredients when you bake.

Using social routines and music:

- Patty cake, peek-a-boo.
- Tickling, chasing, rough-housing.
- "I'm gonna getcha...."
- Making funny faces.
- Songs from your child's favourite TV show or video.
- Hide and seek.

Using opportunities to WAIT and see how your child will express a need or want, rather than anticipating:

- When buttons or zippers need to be done up.
- When the door needs to be opened.
- When entering a dark room.
- When pouring a drink or offering a refill.
- When something has been dropped on the floor.
- When choosing a book or toy.

Communication Matters is published biannually by the Haldimand-Norfolk Preschool Speech and Language program. It has been developed to increase awareness for services available and tips on the prevention of speech, language or hearing disorders in the preschool population. This newsletter is intended for parents, teachers and caregivers of preschool-aged children. You are invited to contact the Health Unit with your articles and ideas.

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