

Melissa Corrects S (and also changes her personality)

Melissa is a cute 5 ½ year old girl with a history of frequent ear infections and a severe phonological and articulation disorder. When I first started seeing her for speech therapy at age 4, she had given up on trying to talk because no one could understand her. Her personality at that time can be described as extremely withdrawn. In therapy she was cooperative for speech activities, but never smiled, laughed or talked.

Although Melissa had already corrected some early phonological processes (such as final consonant deletion and fronting of velars), the total lack of fricative and affricate sounds in her speech was still making it difficult for anyone to understand her. My initial assessment indicated extensive stopping (or use of T and D) for F, V, S, Z, SH, ZH TH, CH and J. She also exhibited gliding on L and prevocalic R and distortions of vocalic R.

After nine months of therapy, Melissa established use of fricative and affricate sounds, but with minimal effect on her overall intelligibility or her self confidence. She had corrected F and V in spontaneous speech. She had learned to produce S, SH, and CH in isolation and in the final position of words, but there was no carryover to spontaneous speech. Melissa could absolutely not produce an initial S or SH without stopping (using a T sound), her S and SH were distorted and she could not produce Z at all.

I decided to train Melissa on initial S, because S generalizes well to other sounds. I used the *Practice Printout* sheets from the *Let's Learn S* program entitled "Initial S Syllable Preparation" and "Initial S Words Preparation." These worksheets provide visual and tactile support to students for learning to produce S using a prolonged S. At first Melissa was only able to eliminate stopping by pausing after prolonging the S (e.g. SSSSSS-pause-EE). Frequent imitation opportunities were provided. Over time, she was finally able to blend the sounds together (e.g. SSSSSSEE) and later shorten the S (e.g. SEE).

Next, Melissa worked on initial S at the syllable, word, phrase and sentence levels for about a month each. Therapy sessions started with a "warm-up" using the *Practice Printout* sheets from *Let's Learn S*. Next, we played a therapy game (for example, at the phrase level we played Go Fish using initial S articulation cards). While playing the game, Melissa was given a red token for correct productions (without stopping) and a blue token for incorrect productions.

If Melissa received not more than 5 blue tokens during the therapy game, she was ready to go to the computer and work with the *Let's Learn S* program. *Let's Learn S* contains a 10-12 minute Practice Session for the 4 training levels- syllables, words, phrases and sentences- for both initial and final S. Melissa enjoyed working with *Let's Learn S* immensely. The program added variety and motivation to the therapy sessions and Melissa benefited from the auditory bombardment and frequent practice opportunities. Since the Practice Sessions are phonetically controlled to minimize interference with later-developing sounds, (L, R, TH, CH, SH, J), Melissa's success was maximized.

When Melissa completed a Practice Session in *Let's Learn S* successfully in the therapy room, she was allowed to take a copy of the program home for the week. Melissa's mother was instructed to have Melissa work on the assigned Practice Session 3 times a week and to monitor her for correct productions. Melissa's mother expressed an overwhelmingly positive response to using the program, saying it made it very easy for her to help her child at home.

Before moving up a level, Melissa also worked at the computer with *Let's Learn S's Record and Playback* feature. This allowed her to hear her own speech and compare it with a model, which strengthened her auditory awareness for her own S productions. It also allowed us to work "up" levels. For example from "Sam" to "want Sam" and from "want Sam" to "I want Sam to help me."

After completing work on initial S at the sentence level, Melissa was introduced to medial S words and was cued to use sentences with S in all positions of words during play activities. We also worked for a brief time on Z and SH and Melissa was now able to produce these sounds easily. Her S and SH were no longer distorted. As an extra bonus, I now noticed that Melissa's L and initial TH had self corrected and she was using CH and J correctly most of the time.

By age 5 ½, Melissa was finally intelligible and her personality had gone through a transformation. She now came into the therapy room with lots to tell me and smiled and laughed often. She'll be able to be discharged from therapy after she corrects her R sound, but that's another story.