
Appendix 4: Eliciting single sounds in isolation

Children with speech difficulties use a restricted sound system in their everyday speech, but they can often imitate a fuller range of sounds in isolation. In teaching children sounds which are not currently in their repertoire, imitation of an adult model, supported by cues e.g. picture symbols, manual symbols etc, is in many cases a successful strategy. However, for some children, including those with dyspraxic difficulties, imitation can be very difficult and they need to be taught how to produce both consonant and vowel sounds.

This may involve a number of strategies, used singly or more commonly combined to provide maximum support: visual - the child watching the therapist producing the sound and/or himself in a mirror (perhaps with a torch to see inside the mouth); tactile and kinaesthetic - the therapist physically helping the child's articulators to move e.g. pushing the lips together and the child then experiencing the kinaesthetic sensation of that movement; verbal-the therapist describes required movements to the child and/or uses vocabulary cues established through oro-motor work e.g. switch your voice on, put your tongue down; cueing - speech sounds are associated with picture symbols/manual symbols/diagrammatic symbols e.g. articulograms (provide cues on lip shape, airstream, etc). See the Single sounds section, in the first ring binder, for picture symbols for consonant and vowel sounds, and Appendix 3 above for description and list of articulograms.

Some strategies are more appropriate for some sounds than others and individual children respond to some strategies better than others. Therefore, when a number of different ideas are provided, therapists are advised to experiment and find what works best for their individual child.

Top Tips

- Establish movement patterns through oro-motor work and link it to cues.
- Continue oro-motor work to support sound production e.g. airstream, lips, tongue etc.
- Utilise movements which the child can produce at an automatic level, and any contexts in which the target sound occurs at an automatic level.
- Emphasise movements/postures required rather than the target sound if the child already has an inaccurate motor program for it.
- Acknowledge that trying to make sounds can be difficult. Sometimes ideas work and sometimes they don't! Sometimes you have to keep on trying!
- Make sure the child's position is stable (i.e. upright with feet flat on the floor). Be prepared to steady head/jaw as necessary.
- Be confident - don't be afraid to touch the child's face, mouth, nose, but build up the child's trust first and be sensitive to gagging etc.
- Use simple, accurate verbal explanations, supported by modelling.
- Use cues established in oro-motor work to elicit movements required and use props e.g. toothbrushes, straws, small lolly sticks etc as required, to help the child achieve.
- Reinforce correct motor patterns using the same cues (e.g. good try - you got your tongue right back).