SPEECH THERAPY IN TREATMENT CHILDREN LANGUAGE DISORDERS

SPEECH THERAPIST

LÊ THỊ ĐÀO

NGUYỄN CHÂU TUYẾT NHƯ

WHAT ARE LANGUAGE DISORDERS

* Children with language disorders as an

Impairment in comprehension and/or use a spoken, writen other

symbol system.

FORM

Word other
Word endings
speech

USE

Conversation
Social rules
Matching
language to the
situation

CONTENT

Word meaning
Word
combinations
sequencing

The American Speech-Language and Hearing Association (ASHA)

AETIOLOGY

- * Environmental factors: external experiences that either increase risk or are protective in face of biological disorder
- * Biological factors: genetic risk, different brain structure & function
- * Cognitive factors: differences in perception & information processing
- * Behavioural features: overt differences in behaviour that characterise the disorder

Paul, R.(2012)

TYPES OF CHILD LANGUAGE DISODER

- * Premature birth
- * Low birth weight
- * Hearing Loss
- * Autism Spectrum Disorder
- * Intellectual Disabilities
- * Brain Injury
- * Genetic Syndromes.
- * Cerebral Palsy
- * Malnourished children

ASSEMENT

Comprehension:

Syntax
Semantic
(word and sentence level)

Production:

Syntax
Semantic
(word and sentence level)

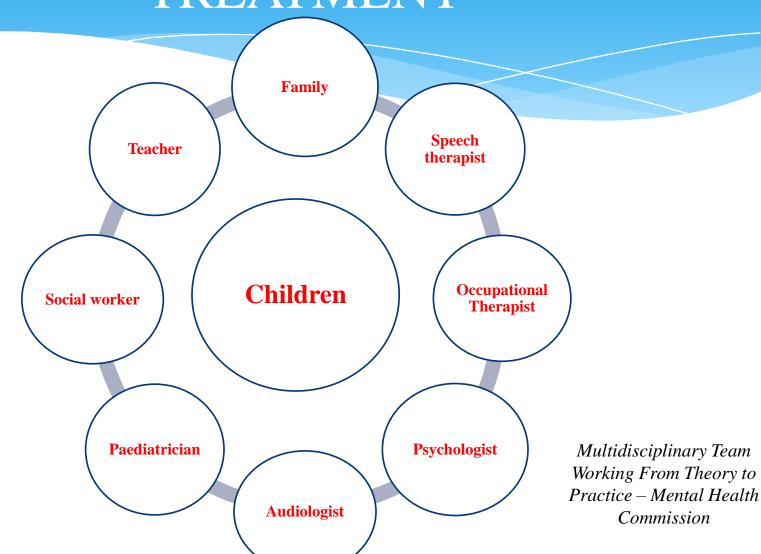
Communication:

Functions Intentions

Other:

Hearing
Speech motor
Nonverbal cognition
Social Functioning
Adaptive Functioning
Behaviours

MULTIDISCIPLINERY TREATMENT



MULTIDISCIPLINERY TREATMENT

Speech therapist	Occupational	<u>Psychology</u>	The Social
	<u>Therapist</u>		<u>Worker</u>
S.T support service users develop these skills and developing the skills of carers and staff to enhance communication.	 O.T. focuses on the ability of an individual to perform daily life tasks. Assessment and intervention may of motor, process, sensory and development skills in daily activities, such as, dressing, bathing, writing and play at home, school, work Adaptive to provide for specialised equipment. 	Psychology is concerned with all aspects of behaviour and the thoughts, feelings and motivations underlying such behaviour.	 Provide ongoing support and counselling as required for service users and their families. Social Workers act as advocates for service users and families and seek to inform them of their entitlements.

EFFECTIVENESS OF SPEECH THERAPY

- * Children with primary language delay/disorder can also have longterm difficulties which persist to adolescence and beyond (Haynes 1991, Rescorla 1990) with some 30-60% experiencing continuing problems in reading and spelling.
- * The results of twenty-five studies were used in the meta-analysis: Speech and language therapy is effective for children with:
 - Phonologica(SMD=0.44, 95%CI: 0.01,0.86)
 - Vocabulary difficulties (SMD=0.89, 95%CI: 0.21,1.56)
 - Expressive syntax interventions (n=233; SMD=1.02, 95%CI: 0.04-2.01).

Law J, Garrett Z, Nye C (2003). Speech and language therapy interventions for children with primary speech and language delay or disorder. Cochrane Database Syst Rev (3): CD 004110

ROLES AND RESPONSIBILITIES OF SPEECH THERAPIST

- * Prevention
- * Screening, Evaluation, and Assessment
- * Planning, Implementing, and Monitoring Intervention
- * Consultation With and Education of Team Members, Including Families and Other Professionals
- * Service coordination
- Transition planning
- * Advocacy
- * Awareness and advancement of the knowledge base

ASHA's Ad Hoc Committee on the Role of the Speech-Language Pathologist

REFERENCES

- * Paul, R. (2012). Models of language impairment. In Paul, R., & Norbury, C. F. Language disorders from infancy through adolescence. Listening, speaking, reading, writing, and communicating, p1-21. Elsevier.
- * Roles and Responsibilities of SpeechLanguage Pathologists in Early Intervention: Guidelines Ad Hoc Committee on the Role of the Speech-Language Pathologist in Early Intervention American Speech Language- Hearing Association.
- * Multidisciplinary Team Working: From Theory to Practice Mental health Commission