

SPEECH PATHways

CONNECTIONS

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INSIDE THIS ISSUE:

Pathways to Parent Support & Training (PPST)

PPST	1	The PPST group resumed its regular monthly meeting in September with a fantastic presentation on "Reading with your Child" by Jocelyn Davey, Certified Reading Specialist, and Lorretta Spangler, teacher and owner of AMN Books in Westminster.
REI Creator Visits	1	
Stuttering	2	
PROMPT	3	Unfortunately, our October meeting was cancelled due to poor attendance. We had an informative, interactive program planned called " <i>Different Doesn't Have to Mean Separate</i> "; a parent-led discussion on raising children with disabilities and the educational choices they face. Barb Feldman, Casey Huether and other parents raising children with differences were prepared to share their background and experiences in raising a child/children with disabilities and the educational paths they have chosen for their child/children. The panel has been gracious enough to agree to set a new date after the New Year.
Saturday Services	4	
Marriage/Families	4-5	
Policies	6	



We encourage you to take advantage of this additional service being offered to **SPEECH PATHways** clients and the surrounding community at no charge. All of our speakers are gracious enough to donate their time to our group and our community. We hope to see a more consistent attendance for our group so that we can continue to offer this unique and valuable service. Please join us at the next PPST and bring a friend!

November 17, 2006:

"*Behavioral Assessment and Intervention*" Dr. Christine Accardo, Director of Children's Services for the Mid- Atlantic Human Services Corporation and Program Director for The Shafer Center for Early Intervention, will discuss behavioral assessment and interventions for children with special needs. Dr. Accardo is a Board Certified Behavior Analyst (BCBA).

Call now to reserve your seat! 410-374-0555 or via e-mail:

kim.bell@speechpathways.net

Recommended Yahoo Groups:

<http://groups.yahoo.com/group/BaltimoreApraxiaandSLDParentGroup/>

<http://groups.yahoo.com/group/FamilyEmpowermentNetwork/>

http://groups.yahoo.com/group/IEP_guide/

Creator of REI Program Visits SPEECH PATHways

Jeff Strong, creator of Rhythmic Entrainment Intervention and founder of the REI Institute, will be visiting **SPEECH PATHways** on Friday, November 3, 2006, from 12-6pm. Join us for this drop-in meet & greet event. Taryn Silbert, M.S.,CFY/SLP, and Karie Gardner, M.S.,CCC-SLP, of **SPEECH PATH-**

ways will be completing this provider training and certification. They will join Kimberly Bell, M.S.,CCC-SLP, Jennifer Kaley, M.S.,CCC-SLP, and Cherise Kelly, M.A.,CCC-SLP, as certified providers at **SPEECH PATHways** on November 4, 2006. Kim, Jen and Cherise became certified in October

of 2005. For more information on REI visit their website at: www.reiinstitute.com.

To RSVP to the Meet & Greet, please call 410-374-0555 or via e-mail at: kim.bell@speechpathways.net



Lidcombe Program of Early Stuttering Intervention

In October, Kimberly Bell, M.S.,CC-SLP, and Cherise Kelly, M.A.,CCC-SLP, attended a 3-day training seminar on the Lidcombe Program of Early Stuttering Intervention in Philadelphia. **SPEECH PATHways** joins a small number of therapists in the United States that are able to provide this revolutionary program developed in Australia.

The Lidcombe Program was designed in the mid-1980's by Professor Mark Onslow and his colleagues at the University of Sydney, Australian Stuttering Research Centre (ASRC) as a behavioral intervention for stuttering in preschool.

The program has been scientifically researched in Australia, Canada and the United Kingdom. Studies have shown that stuttering can be maintained at **near zero** following treatment. The Lidcombe Program is known as "Best Practice" for fluency therapy in Australia, Canada and the UK.

SPEECH PATHways is now one of the few providers of this program in Maryland and across the United States.

The Lidcombe Program for Early Stuttering Intervention is carried out through a partnership formed between the parent and a Lidcombe trained speech-language pathologist. The speech-language pathologist teaches the parent(s) to administer appropriate verbal contingencies for fluency and stuttering to their children in their everyday speaking environment.

The Lidcombe Program offered at **SPEECH PATHways** is for preschool and school-age children. In most cases, the children will reach a status of little to no stuttering within 12 weeks.

The program is administered by a parent /caregiver in the child's everyday environment. Parents learn how to do the treatment during weekly visits to **SPEECH PATHways**.

The parent/caregiver is trained through demonstration and observations of the parent doing the treatment (with feedback from the SLP). This parent training is essential because it is the speech pathologist's responsibility to ensure that the treatment is done appropriately and is a positive experience for the child and the family.

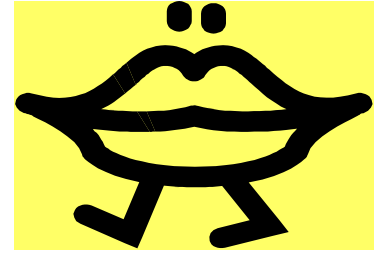
The treatment is direct - it involves the parent commenting directly about the child's speech. The parental feedback is overwhelmingly positive because the parent comments primarily when the child speaks fluently and only occasionally when the child stutters.

The parent/caregiver does not comment on the child's speech all the time, but chooses specific times during the day in which to give the child feedback.

The parent/caregiver also learns to measure the child's stuttering by scoring it each day out of 10, where 10 is "very severe stuttering" and 1 is "no stuttering."

At each clinic visit, the speech pathologist and the parent examine these scores for the previous week to see what effect the treatment is having outside the clinic.

Parental measures are essential because it is well known that stuttering may improve in a clinic without necessarily improving where it really matters-outside in the real world.



In Stage 1, the parent conducts the treatment each day and the parent and child attend the speech clinic once a week. This continues until stuttering either disappears or reaches a very low level.

Stage 2 of the program commences at this point. The aim of Stage 2 is to maintain the absence, or low level, of stuttering for at least one year. The frequency of parental feedback during Stage 2 is reduced, as is the frequency of clinic visits, providing that stuttering remains at the low level at entry to Stage 2. This maintenance part of the program is essential because it is well known that stuttering may reappear after the conclusion of an apparently successful treatment. For more information on the Lidcombe Program visit:

**Australian Stuttering
Research Centre:**
www.fhs.usyd.edu.au/asrc
or
SPEECH PATHways at:
410-374-0555

**Over 3 million Americans
stutter, which is
approximately 1% of the
population.**

**60% of those who stutter
have a family member who
also stutters.**

PROMPT Training Expanded

In October, Cherise Kelly, M.A., CCC-SLP, Heather Sunderland, M.S., CCC-SLP, Karie Gardner, M.S., CCC-SLP, and Taryn Silbert, M.S., CFY/SLP, all attended an *intensive* three day training course on the Introduction to PROMPT Techniques.

They join Kimberly Bell, M.S., CCC-SLP, and Jennifer Kaley, M.S., CCC-SLP, as PROMPT trained speech-language pathologists at **SPEECH PATHways**. PROMPT is an acronym for "Prompts for Restructuring Oral Musculature Phonetic Targets." The PROMPT technique was developed by Deborah Hayden, speech-language pathologist, and refined over the past 30 years.

The PROMPT model comes from a dynamic systems theoretical position utilizing tactual sensory information (in addition to auditory and visual) to support and develop speech-motor function-

ing leading to improved communication functioning across all domains.

The PROMPT model provides for assessment across all domains and in-depth analysis of the motor speech sub-systems. It also helps trained therapists how to choose the best focus for intervention, how to plan and organize treatment and how to select and use the most appropriate level or levels of prompts.

PROMPT is a philosophy of assessment & treatment, an approach to therapy & treatment, a system in that it helps therapists plan & organize treatment and also a technique.

The PROMPT Technique utilizes neuromotor principles, kinesthetic (tactile), proprioceptive, auditory and visual information to provide feedback to the speech system. PROMPT clinicians give input to all areas by

using touch, pressure, specific placements, auditory awareness and visual awareness with a specific emphasis on "timing."

Cherise, Heather, Karie and Taryn will each be working on a PROMPT project over the next 3 months to attain completion of their PROMPT training. Please be patient with them as they practice these new techniques and begin to integrate them into their therapy at **SPEECH PATHways**.

We are excited to be expanding the number of therapists that are able to offer PROMPT therapy and hope that it will benefit your children and facilitate further improvements! For more information on PROMPT, you can visit the PROMPT Institute web site at:

www.promptinstitute.com



Saturday Services Expanded with New SLP

SPEECH PATHways is proud to welcome our newest speech-language pathologist, Kara Rice, M.S., CCC-SLP. Kara received her Bachelor of Arts Degree from the University of Central Florida in 1997 and Master of Science Degree from Vanderbilt University in 2000. In addition to having a Master of Science Degree, Kara is licensed as a speech-language pathologist in Maryland and Pennsylvania. Kara maintains a school certification in both states and has a strong back-

ground in special education. In addition, she has her Certificate of Clinical Competence "CCC" from the American Speech-Language Hearing Association (ASHA).

Kara was initially attracted to the field of speech-language pathology because she always wanted to help people. She loves being able to work with children and adults in a variety of settings. She feels that it is always rewarding to watch a child make progress. Kara has spent the past seven years

working in the schools in Philadelphia, Pennsylvania, area specializing in providing services to children with severe disabilities. She recently relocated to Maryland. Her specialty areas and areas of interest include severe communication impairments, autism and language-based learning disabilities. Kara joined **SPEECH PATHways** in October of 2006 and will be providing therapy services on Saturdays. For more information on Saturday Services, call Kim at 410-374-0555.

Tools for Managing a Special Needs Marriage

If you and your partner are parenting a child with special needs, here are some suggestions to help your relationship:

Work to understand each other's needs. Family life can be a test of love and resilience, so taking good notes and working to understand each other's wants and needs are vital to the success and survival of an intimate relationship. Life has veered sharply from what you had expected it to be. Try not to blame each other for the situation. It takes time to sort this stuff out. Be kind to yourself and each other about how difficult this can be.

Spend alone time together. While the issues in any particular relationship are complex, it can be a good start to plan time together alone, even if only for a few hours. In study after study, people who report their marriages to be satisfying describe their spouses as their best friends, and people who are best friends have activities that they enjoy together.

Most people get married, in large part, because they enjoy each other and make each other feel good. Who would have married their spouse if the last time they relaxed and/or had fun together was months ago?

A close bond between partners can help parents through the rough spots. You can start with sharing a cup of coffee or tea, dinner out, or a movie or concert.

Take care of your individual selves. Your children have conditions that may require lots of care and supervision. In the struggle to advocate for our

children's needs, our own needs as individuals and as couples get lost. Many people stop focusing on their marriage, but this never helps. As hard as it may sound at first, start to think about taking care of yourself and adding some fun and enjoyment into your life even though it can take a long time for this to feel okay. Take some time for yourself doing things you enjoy. This can be anything from physical exercise or journaling to just grabbing time to read the newspaper or a good book.

Reach out. When possible, share the responsibilities at home by working together on chores, childcare, and education. It is helpful when couples both work to learn about their child's disability, prepare for and attend IEP meetings, etc. Get involved in the special needs community if you can. There's so much to manage everyday that reaching out to your partner, relatives or friends can help lessen the burden.

Communicate. When a person is in pain, he or she may withdraw or become frustrated and angry. It's hard to talk about something we have no power to change or fix. At times the reactions of couples can become polarized or opposite. For example, one may notice problems in the child and tend to worry and feel negative while the other holds hope and optimism that in time everything will be fine. Try to consider all of your feelings toward your child - both positive and negative - and discuss issues in ways that will help both of you feel understood and find solutions to problems. In general, the way out requires working through the painful feelings with one's partner and arriving at some form of joint accep-

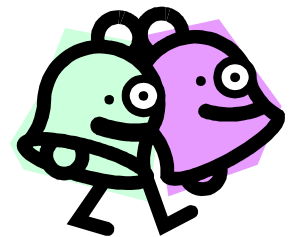
tance and effective co-parenting strategies.

Seek assistance. Sometimes a mental health professional (a social worker, psychologist, or psychiatrist) can be helpful to you in understanding the needs of the children, yourself, and your marriage. Some people are reluctant to take this step, but when it becomes hard to function from day to day, this kind of help may be in order. Just as you would consult more than one specialist for your child if necessary, do likewise for yourself. If your partner is too discouraged, then start by yourself. Sometimes a change in one partner changes the chemistry of the situation for the better. It is intelligent and wise to acknowledge the needs of yourself and your marriage over time as well as your child's needs. Your special family is worth it!

Article by: Lisa Jo Rudy and posted on About.com

Keys to Resilient Families

- Communication
- Making Time a Priority
- Keeping Perspective
- Building a Support Network
- Seeking Professional Assistance
- Respite
- Play



Books on Marriage & Raising a Special Needs Child

The following books were found on Amazon.com or Woodbinehouse.com. You can also ask your local library to order these if they do not carry them.

Special Children, Challenged Parents: The Struggles and Rewards of Raising a Child With a Disability
by Robert A. Naseef

Special Kids Need Special Parents: A Resource for Parents of Children with Special Needs
by Judith Loseff Lavin

You Will Dream New Dreams: Inspiring Personal Stories by Parents of Children With Disabilities
by Kim Schive

Changed by a Child
by Barbara Gill

From the Heart: On Being the Mother of a Child With Special Needs
by Jayne D. B. Marsh

A Special Kind of Love: For Those Who Love Children With Special Needs
by Susan Titus Osborn

Strengthening Relationships: When Our Children Have Special Needs
by Nicholas R.M. Martin

"it is not the child's disability that handicaps and disintegrates families; it is the way they react to it and to each other."
Finding a way to deal with the added stresses, minimize them, overcome them – by sharing them – can glue a marriage (and a family) together more firmly than ever."
——Dickman & Gordon
"One Miracle at a Time"

Married with Special-Needs Children: A Couples' Guide to Keeping Connected
by Fran Prezant

One Miracle at a Time: Getting Help for a Child With a Disability
by Irvine Dickman & Sol Gordon

Nobody's Perfect: Living and Growing With Children Who Have Special Needs
by Nancy B. Miller

Reflections from a Different Journey : What Adults with Disabilities Wish All Parents Knew
by Stanley Klein & John Kemp

Life As We Know It: A Father, a Family, and an Exceptional Child
by Michael Berube



Books for Siblings of Children with Special Needs

The following books were found on Amazon.com or Woodbinehouse.com. You can also ask your local library to order these if they do not carry them.

Views from Our Shoes: Growing Up With a Brother or Sister With Special Needs
by Donald J. Meyer

Everybody Is Different: A Book for Young People Who Have Brothers or Sisters With Autism
by Fiona Bleach

My Friend with Autism: A Coloring Book for Peers and Siblings
by Beverly Bishop, Craig Bishop
(Illustrator)

Andy and His Yellow Frisbee
by Mary Thompson

The Sibling Slam Book: What it is Really Like to Have a Brother or Sister with Special Needs
by Donald J. Meyer

The Best Worst Brother
by Stephanie Stuve-Bodeen

We'll Paint the Octopus Red
by Stephanie Stuve-Bodeen

Siblings of Children with Autism
by Sandra L. Harris





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SPEECH PATHWAYS

*“Pathways to Communication
Enhancement”*

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Cancellation & Inclement Weather Policy

We would like to remind you of the 24-hour cancellation policy for **SPEECH PATHways** as the busy holiday season approaches and the winter illnesses arise. Please keep in mind that careful planning and preparation goes into each and every one of your child's therapy sessions. The \$40 fee for missed appointments must be collected prior to (or at) your next scheduled appointment if less than 24-hour cancellation notice is given to your therapist. To cancel an appointment you **MUST** leave a message for your therapist on the voicemail box at the Westminster Clinic. The phone number is 410-386-0199. Listen carefully to the voice prompts on the initial message to leave a message for your therapist in their personal voicemailbox.



As the cold and unpredictable weather arises we would like to remind you of our inclement weather policy. **SPEECH PATHways** does not automatically follow the Carroll County School Inclement Weather Policy for closings and delays. Please check with your therapist by calling the Westminster Clinic at **410-386-0199** to see

if we are open on a particular day. We have found that many times the roads have been cleared by the time we begin services in the evening and that the roads are safe. Every attempt will be made to see your child when deemed safe and appropriate in relation to the weather conditions.

