



ONTARIO ASSOCIATION FOR FAMILIES OF CHILDREN WITH COMMUNICATION DISORDERS

O.A.F.C.C.D. NEWSLETTER

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Looking Back on Ten Years

The Ontario Association for Families of Children with Communication Disorders (OAFCCD) was founded by a small group of parents and professionals who sat around the dining table at Sharen Heath's house in Tillsonburg and decided they wanted to do something to get more speech and language services for children.

Enid Varga, then Chief Speech-Language Pathologist at the Halton School Board, suggested forming a provincial association modelled on *AFASIC*, a parent organization for children with speech and language disorders, in England. The need for a provincial voice for children with speech and language disorders was apparent, and legal incorporation in 1994 provided our fledgling group the status to represent children in consultations with the provincial government. In addition, as a provincial organization OAFCCD was now able to nominate representatives to the Special Education Advisory Committees of each school board.

The small founding group was not thinking long term and could not possibly imagine how much there would be to celebrate ten years later. Although not yet meeting all the needs, speech and language services have improved considerably since the early 1990's. Almost all school boards employ or contract speech and language pathologist services; a comprehensive provincial network of preschool speech and language services has been developed; and there is far more awareness about the impact of communication disorders on child development and learning.

OAFCCD can't take all the credit for the service improvements, however the voice of parents is vital and has made a huge difference. OAFCCD has enhanced the services available to families by providing parent workshops, regular Newsletters, and producing a variety of informative Parent Fact Sheets. In 2003, 60 Parent & Child Activity Calendars were developed and more

resources are under development as part of the *Parents as Partners* education initiative.

It seems a good time to stop and celebrate the achievements of the past ten years and honour the contributions of key individuals. This year's Annual Conference will provide some great workshops and features an anniversary luncheon. We hope you will be able to join us and celebrate the first ten years!

OAFCCD Annual Conference

Saturday October 23rd, 2004

Harmony Hall 2 Gower St. Toronto

Once again, OAFCCD is receiving support from the Hospital for Sick Children Foundation for our annual conference. The conference will be held in Toronto at Harmony Hall and will provide an opportunity to honour the work and ongoing support of George Shields and the Barbershop Singers.

George Shields is the Chairman of the *Harmonize for Speech Fund* which distributes the funds raised by Ontario District Barbershop Singers. In over 30 years of operation, Barbershoppers in communities across Ontario have raised almost \$3 and three quarter million dollars. Over 96% of the monies raised are distributed to countless individuals and groups, including OAFCCD, to help our children get the services they need.

The Barbershop Singers's motto is *A We Sing That They Shall Speak@* and they sing from the heart every day to help children with communication disorders. The *Harmonize for Speech Fund* has generously supported OAFCCD from our inception, with donations of \$40,000 over the past 10 years. We are thrilled to to honour George Shields and all of the Barbershop Singers at our upcoming Annual Conference.

Teaching Strategies to Meet Different Learning Needs

The chart, shown below, has a list of strategies that teachers can use to meet the different learning needs of students. This chart, or various versions of it, is being used by several school boards. The Thames Valley District School Board has provided the list of strategies to classroom teachers as part of their early identification process. Before referring students, who are struggling in the classroom, to the Program Development Team (some boards use the term “school team”) the teacher can use the chart to indicate which strategies have already been tried. For many students these strategies will help them to succeed in the classroom. If any of these strategies will help your child, you may want to make sure they are considered by the classroom teacher, and, in the development of the student’s Individual Education Plan (IEP).

Strategy	Action	Example
Size/Amount	Change the number of items that the student is expected to learn or complete	Reduce the number of social studies terms, or spelling items, a student must learn at any one time.
Time	Change the time allotted and allowed for learning, task completion, or testing.	Give extra time for completing a task, or a test.
Level of Support	Adjust the amount of personal assistance provided to a specific student	Assign partners, provide a student tutor (the same or a different grade), use an adult volunteer, or assign a teaching assistant. For gifted students, increase independence for extra research or activities.
Input	Adapt the way instruction is delivered to the student.	Use different visual aids (maybe a check list or diagram), plan more concrete examples, provide hands-on activities, place students in co-operative groups.
Difficulty	Adapt the skill level, problem type, or the rules on how the student may approach the work	Allow the use of a calculator to figure a math problem; simplify directions; change rules to allow a student to use the dictionary or textbook.
Output	Adapt how the student can respond to instruction.	Instead of answering questions in writing, allow a verbal response, use assistive technology, (voice recognition software on computer), allow students to show knowledge with hands-on materials (make a model or drawing).
Participation	Adapt the extent to which the learner is actively involved in the task.	In geography, have the student hold the globe while others point out locations.
Alternative Goals	Adapt the goals or outcome expectations while using the same materials.	In social studies, expect a student to be able to locate just the provinces, while others learn to locate capitals as well.
Substitute Curriculum	Provide different instruction and materials to meet a student’s individual goals.	During an English test, one student is learning computer skills in the computer lab.

Source: *Adapting Curriculum and Instruction in Inclusive Classrooms: A Teacher’s Desk Reference*, by Deschenes, C., Ebeling, D., and Sprague, J., 1994

The Ministry of Education has also developed a resource for teachers which provides ideas on how they can help students with special education needs in the classroom, **The Ontario Curriculum Unit Planner: Special Education Companion**. This resource includes strategies and suggestions related to each exceptionality, including speech and language impairment. The strategies are divided into a number of categories, and for each category a number of strategies are identified. Some of the suggestions for students with speech or language impairment are listed below:

Strategy	The Teacher may: (Note: These are just a few examples of strategies provided)
Classroom Environment	<ul style="list-style-type: none"> ● seat the student close to the teacher or stand close to the student when giving instruction. ● provide a “quiet spot” for the student to work.
Listening	<ul style="list-style-type: none"> ● secure the student’s attention (e.g., call his or her name) before giving instruction ● write instructions or key words on the chalkboard
Speaking	<ul style="list-style-type: none"> ● prompt self correction (e.g. “Did you runned or ran?”) ● categorize pictures/objects from thematic units to assist student with word retrieval
Speech Production	<ul style="list-style-type: none"> ● employ a slower rate of speech, using vocal inflections the student can model ● reduce classroom speaking demands for the student by providing a model for the student to repeat, including a choice as part of a question (e.g., “Is it ___ or ___?”)
Social Interactions	<ul style="list-style-type: none"> ● instruct the student on how to obtain a conversational partner’s attention, through eye contact or by calling the partner’s name ● use modelling, drama, role play, and puppets to practice social interaction skills
Reading	<ul style="list-style-type: none"> ● integrate reading into activities the student finds enjoyable (e.g., games, art, cooking) ● teach story structure to help the student comprehend reading material (e.g., setting, problem, action/response, outcome)
Writing	<ul style="list-style-type: none"> ● use flow charts or tables to help the student get started on writing assignment ● provide the student with a checklist for proofreading
Self-Advocacy	<ul style="list-style-type: none"> ● help the student to recognize difficult listening situations and teach him or her to ask for repetition and/or clarification when needed
Organization	<ul style="list-style-type: none"> ● encourage the student to use an agenda to remember homework, project time lines, etc.
Assessment	<ul style="list-style-type: none"> ● teach the student ways to prepare a study sheet ● use several assessments to establish the student’s ability

The Special Education Companion is available at <http://www.ocup.org/resources/#companions> . The Special Education Companion also includes an extensive reference list. A copy of the section on Language Impairments and Speech Impairments is available from OAFCCD by calling Alison Morse at (519)842-9506. (Note: A copying fee will apply.)

Opening the Door into Speech

A Parent's Story by Judy Chlebak-Wright

On a beautiful May morning in 1997 we brought our two year old son to Sick Children's Hospital in Toronto. Brendan had no idea, of course, what the next two hours would entail, and fell blissfully upon the exciting new toys in the playroom.

Brendan was born with an enlarged tongue (macroglossia), a symptom of Beckwith-Wiedemann Syndrome. Children with Beckwith-Wiedemann (BWS) need special equipment (Cleft Lip and Palate bottles, nipples and soothers, large size cribs, strollers, and car seats) as well as large size diapers and clothes.

The first two years of Brendan's life were particularly exhausting. Until he could safely use a regular bottle (at 12 months), it took us eight hours a day to feed him, using a Cleft Lip and Palate bottle. Except for speech and chewing, Brendan met most of his developmental milestones. At the age of two his vocabulary was limited to 30 words, and he couldn't chew solid foods. Brendan became increasingly frustrated by his inability to communicate. Meanwhile, I felt like the mother of the deaf child in the movie *Mr. Holland's Opus*, who screams, "I don't know what he wants, I don't understand what he is saying!". We began to search for a plastic surgeon who could help Brendan. We were fortunate to find Dr. John Phillips, who agreed to operate when Brendan was 30 months old.

During the two hour surgery, a pie shaped wedge was cut from the front of Brendan's tongue. Tissue was removed from under the front of the tongue, the sides and the back. The next morning Brendan was wheeled into our room and when we saw him he smiled as widely as he could with his hugely swollen tongue. And then he had the worst temper tantrum of his life (my mother had warned me this might happen – Brendan was trying to tell me that he didn't like any of this).

Because he couldn't suck, which might have strained his stitches, he also had to go through bottle withdrawal. Not an easy time. At first he said little..It obviously hurt him to speak, and the newly shaped tongue felt strange in his mouth. It took a full two

months for the stitches to dissolve, and another four months for the swelling to subside.

Brendan began to see a speech therapist once a week. There were many sounds that he couldn't make. When he wanted a drink, he couldn't say milk or cup, so he hung onto the door handle of the refrigerator, and screamed. He could sing two songs, if we sang them very slowly. After the speech therapy, this began to change. The surgery had opened a door, and Brendan entered the world of speech.

My husband and I signed up for the *Hanen Program*, an eight week course where parents learn different techniques to encourage speech. The Hanen speech pathologist visits each home, and videotapes the parents practising new techniques with their child. Now nearly three years old, Brendan's speech sounded like this: "Anta" for Santa, "geen" for green, "beu" for blue, "gook" for bird. It was heartening to replay the same videos a year later, and watch as Brendan learned to label objects correctly ("Sheep"), then describe them ("Blue sheep" or "more sheep"), and then begin to experiment with two-word sentences; then five word sentences. His pronunciation became clearer and clearer, During the three months that we attended the Hanen Program, Brendan's vocabulary increased by 70 new words; a phenomenal rate of growth! Today he hardly stops talking.

I made up a card file with pictures as Brendan mastered each new word. My daughter Erin was a wonderful assistant and to this day will analyze her peer's speech patterns. Our speech therapist, Fern Gitter offered us a new course for parents called the *Later Language Parent* workshop which runs for four evenings. Parents are given ways to introduce grammar to their child's sentences, and learn several ways to model the missing word and exaggerate it through games or daily living activities.

As I am writing this article, Brendan stands beside me, chanting his latest new words. "Dog poo, dog poo, don't sat dog poo." This isn't quite what I had in mind when we opted for surgery and speech therapy, of course, but I have to admit: he's pronouncing every word clearly, and he clearly knows what he's saying. Welcome to the world of speech, my little son.