

COMMUNICATION FOR LIFE

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Special points of interest:

- ORAL MOTOR EXERCISES
- SIPPY CUP DEBATE
- WORKSHOPS
- SUPPORT/PARENT GROUPS— INFORMATION AND CONTACT DATA
- TESTIMONIAL
- 1-2-3-Magic Book review

Hello and welcome!

Welcome to the first edition of *communication for life!* If you are receiving this newsletter then you have a client, a friend or a doctor in common with the private practice of *Lynn's Speech Therapy Center*. We have found that over the years we hear back from parents that there is often an exhaustive search for information! By launching this newsletter we hope to share information on parent support groups in our area, types of therapy available in our area and to provide updated information on common difficulties (see "sippy cup debate" in this edition!) It is our believe that education is the key to obtaining appropriate services for any child in need

of speech therapy services or those in need of additional services. We welcome any information that any readers would like to share with us. Many of you may have gone to a great workshop, or attended a helpful meeting at a parent support group or simply read an excellent book dealing with a typical parenting issue. Please E-mail us at lynnodell-speech@msn.com with any suggestions as we would love to include the information in upcoming editions! We will also be



Stay informed! You are the best advocate for your child and family!

printing your responses to our newsletter in a section called "Parents Speak". In this section we will also answer questions that you send into us via e-mail or through phone calls **732-761-8400**. So enjoy the newsletter and please let us know what you think!!

Oral Motor Exercises

This is a term we would like for all of our readers to become very familiar with! So it will be the story topic in this section during each issue. It is our believe at *Lynn's Speech Therapy Center* that the underlying

muscle structures need to be addressed when working with children who have delayed speech. Traditional speech therapy incorporates use of word drills and verbal imitations to train new words and

sounds. Oral motor therapy is a technique that is used as a base of support for this traditional therapy. The underlying muscle structures must be addressed in order for the child to improve steadily.

Book of the month—suggested reading

Each month we will suggest a book that other parents have found useful and that we have reviewed. We will cover many different areas and authors and ask that any of our readers please forward to us any reading suggestions. We would love to include them in upcoming editions!

This month we suggest [*1-2-3-Magic*](#) by [Thomas W. Phelan, Ph.D.](#) This book can be found at Barnes & Noble, ordered through 1-800-422-4453, or you can visit www.thomasphelelan.com. The

average cost of the book is \$15.00. This book is easy to read and takes the reader through common behavioral problems exhibited by children 2-12 years old. This practical guide helps the parent define an effective discipline plan for the most obnoxious of childhood behavior to the most benign of childhood behaviors. It stresses consistency with the 1-2-3-rule, and removes the need for parents to be yelling and/or hitting the child. As therapists we have seen this

strategy work very well in treatment sessions! Parents have consistently given us positive feedback about how helpful this book is! Happy reading!



Parent Support Groups

Contacting your local library, community center, YMCA or completing internet searches are often good ways to locate support group meetings in your area. You can reference a specific disorder (i.e., Autism, Apraxia) or simply ask for info on parent groups. Should you have any suggestions please **phone 732-761-8400** or e-mail us at lynnodell-speech@msn.com. Parent groups provide excellent support and advice for families dealing with childhood disabilities. This month we are highlighting

[SPAN—Statewide Parent Advocacy Network, Inc.](#) 35 Halsey Street, 4th fl, Newark, NJ 07102. 800-654-7726. www.spannj.com. This is a great place to start in your search for information concerning your child's disabilities and to get advice on how to get the best services for your child. There are seasoned advocates to speak with who will share with you many pointers on how to locate and secure good services for your child.

Often talking to other parents whose children are dealing with similar delays helps the parent to feel reassured and to have hope for a bright future! Gathering information helps parents to be active members of their child's educational planning.

Workshops



Each month we will provide information on parent workshops or seminars in the area as well as professional conferences. Should you know of any good ones please call or e-mail us!

Parent workshops

Check out **Brookdale Community College** located at 765 Newman Springs Rd, Lincroft NJ. Phone number 732-224-2315. Here we have found many parenting workshops including but not limited to: Optimal Parenting, Decreasing parental stress,

Parenting in the age of global technology and competition. These courses run for one or two nights and range in price from \$25- \$75. Call today to here a full list of summer courses and to register.

Sippy Cups—to drink or not to drink!

Over the past few years many articles have been written on the use of sippy cups. Do they help or hurt the child? We will answer this question from the perception of a speech therapist that possess a background in oral motor development. Sippy cups **do not help** speech development. If you look at the sippy mouth tip of any sippy cup it is undoubtedly chewed up. This is due to the child's need to bite on the tip to stabilize and use the jaw for drinking. If a child has delayed

speech development this type of movement utilized for sippy cup drinking does nothing to facilitate muscle strength and coordination. But if a child is drinking from a regular open rim cup or from a straw cup, then the muscles rely less on the jaw and begin to gain strength and coordination



every time they work together for drinking. This practice of coordinating and strength building through drinking will help the child to develop better coordination when attempting to speak. Therefore, if your child has speech delays, take them off the sippy cup and use straw cups (still providing spill proof to keep your rugs clean!) and open rim cups. If your child has no speech delays then coordination of the muscles is good and it will not matter what cup they drink with .

Testimonial

Lynn has worked with my son for almost one year and the progress he has made is astounding. Lynn's approach in combining oral motor exercises along with working on specific sounds has helped him make progress when other therapy

simply frustrated him. He went from being an angry and frustrated toddler to a successful, social and happy preschooler and I have Lynn to

thank for that!
Kim and Nicky

Each month we would like share with our readers a testimonial from one of our clients! We love working with the kids and their families and it's so nice to share in the joy of all that hard work!

Oral Motor Info—Contacts—Websites and more!



Often parents and professionals search the web for information and can become frustrated trying to narrow it down. We hope to provide assistance in focusing these searches! Following

is a list of sites we have found useful for obtaining information and learning about products/tools.

- www.apraxia-kids.org
- www.cleft.com/cleft.htm
- www.devdelay.org
- www.chadd.org
- www.fape.org
- www.talktoolstm.com
- www.beckmanoralmotor.com
- www.apraxia.org

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We're on the web!

www.Lynnspeechtherapycenterinc.com

Lynn M. O'Dell-Pateman Created the private practice of Lynn's Speech Therapy Center in order to provide direct and immediate services to families on a one-one basis. This center has a strong belief in the use of oral motor intervention as the primary basis for all treatment plans. Without the underlying muscle work children often linger in therapy for years longer than they need to. It is our goal to provide oral-motor based therapy combined with traditional speech therapy to improve children's speech and language skills faster allowing them to graduate from therapy in half the time. At our center there is never a waiting list, we work with every family to schedule timely evaluations. We encourage any one from the community to call 732-761-8400, or E-Mail us at lynnodell-speech@msn.com with any questions or concerns. Ask for Gina Testa, Senior Speech Language Pathologist, or for Lynn we're happy to talk!



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PARENTS SPEAK

Question: Will my child ever speak clearly? This is one of the first questions every parent will ask, usually at the time of the evaluation. The answer is dependent upon many factors, how old the child is, how delayed the child is compared to peers, and what the underlying diagnosis is for the child. Children with diagnosed disorders such as Cerebral Palsy or Apraxia, may require years more of intervention and may be much older before speech clarity is achieved. While a child with an articulation delay may improve quicker and achieve clarity at a younger age. Also important is if there are any co-occurring disorders such as PDD (Pervasive Developmental Disorder) or ADD (Attention Deficit

Disorder). When this is the case then there are additional factors being addressed in each session beyond just the concern of intelligibility. The ability to utilize oral motor tools to help facilitate speech movements often quickens the pace of development of articulation skills. Home carryover is also an important factor in the child achieving clarity. Therefore, when family and teachers, not just the speech therapist encourage the targeted sound productions improvement in clarity is often noted sooner.

Question: How long does the speech therapy last? This answer again is dependent upon the factors listed under question one. Typically we slate 6 months for parents as a time frame

wherein they will see at least enough improvement to know the intervention is effective. We continually evaluate a child's progress for parents. Discussions are ongoing as to the child's response to treatment, which allows the parent to adjust their expectations for the future. Some kids need a "push" and click very quickly when intervention is started. These kids often graduate in the 6 months. Others require multiple repetitions of the same target in order to produce it effectively on their own. These children will have noted improvement in 6 months time, but will need closer to 12 months of intervention. Again with a team approach of family, teachers and therapist the child will make steady gains.