

Spring 2012

SPLH 842 Language Disorders of Children: Preschool

Betty H. Bunce, Ph.D. & Diane Frome Loeb, Ph.D.

January 17th -March 6th 2012

Tuesdays & Thursdays 11:20-1:00

3049 DHDC (DOLE)

Office Hours:

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Course objectives:

The purpose of this course is to provide information on language impairments in children at the preschool level (3-5 years of age). Specifically, students will be exposed to current literature concerning pertinent issues involved in understanding language impairment, assessment, and intervention. This course is designed to meet the requirements of ASHA Knowledge Standards III-B Normal Processes; III-C Communication Disorders; and III-D Clinical Application in the area of Receptive/Expressive Language. In addition, secondary experiences are provided for the same Knowledge Standards in the areas of cognition (assessment) and social. Specific objectives are as follows with knowledge areas listed in parentheses:

- (1) To identify the characteristics associated with language impairment, as well as the nature of specific language impairment (Basic Concepts -Receptive/Expressive Language, Social);
- (2) To be able to apply of the theories of language development to understanding, assessing, and treating children with language impairment (Basic Concepts, Assessment, Presence of Disorders, Treatment, Receptive/Expressive Language, Cognition, Social);
- (3) To display knowledge of the methods of assessing language abilities, interpreting assessment data, developing goals and objectives, and determine appropriate measures for efficacy for language intervention (Analysis and Integration, Presence of Disorder-Receptive/Expressive Language, Cognition, and Social);
- (4) To be able to demonstrate the various approaches to language intervention, as well as service delivery models (Treatment – Receptive/Expressive Language, Social)
- (5) To become knowledgeable about the role of family involvement when working with children with language impairment; (Basic Concepts – Receptive/Expressive Language and Social)

Any student in this course who has a disability that may prevent him or her from fully demonstrating his or her abilities should contact Dr. Bunce or Dr. Loeb as soon as possible so we can discuss accommodations necessary to ensure full participation and to facilitate the educational opportunity.

Powerpoint Presentations

Powerpoints of the class lectures will be posted on Bb **AFTER** the information has been presented in class.

Classroom Conduct

We ask that cell phones be turned off and put away during class. Class takes place in a computer classroom; however, computers are for the SALT project only (1 class) and the computers should not to be used for any other reason (i.e., for checking email or surfing the web).

Academic Misconduct

Students are expected to observe all University Guidelines pertaining to academic misconduct as state in the University Senate Rules and Regulations (2.6.1)

“Academic misconduct by a student shall include, but not be limited to, disruption of classes; threatening an instructor or fellow student in an academic setting, giving or receiving of unauthorized aid on examinations or in the preparation of notebooks, themes, reports, or other assignments; knowingly misrepresenting the source of any academic work; unauthorized changing of grades; unauthorized use of University approvals or forging of signatures; falsification of research results; plagiarizing of another’s work; violation of regulations or ethical codes for treatment of human and animal subjects; or otherwise acting dishonestly in research.” Academic misconduct will not be tolerated and will be dealt with in accordance with all University rules and regulations.

Course Evaluation:

A total of 125 points is possible. Points will be assigned based on several projects including weekly reflections of readings, language analysis projects (SALT), an observation project (SICS), a written article review/critique (individual), and a group presentation of the article with a demonstration of the intervention used. In addition, there will be a final project. All of the projects may be used for portfolios; except **THE FINAL PROJECT MAY NOT BE USED FOR PORTFOLIOS**. The points will be awarded in the following manner: Class Reflections (13 x 1 pt each) = 13 pts; SALT = 14 pts; SICS = 14 pts; Article Review= 30 pts, Presentation= 10 pts, Final Project= 40 pts; and Class Participation = 4 pts.

Guidelines for Reading Reflections (Both Professors): Each class with a reading assignment also will have a reading reflection that you will complete and submit **at the beginning of class**. The Reflection will be posted on Bb. These should be typed and double-spaced. Each Reading Reflection is worth 1 point. Students should make a copy of their Reading Reflection to refer to in class to facilitate class discussion. Reading Reflections will not be accepted late. If you are ill and not able to make it to class, you may email your reflection to the professor *prior* to class. Note: there are 13 class periods with assigned readings (13 pts).

SALT (Dr. Loeb): This will be an in-class activity. We will conduct several types of language sample analyses using the Systematic Analysis of Language Transcripts (SALT) (14 pts).

SICS (Dr. Bunce): In addition, a 10-minute social interaction observation will be done by observing a child in the Language Acquisition Preschool (or if necessary a video observation can be done). The Social Interaction Coding System (SICS) will be used during this observation and an analysis form and summary statement will be completed. You will need to follow guidelines outlined in class and in the journal article (14 pts).

Article Review (Dr. Bunce): Each student will be assigned to review an intervention article and to describe its level of evidence using an evidence-based practice framework. The reviews should be completed individually (30 pts).

Article Presentation (Both Professors): You also will be assigned to a group of students (who are reading the same article) and asked to present to the class how the intervention in your assigned article would be carried out. For this presentation you will first discuss the theoretical perspective of the intervention and then need to develop a goal, objective, sub-goal and activities. You will have 10 minutes *maximum* in class to show the intervention procedure that you have been assigned (10 pts).

Final Project (Dr. Loeb): You will be given a case study and you will be asked to determine a diagnosis and provide potential goals and intervention strategies. You also will be asked to provide a rationale for your selections as well as your theoretical basis for your selection (40 pts).

A standard grading scale with a total of 125 points possible will be used:

117-125 = A
111-116 = A-
106-110 = B+
101-105 = B
108-100 = B-
104-107 = C+
99-103 = C
95-98 = C- and so forth

Texts:

1. McCauley, R.J., & Fey, M.E. (2006). Treatment of language disorders in children. Baltimore, MD: Brookes Publishing.

Referred to as Text 1

2. Bunce, B. (2008) Literacy in action: The language-focused curriculum for the preschool classroom. Baltimore, MD: Brookes Publishing.

Referred to as Text 2

3. Additional required reading assignments will be placed on reserve at the Resource room (2115 Haworth) on the Lawrence campus and at the Medical Center Hearing and Speech Department main

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office. Most articles can also be accessed through e-journal from the library (go to library web-site, then e-journal and then give the journal name).

Course Outline

<u>Date</u>	<u>Topic</u>	<u>Reading</u>
January 17 Dr. Loeb	Introduction	Loeb (2012a)
January 19 Dr. Loeb	Language Impairment in Preschoolers Characteristics of SLI	Weiss & Paul (2010); Gillam & Kamhi (2010)
January 24 Dr. Loeb	Theories- Implications for Assessment	Loeb (2012b)
January 26 Dr. Bunce	Play-Based Assessment	Linder (2008 a & b)
January 31 Dr. Loeb	Assessment: Language sample analysis	Heilman et al. (2010); Goffman & Leonard (2000)
February 2 Dr. Loeb & Dr. Bunce LAB 2/2 & 2/16 observation in LAP using SICS	Language Sample Analysis Assessment (SICS)	Hadley & Schuele (1998) Rice, Sell, & Hadley (1990)
February 7 Dr. Loeb	RTI and Service Delivery	Brandel & Loeb (2011); Dinnebeil et al. (2009); Justice et al. (2009)
February 9 Dr. Loeb	EBP	Johnson (2006); Kaderavek & Justice (2010)
February 14 Dr. Bunce	Theories – Implications for Intervention & Intervention Planning	vanKleeck & Richardson (1993); IEP, IFSP, Text 1: McCauley & Fey Chapter 1 Horn & Banerjee (2009)
February 16 Dr. Bunce	Intervention Techniques	Bricker (1993); Text 1: Weismer & Robertson Chapter 8

SICS Observations Due- Dr. Bunce

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February 21 Dr. Bunce	Language Intervention	Fey et al. (2003); Text 1: Hancock & Kaiser (EMT), Chapter 9
February 23 Dr. Bunce	LAP	Text 2: CH 1, 2, 3 Text 1: Camarata & Nelson Chapter. 10
February 28 Dr. Bunce	LAP intervention and documentation	Text 2: Chapter 4 & 5 Justice et al. (2008)
March 1	Language Intervention	Group presentations of specific language techniques
Critiques Due-- Dr. Bunce		
March 6 Dr. Bunce	Language & Literacy	Watkins & Bunce (1996); Hadden & Pianta (Justice, 2006)

Bibliography

Brandel, J., & Loeb, D. (2011). Program intensity and service delivery models in the schools: SLP survey results. *Language, Speech, and Hearing Service in the Schools*, 42, 461-490.

Bricker, D. (1993). Then, now, and the path between: A brief history of language intervention. In A. P. Kaiser & D. B. Gray (Eds.), *Enhancing children's communication: Research foundations for intervention*. (pp. 11-31). Baltimore: Paul H. Brookes.

Camarata, S. M. & Nelson, K. E. (2006). Conversational recast intervention with preschool and older children. In R. McCauley & M. Fey (Eds), *Treatment of language disorders in children*, (pp.237-264). Baltimore: Brookes Publishing.

Dinnebeil, L., Pretti-Frontczak, K., McInerney, W. (2009). A consultative itinerant approach to service delivery: Considerations for the Early childhood community. *Language, Speech, and Hearing Services in the Schools*, 40, 435-445.

Fey, M. E., Long, S. H., & Finestack, L. H. (2003). Ten principles of grammar facilitation for children with specific language impairments. *American Journal of Speech-Language Pathology*, 12. (1) pp. 3-15.

Gillam, S.L., & Kamhi, A.G. (2010). Specific language impairment. In J.S. Damico, N. Muller, & M.J. Ball (Eds.) *The handbook of language and speech disorders* (pgs 210-226). Malden, MA: Wiley-Blackwell.

Goffman, L., & Leonard, J. (2000). Growth of language skills in preschool children with specific language impairment: Implications for assessment and intervention. *American Journal*

of Speech-Language Pathology, 9, 151-161.

Hadden, D. S. & Pianta, R. B. (2006). Clinical consultation with teacher for improved preschool literacy instruction. In L. Justice (Ed.), *Clinical approaches to emergent literacy intervention* (pp. 99-124). San Diego, CA: Plural Publishing.

Hadley, P. A. & Schuele, C. M. (1998). Facilitating peer interaction: Socially relevant objectives for preschool language intervention. *American Journal of Speech-Language Pathology*, 7, 25-36.

Hancock, T. B. & Kaiser, A. P. (2006). Enhanced milieu teaching. In R. McCauley & M. Fey (Eds), *Treatment of language disorders in children* (pp.203-236). Baltimore: Brookes Publishing.

Heilmann, J., Nockerts, A., & Miller, J.F. (2010). Language sampling: Does the length of the transcript matter? *Language, Speech, and Hearing Services in the Schools*, 41, 393-404.

Johnson, C. (2006). Getting started in evidence-based practice for childhood speech-language disorders. *American Journal of Speech-Language Pathology*, 15, 20-25

Horn, E. & Banerjee, R. (2009). Understanding curriculum modifications and embedded learning opportunities in the context of supporting all children's success. *Language Speech and Hearing Services in Schools*, 40, 406-415.

Justice, L., Masburn, A, Pence, K.L. & Wiggins, A. (2008) Experimental evaluation of a preschool language curriculum: Influences on children's expressive language skills. *Journal of Speech, Language, and Hearing Research*, 51, (4), pp 983-1001.

Justice, L.M., McGinty, A., Guo, Y., Moore, D., (2009). Implementation of responsiveness to intervention in early education settings. *Seminars in Speech and Language*, 30, 59-74.

Kaderavek, J.N., & Justice, L.M., (2010). Fidelity: An essential component of evidence-based practice in speech-language pathology. *American Journal of Speech-Language Pathology*, 19, 369-379.

Linder, T. (2008a). *Transdisciplinary play-based assessment 2*. (pp. 1-5) Baltimore: Paul H. Brookes Publishing Co.

Linder, T. (2008b). *Administration guide for TPBA 2 and TPBI 2*. (pp. 3-55). Baltimore: Paul H. Brookes Publishing Co.

Loeb, D.F. (2012a). Language development in preschoolers. Unpublished ms.

Loeb, D.F. (2012b). The effect of social interaction on language development across settings. Unpublished ms.

McCauley, R. & Fey, M. (2006). Introduction to *treatment of language disorders in children*. In R. Mc Cauley & M. Fey (Eds) *Treatment of language disorders in children* (pp. 1-17). Baltimore: Brookes Publishing.

Rice, M.L., Sell, Marie, A., & Hadley, P.A. (1990). The social interactive coding system (SICS): An on-line, clinically relevant descriptive tool. *Language, Speech, and Hearing Services in Schools*, 21, 2-14.

van Kleeck, A., & Richardson, A. (1986, 1993). What's in an error? Using children's wrong responses as language teaching opportunities. *National Student Speech, Language, and Hearing Association Journal*, 14, 25-50.

Watkins, R.V., & Bunce, B. H. (1996). Natural literacy: Theory and practice for

preschool intervention programs. *Topics in Early Childhood Special Education*, 16 (2), 191-212.

Weismer, S.E. & Robertson, S.B., & (2006). Focused stimulation approach to language intervention. In R. McCauley & M. Fey (Eds), *Treatment of language disorders in children*, (pp. 175-202). Baltimore: Brookes Publishing.

Weiss, D., & Paul, R. (2010). Delayed language development in preschool children. In J.S. Damico, N. Muller, & M.J. Ball (Eds.) *The handbook of language and speech disorders* (pgs 178-183). Malden, MA: Wiley-Blackwell.

Project Readings:

Camarata, S, Nelson, K, Gillum, H, & Camarata, M. (2009). Incidental receptive language growth associated with expressive grammar intervention in SLI, *First Language*, 29 (1), 51-63.

Gillum, H., Camarata, S, Nelson, K. E., Camarata, M. (2003). A comparison of naturalistic and analog treatment effects in children with expressive language disorder and poor preintervention imitation skills. *Journal of Positive Behavior Interventions*, 5 (3), pp. 171-179.

Justice, L. Chow, S, Capellini, C. Flanigan, K, & Colton, S. (2003). Emergent literacy intervention for vulnerable preschoolers: Relative effects of two approaches. *American Journal of Speech-Language Pathology*, 12, 320-332.

Kouri T. A. (2005). Lexical training through modeling and elicitation procedures with late talkers who have specific language impairment and developmental delays. *Journal of Speech, Language, and Hearing Research*, 48, 157-171.

Leonard, L., Camarata, S., Brown, B., & Camarata, M. (2004). Tense and agreement in the speech of children with specific language impairment: Patterns of generalization through intervention. *Journal of Speech, Language, and Hearing Research*, 47, 1363-1379.

Leonard, L., Camarata, S., Pawłowska, M., Brown, B., & Camarata, M. (2006). Tense and agreement morphemes in the speech of children with specific language impairment during intervention: Phase 2. *Journal of Speech, Language, and Hearing Research*, 49, 749-770.

McGregor, K. K. (2000). The development and enhancement of narrative skills in a preschool classroom: Towards a solution to clinician-client mismatch. *American Journal of Speech-Language Pathology*, 9, 55-71.

van Kleeck, A, Woude, J. V., & Hammett, L. (2006) Fostering literal and inferential language skills in Head Start preschoolers with language impairment using scripted book-sharing discussions. *American Journal of Speech Language Pathology* 15, 85-95.

Other articles of interest:

Cole, K.N., Coggins, T.E., & Vanderstoep, C. (1999). The influence of language/cognitive profile on discourse intervention outcome. *Language, Speech, and Hearing Services in the Schools, 30*, 61-67.

Hadley, P. & Holt, J.K. (2006) Individual differences in the onset of tense marking: A growth-curve analysis. *Journal of Speech, Language & Hearing Research, 48*, 1344-1362.

Rice, M. L, Taylor, C.L. & Zubrick, S.R. (2008). Language outcomes of 7-year old children with or without a history of late language emergence at 24 months. *Journal of Speech, Language, and Hearing Research, 51*, (2), pp. 394-407.

SICS Project Grading- Submit to Prof. Bunce 14 points

Coding= 7 points

Analysis of coding = 7 points

Answer the following questions in your analysis:

1. What is the average number of verbal interactions per 5-minute segment?
2. What is the average length of interaction?
3. Are the interactions primarily with peers or adults?
4. When the child is involved in an interaction, does he/she typically initiate the interaction or is he/she primarily responsive? Are there differences in this profile between peer and adult partners?
5. When the child chooses to initiate, who does he/she initiate to? An adult or a peer? Does the child initiate to several partners or are initiations limited to a specific partner?
6. When the child responds, what response mode is used? Verbal responses or limited responses (R-V-I or R-NV)?

Article Presentation Guidelines (10 points)

Lead class discussion for 10 minutes with the following guidelines:

1. Title of article- theoretical perspective, purpose (1-3 minutes)
2. Demonstrate the intervention (use videos; props) (5 minutes) Develop goal, objective sub-goal and activities)
3. Effectiveness of intervention. (would you use it?) (1-2 minutes) (optional)

Independently Composed Critique: Prepare a 2-3 page double-spaced critique of the article.

This critique should first provide a summary/overview of the article with particular reference to author’s point of view about intervention. Then discuss the effect of this point of view on intervention and what you agreed with or disagreed with in regards to the article. Finally, discuss how the study could be improved or what might be the next step. Attach the evaluation of intervention study worksheet. Also, please use APA style in writing this review. Also, be careful in regards to grammar and spelling.

Grading will be as follows:

Rubric for written reflection of article review: 30 points

	Minimal 1 (1-4)	Good 2-3 (5-7)	Excellent 5 (10 points for summary)
Summary of authors point of view or position (10 points)	Provides summary but omits important details	Provides adequate summary, including at least one important detail to describe author’s point of view	Provides accurate summary, clearly portraying author’s point of view/perspective
Effect of this point of view on practice/intervention (5 points)	Provides general information on effect	Provides details on one effect on practice or intervention	Provides details of two or more effects on practice and intervention.
Agree/Disagree and Why? How could article/research be extended? (5 points)	Provides a general opinion	Provides support for opinion including one specific reason and one extension	Provides detailed support for opinion including at least two reasons and at least two extensions
Adequacy of completion of article evaluation worksheet (5 points)	Doesn’t complete work sheet.	Partially completes work sheet	Completes the work sheet and provides appropriate detailed information.
Writing Conventions & APA format (5 points)	+3 errors; Uses one APA element	1-2 errors; Uses more than one element but not all	No errors & uses APA format

Worksheet for Evaluating Intervention Studies

Title of Article: _____

Authors: _____

Journal and Publication Date: _____

Target of Intervention: _____

Intervention: _____

Comparison Condition(s): _____

Outcome Question: _____

Outcome Variables					
Significant short term?					
Effect size?					
Significant long term?					
Effect size?					

Other Outcomes: _____

Population Studied: _____

Quality of Evidence: Level of evidence? _____

Number of participants in treatment condition? _____

Blinding? _____

Intervention (Dosage) Time: # Sessions _____

Minutes per session ____

Times per week ____

Weeks ____

Service Delivery: _____

Cost Estimate: \$ _____

Strengths and Weaknesses of administering intervention in your clinical setting?

Strength: _____

Weakness: _____

Would you apply this intervention in your clinical practice? Yes No

Note. The levels of evidence are based on the Scottish Intercollegiate Guideline Network (www.sign.ac.uk <<http://www.sign.ac.uk/>>) which was adapted by ASHA (2004). The first level, 1a, is the highest and strongest level of evidence. It consists of meta-analysis studies that have been conducted with more than one randomized controlled trial. The second level, 1b, is the next highest level of evidence and consists of a randomized controlled trial. The third level, IIa, is a study with an experimental group and a control group, but no randomization. The fourth level, III, consists of studies that show relationships between one variable and another, but not cause and effect data. The fourth level (III) would also include case studies that do not have controls for maturation. The lowest level of evidence, is level IV, and consists of reports by experts in the field who support or do not support the use of a particular intervention.