INTRODUCTION

The *Tongue Thrust Book* contains two programs: the Tongue Thrust Correction Program and the S Articulation Correction Program. These two programs were combined in one book to provide a complete treatment program for students who have difficulties in both areas. When these problems coexist, the articulation errors are perpetuated by the low and forward tongue position and are often very resistant to change. For this reason, the tongue thrust swallow is generally addressed first. Once the tongue thrust swallow pattern has been corrected, these students are better able to progress through the stages of speech sound training and to maintain carryover of their newly acquired S sound.

The first program provides the speech–language pathologist (SLP) with sequentially organized instructional sessions that provide a framework for correcting the basic tongue thrust swallow pattern. The second program provides a series of worksheets and instructional materials for correcting an S articulation error. Each program is loosely structured, providing materials for the student and SLP as the student advances through the stages of treatment. Lesson plans or session summary sheets are included, along with blank session forms that allow the SLP to provide input and make any modifications necessary to meet the needs of individual students. Tables summarize the progression of treatment for both programs. Each program includes a series of session outlines, student and SLP activities, student handouts, parent handouts, and other reproducible materials.

■ Note: The Tongue Thrust Correction Program is not appropriate for students with complex anatomical or physiological differences.

THE TONGUE THRUST CORRECTION PROGRAM

The Tongue Thrust Correction Program includes a Tongue Thrust Screening Form, swallow assessment guidelines, a letter to the orthodontist, child and parent handouts, tongue and lip exercises, a series of tongue thrust correction session outlines, home charts, and a certificate of achievement. The sequentially organized session outlines guide the SLP in the process of correcting the child's basic tongue thrust swallow pattern. At the completion of each weekly treatment session, a sheet is sent home with the student. Each sheet summarizes the activities of the session and then clearly assigns home practice activities or homework for the student to complete during the week. A space for parents or the student to chart home practice activities is built into each worksheet that is sent home. There is also space for writing parent notes and the date for returning the worksheet. Blank lines are provided on each form, allowing the SLP opportunities to individualize the sessions by writing in additional activities or adding additional home practice exercises. Two blank lesson plan forms are provided at the end of the program. All materials are reproducible and may be used with individual clients or small groups.

THE S ARTICULATION CORRECTION PROGRAM

The S Articulation Correction Program includes parent and classroom teacher letters: SLP, parent, and student record-keeping forms; S articulation instructional worksheets; and a certificate of achievement. Thirty-eight worksheets provide sequentially organized activities for teaching and practicing the New S at various levels of difficulty.

The instructional worksheets contain activities for S practice at the practice levels of words, sentences, rhymes, stories, reading, and conversation. Activities include minimal contrastive practice (S and Th practice), and early lessons are structured around a vowel chart that provides a wide range of consonant-vowel practice combinations. Several worksheets are provided at each practice level, providing the SLP with ample materials for instruction and review. As the program progresses, students are encouraged to take responsibility for monitoring their speech and are guided to problem-solve ways to ensure success during the carryover phase of treatment.

If parents agree, the SLP may choose to use the home practice component that is built into the S Articulation Correction Program. Each of the 38 instructional worksheets may be sent home and used for home practice and review. Not all of the included worksheets need to be used, and worksheets may be eliminated or skipped if students progress quickly. Record-keeping forms guide the SLP to evaluate progress and determine the level of practice that may be appropriate for instruction of home practice. There is also a summary statement about the session goal or target, an activity to practice the S production, a home practice schedule chart, and a place for parents to initial and write notes to the SLP. After 1 week, the worksheet is returned to the SLP and student progress is reviewed and new materials for instruction are selected.

SUGGESTIONS FOR USE
When beginning the Torrational entered to the state of the stat When beginning the Tongue Thrust Correction Program, the SLP should complete the tongue thrust screening forms. Contact with the student's dentist or orthodontist is suggested. With the parent and student, the clinician may then preview the Tongue Thrust Correction Program and discuss the overall plan for tongue thrust and speech correction. Both the parents and the student should have a basic understanding of the tongue thrust swallow, the program's progression, and the goals that have been established. Each person should realize his or her respective responsibilities, and the child should clearly understand how this program will ultimately benefit him or her. The SLP should point out some of the fun aspects of the program, such as using squirt bottles while practicing swallowing, or eating snacks while playing the Snack Swallow Game. A small party to celebrate the completion of the program may be planned.

During the early phase of tongue thrust correction, swallows are performed slowly and carefully one at a time with support such as mirrors and illustrations. Terms such as slurp swallows or sip swallows are assigned. Other terms such as straw swallow and squirt swallow are used during activities as the student practices the new swallow pattern in increasingly more difficult situations. Eventually the student will achieve automatic correct swallows in all situations. A contract and a Certificate of Achievement are provided to help the student become involved and committed to the program.

A student might begin the S Articulation Correction Program once his or her tongue thrust swallow has been corrected. The SLP should inform the student and parents of the general progression of treatment, discuss the home practice component, review the format of the home practice charts, and establish a routine for sending home and returning home practice materials. Forms are included that outline the steps or levels of instruction that the program follows. The student's Progress Tracking Form may be kept at home, and the student may mark off or color in the steps as he or she progresses from one level of difficulty to the next.

Treatment sessions may be scheduled for once or twice weekly, with students seen individually or in small groups. The age of the student, the student's internal motivation, the severity of the speech impairment, and the amount of home support are all factors that influence a student's rate of progress.

Parents may benefit from observing or joining a treatment session with the SLP and their child. At that time, some basic instructional techniques may be modeled and information provided regarding pacing, reinforcement, and feedback. A Certificate of Achievement may be awarded when students complete the program.

ASHA POSITION REGARDING TONGUE THRUST CORRECTION

The official statement of the American Speech-Language-Hearing Association (ASHA) includes the following points:

- 5. The provision of oral myofunctional therapy remains an option of individual speechlanguage pathologists whose interests and training qualify them.
- 7. Appropriate goals of oral myofunctional therapy should include the retraining of labial and lingual resting and functional patterns (including speech). (ASHA, 1991, p. 17)

For additional sources and information regarding oral myofunctional therapy, see the following bibliography.

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