

A speech pathology clinical example: Lisp

Scenario: A 7-year-old attends speech pathology to remediate a lisp

1. *Clinical target*
 - a. Interdental lisp → tongue protrudes between the teeth and produces a 'slushy-like' sound
2. *Lifestyle and treatment categories*
 - a. Oro-motor exercises
 - b. Postural exercises for core strength and posture (if indicated, may not be necessary)
 - c. Orthodontic intervention for an open-bite (might be indicated for a later stage; orthodontic treatment generally occurs only from 9+ years)
3. *Personal goals*
 - a. Tongue-placement exercises in relation to cheeks and teeth
 - i. Bite on back teeth
 - ii. Spread lips in a smile
 - iii. Place tongue at bottom of mouth behind bottom teeth
 - iv. Practise this 10 minutes daily for 1 week
 - b. Proceed to word level (word initial/medial/final) → each level takes ± 1 week
 - c. Proceed to sentence level (± 1 week)
 - d. Proceed to short stories (± 1 week)
 - e. Contextualise to everyday speech with external monitoring (parents and/or siblings) (± 2 weeks)
 - f. Carryover to everyday speech with self-monitoring (ongoing for ± 3 months)
4. *Motivational drivers (Benefits)*
 - a. I will be less embarrassed to talk in public!
 - b. My friends will be able to understand me and they won't laugh at me.
 - c. It won't look funny when my tongue sticks out while I'm talking.
 - d. Mum and dad won't always ask me to say things over and over again.
 - e. It will be great when I don't lisp anymore, because I'll sound better.

Result: The child is motivated to complete speech exercises with less pressure from his/her parents, thereby increasing adherence to doing the speech therapy activities. This results in a quicker and improved outcome for the child which has a positive impact on his/her confidence to engage more in classroom discussion.