

# PARENT WORKBOOK

Teaching Children.  
Coaching Parents.



Speech Therapy of Forsyth | Justine Glover



# Welcome!

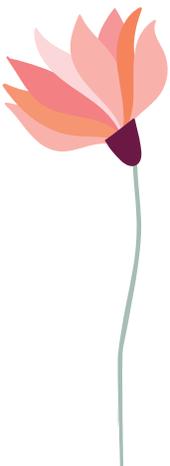
“Welcome” is derived from “Be Well Coming Here.”

This is our intention... for you to be better off for coming to  
Speech Therapy of Forsyth. This workbook is your introduction  
to the details of the amazing human ability to

## Listen & Speak

To be able to really help us help your child,  
it is important that you (the parent)  
understand how it is done.

Come With Me...



# This is what you will learn:

## 1. Speech & Language:

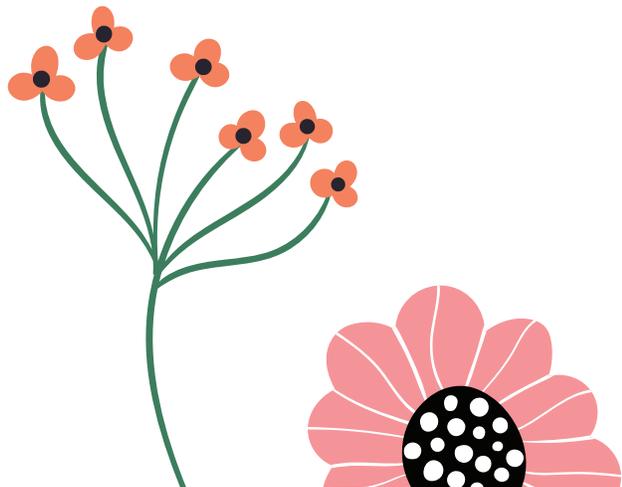
What is the difference?

## 2. Sensory Integration:

Why is this a deal breaker?

## 3. Conversation:

Do you know the rules?



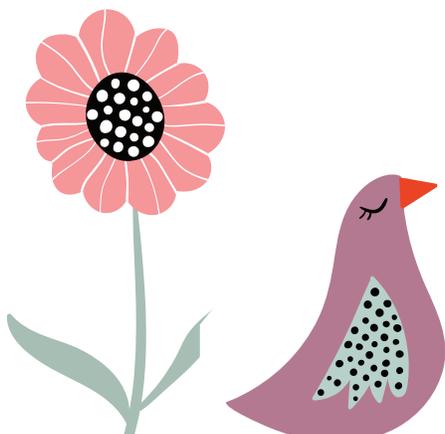
# Speech: the sound system

Example of a mistake: "wed wabbit"/ w/r substitution

# Language: vocabulary & grammar

Receptive language = listening to & reading words

Expressive language = saying & writing words



# How Speech Happens



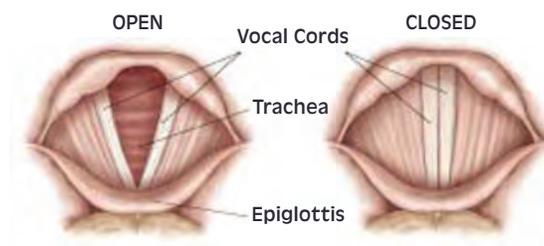
# Imagine what it takes to say “Mommy!”



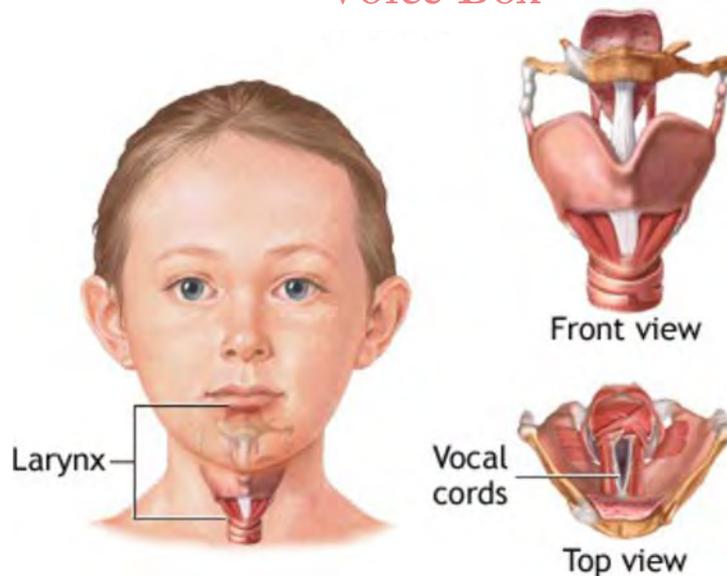
1. Inhale and contract the throat to close the vocal cords and exhale
2. Lower the palate so air flows through nasal passage to create nasality as lips are sealed (/m/)
3. Raise the palate to close off nasal passage while maintaining airflow and dropping jaw and tongue into the floor of the mouth (/ah/)
4. Lower palate again to permit nasality while pressing lips together (/m/)
5. Open lips, retract lips and tongue and maintain airflow (/ee/)

***Makes you wonder why anyone ever learns to speak?!***

## Vocal Cords



## Voice Box



# Mouth Muscles

So, this miracle of speech requires the intricate coordination between the muscles of the **throat mouth, including the tongue, pallet cheeks and lips.**



Typically, electricity from the brain comes down through the nerves and sufficiently nourishes the muscles with electricity and blood. When this is adequate, we supplement by doing oral stimulation. Stretching and pinching muscles cause the nerve and vessels to stretch, the blood to be delivered and the little face turns pink. This better prepares the muscles to be able to move and eventually imitate what we are modeling.

If your child needs oral stimulation, your Therapist will show you very simple strategies. The muscles of the mouth and throat, like all other muscles, need **strength** and **coordination** in order to function optimally.



Language =  
vocabulary and grammar

Receptive Language =  
when you are *listening* to another use words  
and understanding the meaning

Expressive Language =  
when you are *using* words  
to communicate meaning to another

(We take turns in both positions.)



Children pick up on context, gesture, and routine.  
Do you **REALLY** know how many nouns and verbs  
your child understands independent of context,  
gesture and routine?

## Find Out!

Go room by room and the car and ask your child to *identify*  
*nouns* and the functions of the nouns.

"Show me \_\_\_\_\_" (Nouns)

"Show me for \_\_\_\_\_" (Verbs)



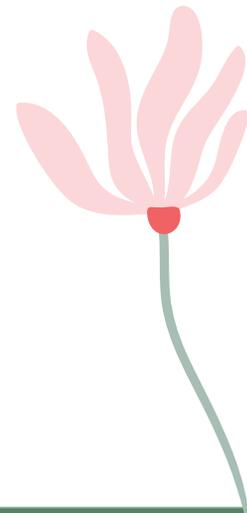
## Keep track

The ones your child cannot identify...  
you can teach them to understand it.

The ones your child does identify, those are ready to learn to say.

At our clinic, we call this a

## VOCABULARY INVESTIGATION



You spend a lot of time and money invested in your child's learning,  
so you NEED to understand this.

1. **Experience** is the foundation.
2. Then **comprehension** of the words that describe the experience.
3. Lastly, **expression** of those words.

**Simple:** Your child experiences pulling.

You keep calling it "pulling."

Soon he understands that "pulling" means what he is doing.

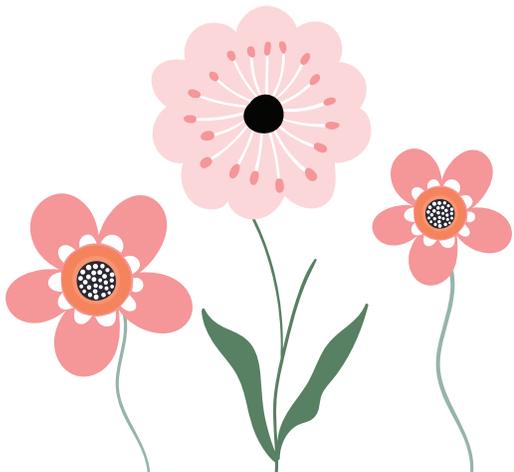
Later he is pulling and says, "pulling."

**Less Simple:** Your child cannot pull.

You keep calling it "pulling."

Your child doesn't really know what you are talking about.

If your child learns to imitate the word, he doesn't really know what he is talking about.



*I Don't  
Know????*

# Sensory Motor Integration

## What??!!

All 5 senses + movement have their own set of nerves

### 5 Senses



All these nerves bring “raw data” from experience and dump it into the brain’s “processing center”

Once processing is complete, a **concept** is born.

If all 5 senses + movement are wired perfectly (occasionally) we have a **calm & alert** HUMAN.

If all 5 senses + movement are not wired perfectly (more typical)... we have a **distracted or hyper** HUMAN.



# Concepts Need To Be Labeled

A **concept** is a snapshot of an experience:  
warm, small, salty, sweet, crunchy, sticky, melting.



The label for this experience may be **popcorn!!!**  
Now we can say “**popcorn**” instead of “warm, small,  
salty, sweet, crunch, sticky, melting”

**WHEW!!!** Much more efficient. The beauty of language.

**Consider this:** If your sensory motor integration is distorted,  
your concepts will be inaccurate so your vocabulary will be also.

## What Is To Be Done???

**FOLLOW  
ME!** 



Together, Parents and Speech/Language Therapists  
must have access to the child's mind, correct?!

Where is the child's mind? In the **brain!**



Where is the child's brain? In the **body!**



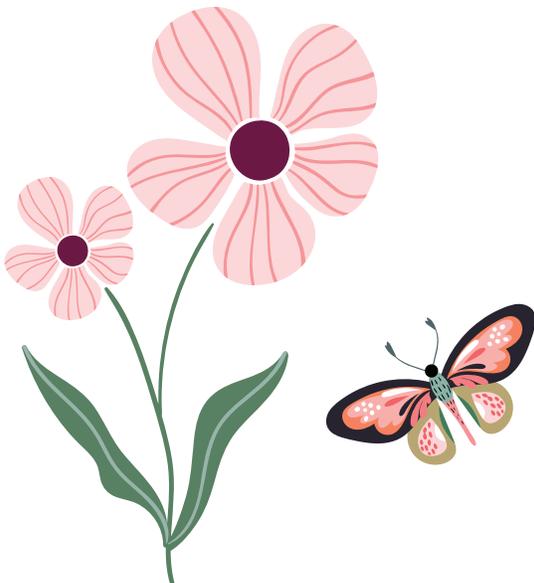
So... **Occupational Therapists** teach us how to go  
through the body to get to the brain

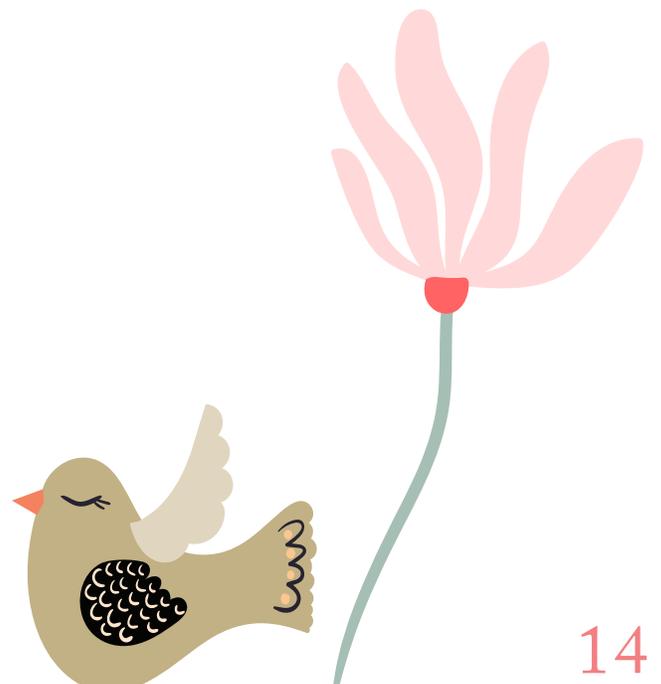
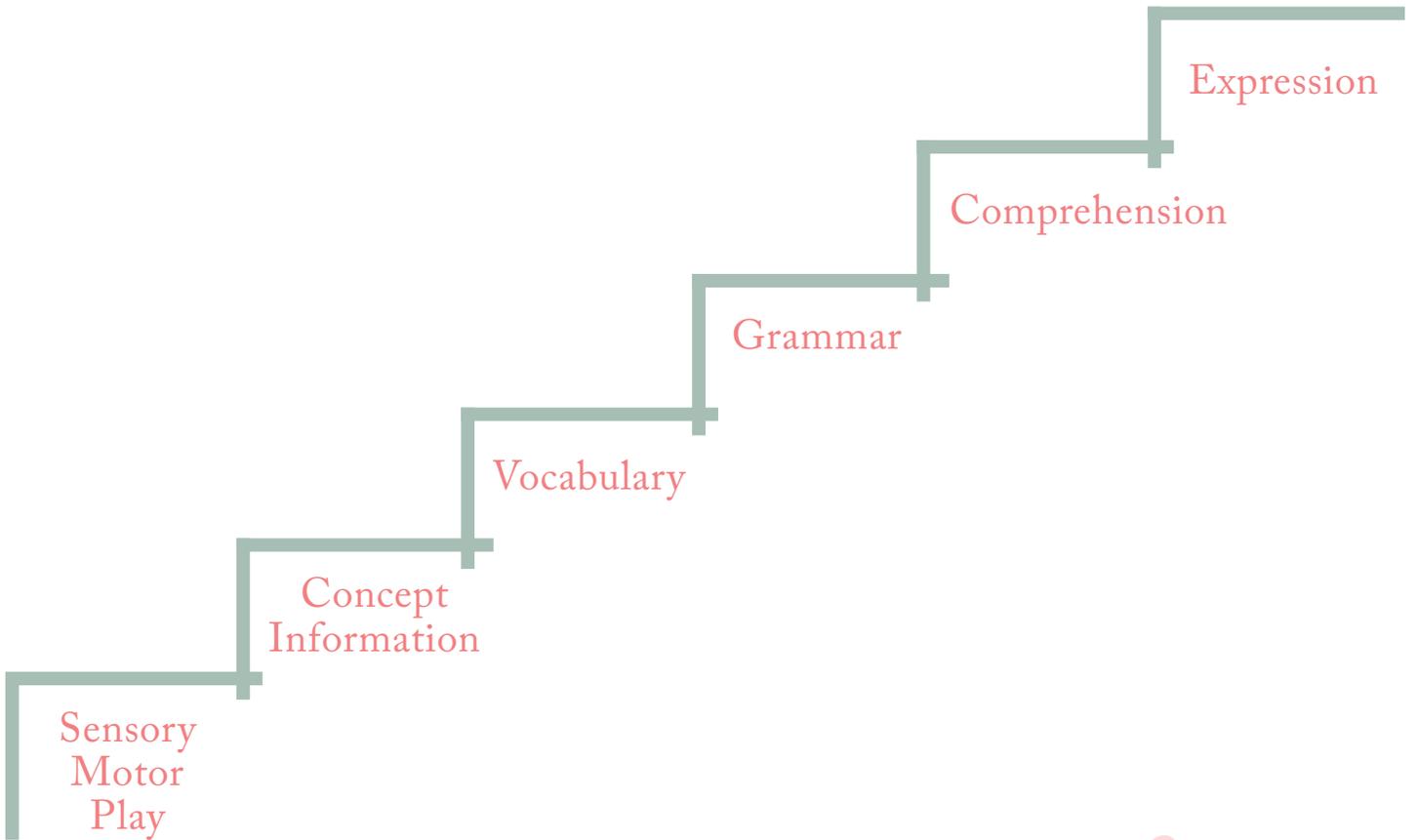
An Occupational Therapist insures each carefully orchestrated  
experience is on the right developmental level

When that happens, DATA can flow!

Concepts are born and the need for language emerges

So...take seriously the **Sensory Diet** your  
Occupational Therapist gives you.





Decades of research has proven the leading predictor of success in life is...

## The Ability To Communicate

The benefits?

### Love And Money!

“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.”

– Maya Angelou

“Only the development of compassion and understanding for others can bring us the tranquility and happiness we all seek.”

– Dalai Lama

“Seek first to understand. Then to be understood.”

– Steven Covey

A good relationship  
starts with good communication.



So, what is communication when it is only two people...

**conversation!**



# Emotional Intelligence

Turns out emotional intelligence is more important than IQ! If you're good at your job and nobody likes you... you won't last. If you are not good at your job and you are well-liked, co-workers will help you.

We want you to understand the basics of emotional intelligence so you can foster this growth in your child from the beginning.

Understand that thoughts come from the mind and feelings come from the thoughts. When a human being gets **scared...** the core belief is that he/she is alone. (Hello, not possible!) When a person feels **happy...** the core belief is that they are connected to their people!

It is imperative that when your child is scared (anything but happy), you say "**scared.**" This will associate the word with the body sensations your child is feeling. Same for **HAPPY!**

To label an emotion is to take a huge amount of power away from it. So, use the words **SCARED** or **HAPPY** often.

Child is **scared**: "**SCARED!** I'm right here."

Child is **happy**: "**HAPPY!** We are together!"

The secret to mental health is the ability to calm yourself. When humans feel **connected**, we can think! Keeping the **connection** real to our children, gives them the foundation to be able to risk relaxing.

**Step one for enjoyment & learning...**

what's more important than that?!



# “OMG! We had a GREAT conversation!”

Why do we say it like that? Because it doesn't happen that often?

**Why?** Because people don't know the rules

**Why?** Because no one taught them

**Why?** Because our parents, grandparents and great grandparents didn't know either

**Why?** Because there was no information about the brain until the decade of the 90's and mental health/illness are still not understood.

So, your generation has to be the one to make this change...

**we are here to help you.**



Since it is apparently so important, let's define what is a conversation.

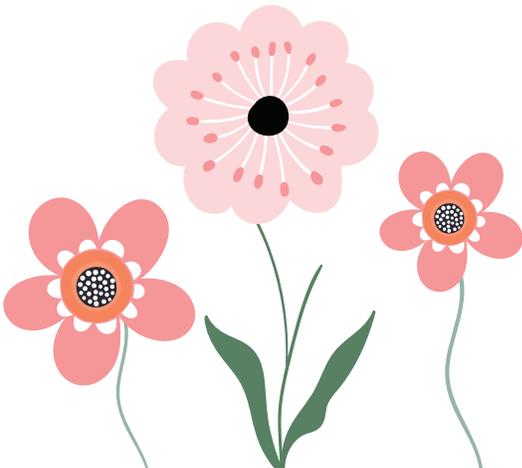
## COMMENT + COMMENT = Conversation

Think of a time when you wanted to join your child in a casual moment (not instructing them, not giving them a choice about something). What would be the first words out of your mouth?

Write them down here please.

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COMMENT + COMMENT = Conversation

QUESTION + ANSWER = Interrogation

On the previous page...did you write a comment or a question?



# Here lies a problem.....

A **QUESTION** in our society requires an answer or you are judged as rude.

A **QUESTION** puts the entire communicative load on the speech/language delayed child.

A **QUESTION** is a sneaky way of testing.

## Here's the solution...

A **COMMENT** in our society is an invitation, so responding is optional.

A **COMMENT** is a way to teach and share information.

A **COMMENT** puts the communicative load on the speaker, who is a competent adult.



# What To Say? Oh Dear, What Should I Say?

First, you must prepare. Which means **you must not talk.**

Instead, **observe** what your child is doing  
and what your child is paying attention to.

Then **mentally** form a comment about what your child  
is doing or paying attention to. The number of words you use  
should be the same number in your child's average sentence length.

**CHECK** to be sure the comment is really a comment and not a sneaky question!  
(No rising intonation! That's a question!)

Now you are prepared! One more step...wait for the right moment  
Then smile & say it slowly. **ONE TIME.**

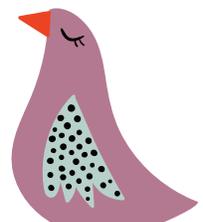
Now your turn is over. It's your child's turn. Count to 6-7-8-9-10 **slowly.**

During this silence, assume your child is processing what you said  
(called **thinking** and preparing to respond back (or not).

**This is where the magic happens!**

**Love this space!**

**Watch your child THINK!**



# “Take Your Time”

Ever had someone say that to you?

The effect is amazing and immediate...and it's called **relaxing**.

To say that or behave in this way is a beautiful nonverbal show of **RESPECT**.

You respect your child's processing rate, eventually your child will also.

Imagine feeling rushed to do what is THE most difficult task in your life.

Imagine feeling rushed and having the person you love most in the world, give you permission to **“take your time.”**

Ever own a computer with a slow processor?

What could you do to speed it up? **NOTHING**.

**THE GOOD NEWS:** Consistently respecting your child's rate of processing will gradually help it speed up. **Gradually.**

That rotating wheel on the computer screen that signals the computer is processing...



# You CAN Do This!

Make it a comment.

About what your child is doing or paying attention to

**RIGHT NOW.**

Say it **sloooooowly** with a smile.



PLEASE  
SPEAK  
SLOWLY

Wait 6 seconds of silence before you speak again.

Watch what happens.

**Simple. Not Easy. Critical.**



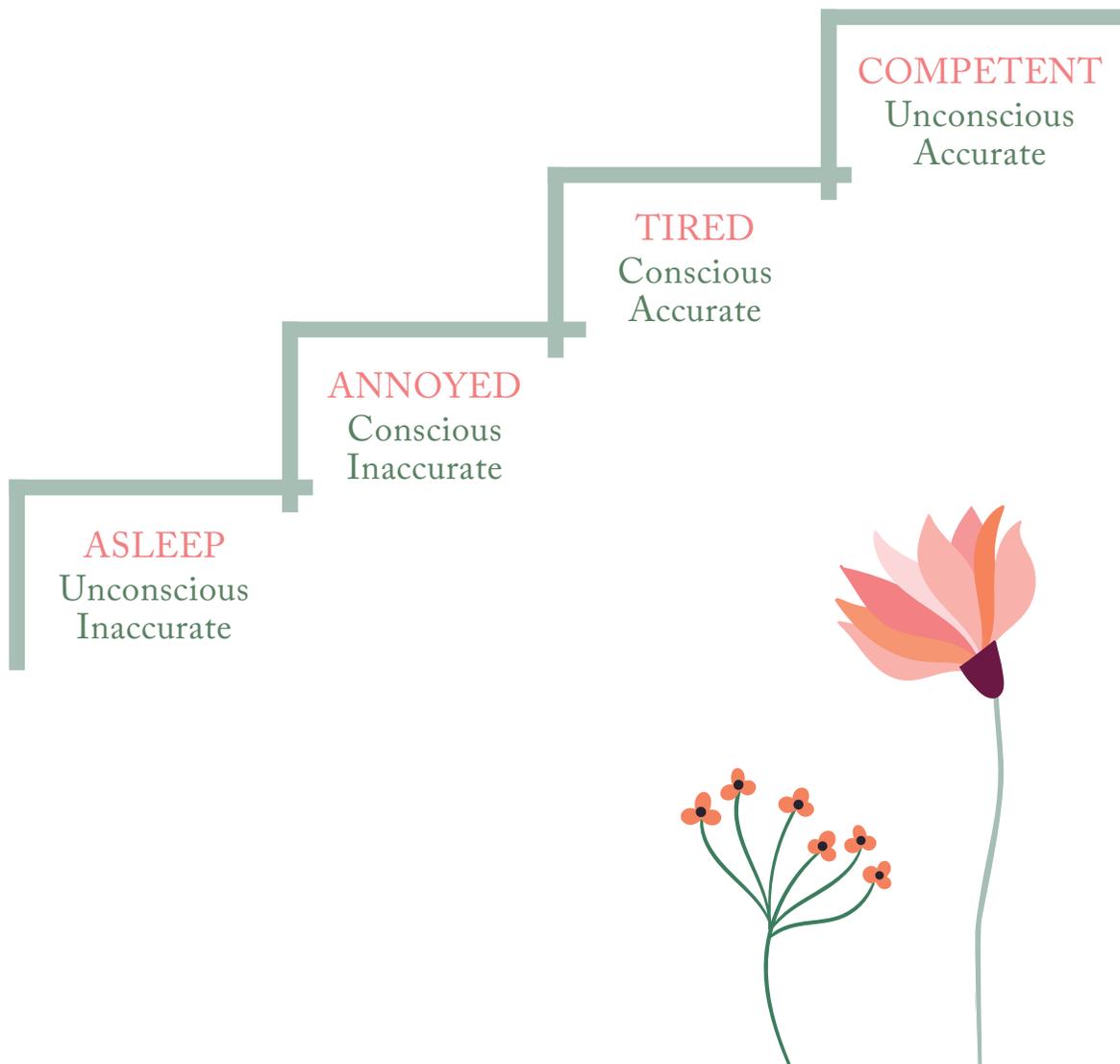
# Question Addiction Is Real!

Give yourself 2 weeks to climb this ladder...

and remind yourself you are preparing your whole family for

**improved conversation...  
communication...connection.**

**WHAT** is more valuable than that?



As **challenging** as this feels,  
consider this... **someone has to hurt.**

1. Either it is you moderately struggling to learn a new way to talk, OR it is your child x1000 trying to learn what doesn't come naturally & everyone has high expectations.
2. Very soon, because you talk less and differently, your child will talk/communicate more.
3. You **BOTH** will be **HAPPIER!**  
**Feeling hopeful yet? You should!**



The *Hopeful* Life 

Just for kicks..... **THINK** of a time in your life  
when **YOU** were **entirely overwhelmed**.

- ♥ Who helped you?
- ♥ How do you feel about that person?
- ♥ You are that person.



# What Topics Will Engage My Child In A Conversation?

## 1. Number one best topic: RIGHT NOW

"Welcome home!"

"I am so happy to see you."

"Wow, it started raining."

"I am ready to have a snack."



## 2. Anything having to do with the *senses* or *movement*, especially if it is EXTREME.

"Smell of dog poop on my shoes makes my stomach hurt."

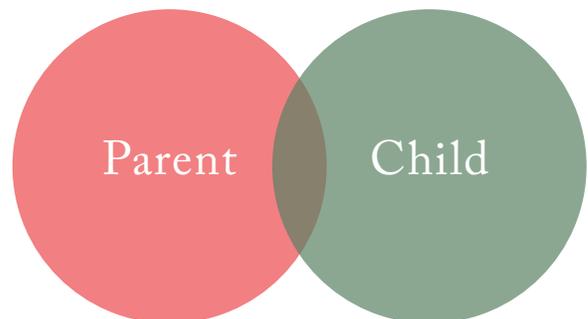
"I cut my finger on paper today."

"Ate the best pizza ever for lunch!"

"I listened to a man singing Christmas carols on the bus."

## 3. Shared interests

If you have none, adopt your child's.



# For Heaven's Sake, BE A PERSON.

"I never really got to know my parents."

"My mom/dad had a slow peaceful death and we finally had a conversation."

"I wish I had asked my parents more about their lives."

"If I struggle like this, I wonder if my parents did. Probably not."

NOOOOOOOOOOOOOOOOOOOOOOOOO.

When you make comments about what is happening right now, you are revealing yourself. Your observations are your perspective. That is you sharing you. That is your child being offered the opportunity to know you as something other than a loving servant.

**REMEMBER:** It's not IF they will remember us, but HOW.

(So, keep it positive or keep it shut! You can quote me on that!)



When conversation breaks down, conflict resolution is needed.

# The Actions Needed for Quickly Resolving Conflict

*A conflict exists between me and another person*

NOT  
COMMUNICATING

OTHER PERSON FEELS ALONE/  
AFRAID, BLAMES ME

EXPRESS CARING  
*"I care."*

STARTING TO  
COMMUNICATE

ACKNOWLEDGE THE  
SITUATION – *"I understand."*

ACKNOWLEDGE OTHERS'  
THOUGHTS  
*"You know this is not fair."*

ACKNOWLEDGE OTHERS'  
EMOTIONS – *"You probably feel angry."*

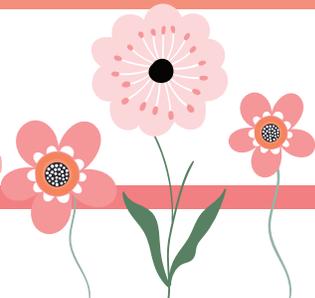
QUIETLY STAY AWHILE



CONNECTED

OFFER HELP (*Maybe now, maybe later,  
maybe not ready*)

ACT



You Know What  LOVE Is!

“LOVE

is what grows between two people...  
when both are willing to be vulnerable.”

-Brene Brown

So, go be **VULNERABLE** with all this and **PRACTICE!!!**



# Now That You Have Completed Your Introductory Training, Let's End With A Laugh!

Mother brings the little boy into the waiting room. He has a **red truck** on his t-shirt. The Speech Therapist comes in and the mommy says, "Tell the nice lady what's on your shirt!!" The little boy thinks to himself, "**if I could do that, I wouldn't be here.**"

Daddy says to his little girl, "Sweetie, what color is this?!!" The little girl squints her eyes and glares at him and slowly says, "**It's blue. It was blue yesterday. It will be blue tomorrow. It's blue.**"

The child is pinned against the wall. His parents have squirt guns. They are shooting him and he is covered in question marks. The parents are thinking, "We just want to talk to him." The boy is thinking, "**if they want to talk, why don't they talk?**"



# Thoughts About Those 3 Scenarios...

When the Speech Therapist came in the waiting room, she squatted down in front of the boy. Looked at his shirt. Looked up at him and slowly said, “Red truck!” She modeled conversation (comment), vocab, and word order (we don’t say “truck red”)...and didn’t set the poor lad up for failure.

Why do we ask children to perform what we know they already know? I think it’s projecting anxiety about having a speech/language impaired child. Maybe we think, “If my child knows the answer, he will feel so proud!” Nope. They are bored and they feel the performance pressure which is fueled by us. Not productive. Ultimately even destructive. Instead, oh yeah, **make a comment about something happening right now!**

If one person wants to talk and the other doesn’t and the latter is fine with listening, then and **talk and wait** and talk and wait. Many duos work better this way, one talks more and the other listens more. The talker ensures pauses so the other can participate if s/he changes his mind.

This will sound sexist... Females are typically better at talking. Many more males in Speech/Language Therapy than females. Consider that when we were evolving women were talking, shopping, talking, caring for children, talking, cooking, talking, cleaning, talking...interrupted only by sleep. Men were hunting. If they had talked, there might not have been anything for dinner. So, ladies, for the precious males, in our lives, be patient. We love them.



# How About A Quick Review?

Come on! Research shows a review soon after new learning will make it stick!!!

*Easy Peasy.* Match left to right.

SPEECH

SENSORY PROCESSING  
DISORDER

LANGUAGE

RECEPTIVE LANGUAGE

EXPRESSIVE LANGUAGE

6 SECONDS

CONVERSATION

INTERROGATION

NORMAL SENSORY PROCESSING

PROCESSING TIME

CALM/ALERT STATE

UNDERSTANDING  
OTHERS TALK

EXPRESSING USING WORDS

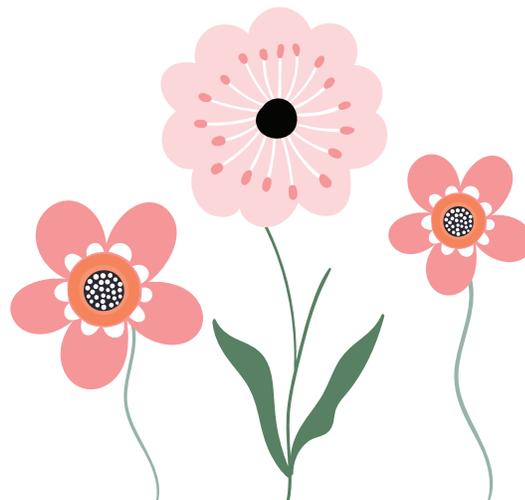
SOUND SYSTEM OF TALKING

COMMENT + COMMENT

QUESTION + ANSWER

VOCABULARY + GRAMMAR

DISTRACTED, HYPER/LETHARGIC





## Parent Coaching Next Steps...

As your child is evaluated and begins his/her specific plan of care, **Parent coaching remains an integral component of his/her therapy.**

### Parent Coaching takes many forms:

- Evaluation and Re-evaluation Reports being emailed directly to parents for review. Parents, please look over reports and ask your Therapist if you have any questions or concerns. It is important that you understand what your child will be working on in session and their goals.
- Parents sitting in on sessions to observe strategies and techniques used by SLP
- Taking an active role in Therapy Sessions (this is especially important in the birth-three population), meaning the SLP can have YOU practice techniques taught to you.
- Homework sheet or brief discussion during the last 5 minutes of session to explain session takeaways and anything that should be worked on at home. These last 5 minutes are extremely valuable and an integral part of your child's therapy!
- Parents sharing specific concerns with Therapists so that specific strategies can be offered.
- SLP sending home periodic educational materials: printed handout, website, target words, or video.
- \* If you have a preference of how you would like your parent-coaching to look, please discuss with your Therapist.

Parent coaching takes place within the child's allotted therapy session. Anytime spent outside of the child's scheduled therapy session will be priced as below:

- One – 10 minute phone call per 6 months - free of charge
- 30 minutes parent-coaching session as needed outside of therapy session – \$75 per 30 minutes



# Evaluation, Assessment And Therapy...Next Steps!

1. Your child's evaluation takes place in two sessions:
  1. Parent phone consult – 20 minutes
  2. Evaluation in our clinic with one of our amazing Speech/Language Pathologists.
2. All sessions begin with hand washing and temperature checks. During COVID, any adults attending the evaluation are required to wear face masks, wash their hands, and take their temperature.
3. Initial Evaluation is limited to an hour and will include: observation, parent interview and standardized testing.
4. After the session, SLP will complete an Evaluation Report and Plan of Care to summarize results and list treatment goals. A copy of the Plan of Care is sent to your child's pediatrician for signature.
5. Within 7-10 business days, an Evaluation Report will be sent to you via email or a printed copy can be provided.
6. Information will be sent to your Pediatrician and then to your Insurance, as needed. Please note, some insurance companies require a prior authorization before we can schedule therapy.
7. All questions regarding insurance can be directed towards Michele Pedretti at [michele@pedspchthpy.com](mailto:michele@pedspchthpy.com) or Lindsay Hughes at [lindsay@pedspchthpy.com](mailto:lindsay@pedspchthpy.com)
8. If recommended, our office will reach out to you to schedule Therapy!

