



a Family Guide to
Special Education Services

LANGUAGE & SPEECH IMPAIRMENT

VOLUME 7



MISSISSIPPI
DEPARTMENT OF
EDUCATION

Family Guides for Special Education Services

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Other MDE Resources

Parent Engagement and Support

📌 mdek12.org/OSE/Information-for-Families

☎ 601.359.3498

General Resources for Parents:

📌 www.mdek12.org/OSE/Information-for-Families/Resources

Procedural Safeguards: Your Family's Special Education Rights

📌 mdek12.org/OSE/Dispute-Resolution

LANGUAGE/SPEECH IMPAIRMENT (LS)

LS Definition

Language or Speech Impairment (LS) means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, that adversely affects a child's educational performance. Speech disorders include impairments in articulation, fluency, and/or voice. Language disorders include developmental or acquired impairments in the ability to receive, send, process, and comprehend concepts or verbal, nonverbal, and graphic symbol systems. A communication disorder may range in severity from mild to profound and may appear in combination with other communication disorders. A communication disorder may be the primary disability or secondary to other disabilities.

The American Speech-language-Hearing Association recognizes four (4) communication disorders described in A-D below:

- A.** An articulation/phonological processing disorder is the atypical production of speech sounds characterized by substitutions, omissions, additions, or distortions that may interfere with intelligibility. Phonological processing includes the rules governing the addition or substitution of a phoneme, including but not limited to:
 1. voicing processes,
 2. deletion processes,
 3. fronting processes,
 4. syllable processes, and
 5. phoneme processes.
- B.** A fluency disorder is an interruption in the flow of speaking characterized by:
 1. atypical rate,
 2. atypical rhythm, and
 3. repetitions in sounds, syllables, words, and phrases
- C.** A voice disorder is characterized by the abnormal production and/or absences of:
 1. vocal quality,
 2. pitch,
 3. loudness,
 4. resonance, and/or
 5. duration, which are inappropriate for an individual's age and/or sex.
- D.** A language disorder is impaired comprehension and/or use of spoken, written, and/or other symbol systems including:
 1. the form of language (phonology, morphology, syntax),
 2. the content of language (semantics), and/or
 3. the function of language in communication (pragmatics).

These characteristics might also be accompanied by excessive tension, struggle behavior, and secondary mannerisms.



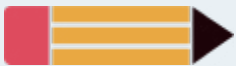
Evaluation Requirements

When the evaluation team is considering eligibility under the IS category, the multidisciplinary team evaluation report and/or eligibility determination report must include:

- A. Results of hearing screening;
- B. Results of an orofacial examination, which is required for suspected articulation disorders, and, if necessary, a statement from a medical specialist noting physical problems which would interfere with speech production;
- C. A physician's statement of release and recommendation(s) for services when a voice evaluation has been conducted;
- D. The number, types, and severity of disruptions, and a description of secondary characteristics in various settings (e.g., reading, monologue, conversation) when a fluency evaluation has been conducted;
- E. Results of a standardized measure(s) of language, when a language evaluation has been conducted;

NOTE: The score(s) must be at least 1.5 standard deviations below the mean of the test in the areas of expressive language and/or receptive language, including morphology, syntax, semantics, and/or pragmatics for an eligibility ruling in language.

- F. When an articulation evaluation has been completed for children ages 30 months and older, evidence that the child's articulation skills are below age-appropriate peers based on normative data, including a measure of stimulability;
- G. Documentation that the child's communication impairment adversely affects educational performance, including the child's ability to communicate in academic, social, and vocational settings; and
- H. Documentation of the child's speech/language skills in conversational speech.



Helpful Vocabulary

Accommodation—Tool that enables a student with a disability to better access the general curriculum. Some accommodations are applicable to instruction only (for example, an assignment that is shortened but still addresses the state standard); others are permitted for both instruction and assessment (for example, change in formatting or timing).

Articulation—The formation of clear and distinct sounds in speech.

Bilabial—Speech sounds formed by the closure or near closure of the lips.

Dysfluency (Stuttering)—Any type of speech that is marked with repetitions, prolongations, and hesitations; an interruption in the flow of speech sounds. Commonly known as stuttering.

Expressive language—Refers to conveying meaning and messages to others using words and gestures.

Free Appropriate Public Education (FAPE)—Foundational requirement of the Individuals with Disabilities education Act of 2004 (IDEA) stipulating that special education and related services must be provided at public expense (that is, without charge to parents), meet state requirements, include an appropriate education that leads to outcomes such as employment or higher education, and conform to the Individualized education Program (IEP) prepared for the student.

Functional behavioral assessment (FBA)—A student behavior assessment used when developing positive behavioral interventions for a child with a disability.

Inclusion—The practice of educating children with disabilities in the general education classroom. Inclusion in special education programs is an important part of the continuum of special education placements required by the Individuals with Disabilities Education Act (IDEA). In an inclusion classroom, a student with disabilities feels included, accepted, and makes friends, and the student’s peers learn to better understand their classmate’s disabilities.

Individuals with Disabilities Act (IDEA)—A law that makes available a free public education to eligible children with disabilities throughout the nation and ensures special education and related services to those children.

Individualized Education Program (IEP)—A document written for a child with a disability that is developed, reviewed, and revised in accordance with state and federal policies.

Intonation—The rise and fall in pitch of the voice in speech.

Language—The system used for sending messages that uses a set way to combine words into sentences.

Language delay—When a child’s ability to understand and use language develops more slowly than her or his peers due to a number of factors (e.g., hearing, speech, cognitive impairments, psychosocial issues, etc.).

Modification—Adjustment to an assignment, test, or activity in a way that significantly simplifies or lowers the standard or alters the original measurement. Modifications change what a student is taught or expected to learn, and most are applicable to students with significant cognitive disabilities.

Phoneme—The smallest unit of sound in a word that makes a difference in its pronunciation, as well as its meaning, from another word.

Prosody—The rhythm, stress, and intonation of speech.

Receptive language—The ability to understand words and language communicated by another person.

Related services—Additional support services that a child with disabilities requires, such as transportation, occupational, physical, speech pathology services, interpreters, medical services, etc.

Significant cognitive disability (SCD)—In order for a student to be classified as having a significant cognitive disability, all of the following criteria must be true:

1. The student demonstrates significant cognitive deficits and poor adaptive skill levels (as determined by that student’s comprehensive evaluation) that prevent participation in the standard academic curriculum or achievement of the academic content standards, even with accommodations and modifications.
2. The student requires extensive direct instruction in both academic and functional skills in multiple settings to accomplish the application and transfer of those skills.
3. The student’s inability to complete the standard academic curriculum is neither the result of excessive or extended absences nor is primarily the result of visual, auditory, or physical disabilities, emotional behavioral disabilities, specific learning disabilities, or social, cultural, or economic differences.

Specially designed instruction (SDI)—universally required component that defines special education and stipulates that students with disabilities receive instruction that includes changes in content, methodology, and/or delivery. It is not dependent on setting and is a primary responsibility of special education professionals.

Speech impairment—Affects the ability to form speech sounds needed to communicate (e.g., problems articulating or making sounds, problems with fluency or difficulty making words or sentences flow smoothly such as stuttering, other problems such as adding extra sounds and words, elongating words, distorting sounds when talking, visible frustration when trying to communicate, taking frequent pauses when trying to communicate, etc.)

Speech-language pathologist (SLP)—A speech-language pathologist works to prevent, assess, diagnose, and treat speech, language, social communication, cognitive communication, and swallowing disorders in children and adults.

Syntax—The arrangement of words and phrases to create well-informed sentences in a language.



Ways to Help at Home

Helping Your Child Learn to Understand and Use Words

Adapted from the American Speech-language-Hearing Association-

asha.org/public/speech/development/Activities-to-encourage-Speech-and-language-Development

There are many ways you can help your child learn to understand and use words.

- 1 Pay attention when your child talks to you.
- 2 Get your child's attention before you talk.
- 3 Praise your child when she or he tells you something. Show that you understand your child's words.
- 4 Pause after speaking to give your child an opportunity to respond.
- 5 Keep helping your child learn new words. Say a new word and tell your child what it means or use it in a way that helps her or him understand. For example, you can say the word vehicle instead of car. You can say, "I think I will drive the vehicle to the store. I am too tired to walk."
- 6 Talk about where things are, using words like first, middle, and last or right and left.
- 7 Talk about opposites like up and down or on and off.
- 8 Have your child guess what you describe. Say, "We use it to sweep the floor," and have her or him find the broom. Say, "It is cold, sweet, and good for dessert. I like strawberry," so she or he can guess ice cream.
- 9 Work on groups of items or categories. Find the item that does not belong in a group. For example, "A shoe does not go with an apple and an orange because you can't eat it. It is not round. It is not a fruit."
- 10 Help your child follow two- and three-step directions. For example, "Go to your room and bring me your book."
- 11 Ask your child to give directions. Follow his or her directions as she or he tells you how to build a tower of blocks.
- 12 Play games with your child such as house. Let her or him be the parent, and you pretend to be the child. Talk about the different rooms and furniture in the house.
- 13 Watch movies together on TV or a tablet. Talk about what your child is watching. Have her or him guess what might happen next. Talk about the characters. Are they happy or sad?
- 14 Use everyday tasks to learn language. For example, talk about the foods on a menu and their color, texture, and taste. Talk about where to put things. Ask your child to put the napkin on the table, in her or his lap, or under the spoon. Talk about who the napkin belongs to. Say, "It is my napkin." "It is daddy's." "It is Tamara's."
- 15 Go grocery shopping together. Talk about what you will buy, how many things you need, and what you will make. Talk about sizes, shapes, and weight.



Activities at Home

Adapted from Reid Health—

reidhealth.org/blog/speech-therapy-tips-for-parents-to-use-at-home

The activities you do at home and the positive reinforcement you provide can help your child make huge strides toward speaking clearly, an important skill she or he will need to succeed in the future.



- 1 Practice. If your child has trouble saying a certain sound for example—encourage her or him to make that sound by itself. Once that comes more easily, you can incorporate it into syllables like fi-fi-fi or fa-fa-fa before moving onto actual words that use it. Repetition is your friend!
- 2 Focus on what the child can do instead of overemphasizing what she or he can't do. While it's important to pay attention to improvements in speech, remember to praise other small victories like picking up toys and being polite.
- 3 Keep background noise and distractions to a minimum during learning sessions and at other times, too. Studies show that too much TV can delay language development because parents tend not to talk as much to their children as they otherwise would. Children learn to speak best when they are spoken to.
- 4 Listen! Ask questions and be attentive and patient with the replies. Interrupting and expecting your child to just spit it out will create anxiety which can make the problem worse. Let your child work it out without pressure. On the other hand, don't be too focused or the child may become uncomfortable. Try to keep the conversation natural and don't add pressure by demanding perfection.
- 5 Use straws. Drinking liquids through straws or blowing air out of them will help your child develop the muscular strength in the mouth important for clear speech. Make it into a game: get a ping-pong ball and see if your child can blow it through a goal you set up or keep the ball at the end of the straw by sucking up air through it.
- 6 Read. Reading a favorite book to your child and then having her or him read it back to you can provide excellent reinforcement. Even if your child is too young to be able to read words, having her or him explain what she or he sees in the book and remembering the context from hearing it can strengthen speech and confidence.



Tips for Helping Your Child with Articulation Skills

Adapted from Speech and occupational Therapy of North Texas—
speechandot.com/how-to-help-child-with-speech-articulation-problems

Although speech therapy is a vital element in correcting articulation problems, here are some ways to help your child with articulation skills within multiple environments outside of therapy.

- **Practice revision daily.** Revision is a technique in which you repeat what your child has just said, but with the correct pronunciation. It is also helpful to give the previous incorrect word sound extra emphasis. You can practice revision in almost any setting.
- **Avoid imitating your child's errors.** Instead of imitating the ways your child pronounces or leaves out sounds, model correct speech. Sometimes, the ways your child pronounces words can be extremely cute but try not to reinforce incorrect articulation by laughing at or repeating them.
- **Read, read, read to your child.** There can never be enough said about the vital role reading to your child plays in their development, including their speech. Listening to you read allows your child to occupy her or his mind with a story while you model correct articulation, making for a speech lesson in disguise.
- **Incorporate modeling into play.** Like reading to your child, modeling correct speech when playing with your child is a way to sneak in a speech lesson. Whether you're playing a board game or taking a nature walk, leisure time with your child provides entertainment, thus subconscious learning.
- **Narrate daily routines.** As you and your child go about your daily routines—such as getting ready for daycare or school, picking up toys, and mealtimes—narrate the things you both are doing. This allows for a larger variety of words to practice in different settings.
- **Practice successful words.** Although modeling correct pronunciation of words your child is having trouble with is essential, it is also important to practice words your child has corrected successfully. This not only helps your child solidify her or his corrections, it also reinforces a sense of accomplishment for a job well done.

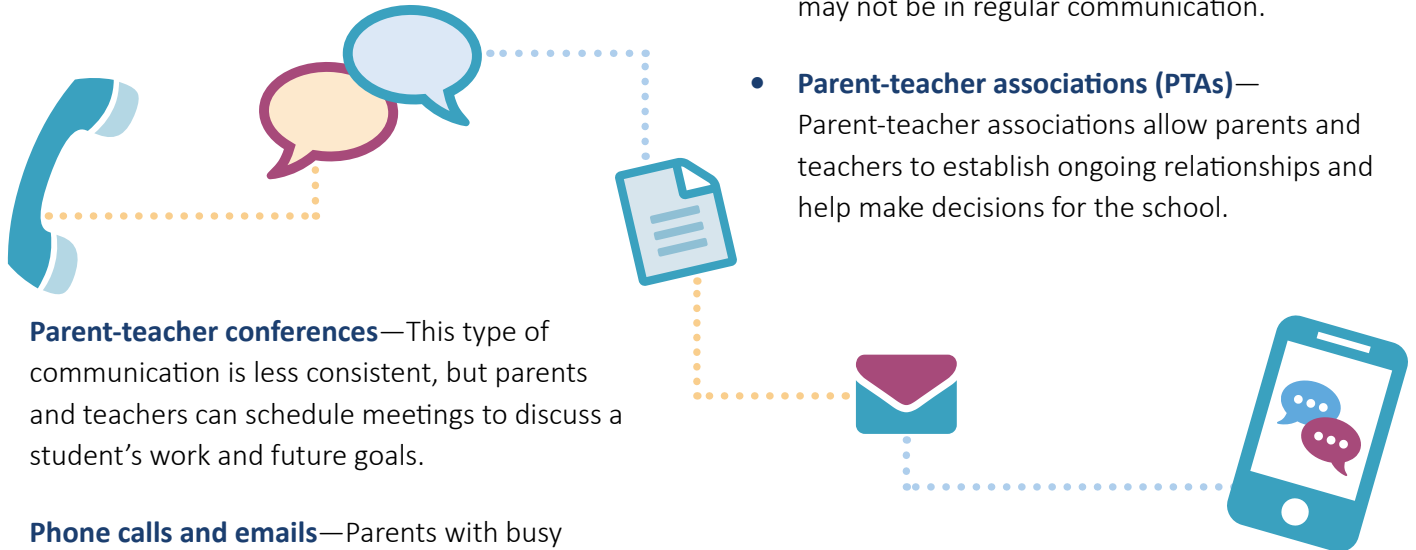


Successful Parent-Teacher Communication

Adapted from American University "Parent-teacher communication: strategies for effective parent inclusion & engagement"—soeonline.american.edu/blog/parent-teacher-communication

Communication is key to a successful inclusion classroom. Parents, general education teachers, and special educators can try the following tactics for successful parent-teacher communication:

- Regular in-person communication**—This type of communication works great for parents who typically drop off and pick up their children from school.
- Open houses**—Most schools host annual open houses where parents can visit their children’s classrooms. This allows teachers to meet parents for the first time or meet a second parent who may not be in regular communication.
- Parent-teacher associations (PTAs)**—Parent-teacher associations allow parents and teachers to establish ongoing relationships and help make decisions for the school.
- Parent-teacher conferences**—This type of communication is less consistent, but parents and teachers can schedule meetings to discuss a student’s work and future goals.
- Phone calls and emails**—Parents with busy work or personal schedules may not have the opportunity to go to the school or schedule conferences. These parents may be easier to reach via phone or email. Phone calls and emails can also be used by teachers to regularly communicate with parents between conferences.
- Text messages**—Some teachers use mass text messages or special messaging apps to communicate with parents. Several text services, such as Remind, cater specifically to teachers.
- Homework handouts and newsletters**—Teachers can create handouts containing information about homework and other tasks for students to take home. Teachers can also write weekly or monthly newsletters to update parents on what is going on in the classroom and how they can participate.
- Class websites**—Teachers can create classroom websites to post announcements, homework, and reminders to help ensure they don’t get lost in communication between the classroom and home. Similar methods of communication include social media sites or learning management platforms such as ClassDojo.





Resources

- Center for Parent Information & Resources (CPIR) Speech and Language Impairments**—Provides information about the characteristics of Speech language Impairments; causes; information on contacts for assessment and support; tips for teachers and parents; and a list of related resources, articles, and organizations to contact.
 ↗ parentcenterhub.org/speechlanguage
- Child Apraxia of Speech Association of North America (CAANA)**—Supports parents and professionals in understanding and raising awareness for childhood apraxia of speech (CAS).
 ↗ apraxia-kids.org/new-to-apraxia
- The Mississippi Department of Education (MDE) Office of Special Education**—A service-oriented office that seeks to improve the education experience for children with disabilities.
 ↗ mdek12.org/OSE
- National Institute on Deafness and Other Communication Disorders (NIDCD)**—A division of the National Institutes of Health, NIDCD conducts and supports research on hearing, balance, taste, smell, voice, speech, and language. This site offers information about evidence-based treatments for diseases and disorders relating to speech and language impairments, including voice-, speech-, and language-related health information.
 ↗ nidcd.nih.gov/health/voice-speech-and-language
 ☎ 800.241.1044
- T.K. Martin Center for Technology and Disability at Mississippi State University**—A center specializing in the evaluation of persons with communication disorders to determine the appropriateness for augmentative and alternative communication technologies. Services may result in the recommendation and set up of the necessary equipment and the setup of the communication system once it is purchased by the client, insurance, or referral source.
 ↗ tkmartin.msstate.edu/services/assistive-technologyservices/augmentative-alternative-communication
 ☎ 662.325.1028
- U.S. Department of Education**—Their mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.
 ↗ ed.gov
- U.S. Department of Education-Office of Special Education and Rehabilitative Services**—The mission of the Office of Special Education Programs is to lead the nation's efforts to improve outcomes for children with disabilities, birth through 21, and their families, ensuring access to fair, equitable, and high-quality education and services.
 ↗ ed.gov/about/offices/list/osers

MDE-Specific Resources Include:

Parent Engagement and Support

↗ mdek12.org/OSE/Information-for-Families

☎ 601.359.3498

General Resources for Parents:

↗ www.mdek12.org/OSE/Information-for-Families/Resources

Procedural Safeguards: Your Family's Special Education Rights

↗ mdek12.org/OSE/Dispute-Resolution

Acknowledgments

