

TREATMENT AMOUNT AND INTENSITY IN CHILDHOOD APRAXIA OF SPEECH (CAS)

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Abstract

Children with childhood apraxia of speech (CAS) often show little or slow progress in standard therapy (ASHA, 2007; Campbell, 1999), which has led to recommendations for intensive intervention to optimize outcomes (ASHA, 2007). This study examined amount and distribution of practice in integral stimulation-based treatment for six children with CAS using an alternating treatments single-case experimental design with two 4-week phases separated by a 2-week maintenance phase. Comparison of sets containing 5 versus 10 items after phase 1 addressed practice amount. Comparison of sets containing 10 items practiced over four versus eight weeks addressed practice distribution. Maintenance was assessed eight weeks after the final treatment session. Perceptual accuracy of probe items judged by blinded raters served as the outcome measure; standardized effect sizes and absolute percent change were calculated to quantify and compare changes in each condition. Across children, larger gains were observed with high practice amount compared to low or no practice, and with massed practice compared to distributed or no practice. One older child showed the reverse (advantage for distributed practice over massed practice). Discussion will focus on implications for how to optimize treatment for children with CAS. *[Supported by a grant from CASANA]*