

Commentary on Student 3's Approach to Clinical Case #2

*Student requested name be removed

Recommended treatment for Child 2 based on developmental norms for process suppression and sound acquisition as well as global collapse of numerous targets to an [h] substitution. This is the appropriate recommendation and a partly accurate justification; however, certain aspects of the justification are inaccurate. In particular, velar fronting is early suppressed whereas palatal fronting is late suppressed. This child has difficulty with palatal fronting so fronting is not a justification for treatment because this child's fronting is age appropriate. Additional information could be provided to justify treatment including the percentile score on the GFTA, number of least knowledge sounds, and complexity of the sound system. In addition, the student indicated that language was age-appropriate when in fact expressive language warrants further investigation. Expressive vocabulary appears to be age-appropriate but expressive morphosyntax and discourse warrant further evaluation given the child's low score on the TELD. **Needs improvement.**

Recommended a metaphon approach pairing the target with the substitute. There is no justification provided for this approach. The treatment approach may be justified but the rationale should be stated. Also, Gierut demonstrated that pairing the target with the substitute was not the most efficacious form of minimal pair treatment. **More information needed.**

Sounds selected for treatment were /f v/, /s z/, /θ/. The rationale for choosing so many related targets is unclear. It was indicated that these would be treated in succession and again it is unclear why you would select treatment targets for a second and third round of treatment so far in advance, given that the first round of treatment could promote global change in the child's sound system so that treatment on these selected targets would not be warranted. Keep in mind that treatment of one error can lead to global system wide change if you select the "correct" error based on the available clinical research (see the key for examples of other ways to target broad system-wide change). Rationale for /f v/ appears to be that the child has a consistent substitute, has more knowledge reducing time in treatment, and /v/ is late acquired. Additional justification that was not provided is that /f v/ are marked which should lead to greater change and that targeting /f/ focuses on the prominent error pattern of [h] substitution. Evidence challenging this choice is that /f v/ are stimulable and likely to improve without treatment and that treatment of least knowledge sounds leads to more global change. In the short run, treatment of more/most knowledge sounds may reduce time in that particular treatment program, but if broad changes are not made, then treatment will have to continue which will increase the time in treatment. I am not convinced that this is really the best sound selection for this child. **Adequate but could be improved.**

High frequency real words or nonsense words will be used in treatment. High frequency words were justified based on findings from Morrisette and Gierut. Nonsense words would be justified if real word minimal pairs could not be found. Examples of treatment stimuli were not provided and this was requested in the instructions. **More information needed.**

Overall, your diagnosis was correct but not correctly justified and a wider range of factors could have been appealed to as justification for this diagnosis. In addition, the diagnosis of age-appropriate language is questionable based on the evidence. Certain aspects of your treatment program were not well justified and some details were omitted (e.g., sample treatment words). Generally, the treatment program was unclear and it leads to the impression that you were not sure what to do because you were not confident in your decisions. Perhaps you are trying to get rid of old ideas about phonological treatment to embrace the new ideas we covered in class and now you are confused about what to do?

Grade: B