May is Better Speech and Hearing Month

“Avoid basing decisions on untested but strongly held beliefs, what you have done in the past, or uncritical ‘benchmarking’ of what [others] do.”
Jeffrey Pfeffer, evidence-basedmanagement.com (accessed April 7, 2015)

Need to Know:

This review of 131 studies found that children with SLI performed an average of 10 standard score points below children without language impairments on measures of nonverbal intelligence. These findings provide further evidence against the use of cognitive referencing when determining eligibility for special services.

Test Your Knowledge:

1) True or False: Recent research provides empirical evidence for the use of revised cutoff scores that achieve reasonable diagnostic accuracy with children who are bilingual.

2) Recent research supports the need to assess which three areas of linguistic awareness with young learners who struggle with literacy:
   a) Phonological, orthographic, and morphological
   b) Phonological, syntactic, and pragmatic
   c) Orthographic, morphological, and semantic
   d) Syntactic, phonological, and pragmatic

3) Which of the following treatment approaches for Childhood Apraxia of Speech have been found to have sufficient preliminary evidence to warrant clinical use?
   a) Integral Simulation/Dynamic Temporal and Tactile Cueing
   b) Rapid Syllable Transition Treatment
   c) Integrated Phonological Awareness
   d) B & C only
   e) A, B, & C

Practically Speaking:
This article summarizes empirical evidence to support the clinical diagnosis of Childhood Apraxia of Speech (CAS). After completing a 50 word sample of polysyllabic words and an oral motor assessment that included diadochokinesis, four measures successfully identified CAS in verbal children between the ages of 4 and 12 years. Specifically, diagnosis using the combination of percentage of phonemes correct in polysyllabic words, articulatory accuracy during diadochokinesis, as well as syllable segmentation and lexical stress matching, achieved 91% diagnostic accuracy as compared to expert diagnosis. These findings provide empirical evidence to support practitioners’ use of function-based diagnostic procedures that are developmentally appropriate for students in school settings.

**Working With Data:**

Results from this study provide scientific evidence to support the use of data from dynamic assessment sessions to help determine whether bilingual children had language impairment. High levels of diagnostic accuracy (80 to 97%) were found for examiner ratings of modifiability, story scores, and ungrammaticality obtained through dynamic assessment of narrative language abilities. This article is a “must read” for practitioners who grapple with differential diagnosis of language difficulty, language difference, and language disorder.

**More to Explore:**
The Center for the Improvement of Early Reading Achievement (CIERA) at the University of Michigan School of Education offers a draft version of 10 research-based principles for improving reading comprehension. This brief summary includes citations for each principle. Paste this link: [http://www.ciera.org/library/instresrc/comprinciples/index.html](http://www.ciera.org/library/instresrc/comprinciples/index.html)

CIERA also distributes several reports that address best practices in literacy development regarding various interventions, assessment, and linguistic diversity. Cut and paste this link: [http://www.ciera.org/library/reports/inquiry-3/index.html](http://www.ciera.org/library/reports/inquiry-3/index.html)

**Answers for Test Your Knowledge:**
Full references and additional information about these questions can be found in the Fall 2014 issue of *Talking EBP*, available at [http://www.doe.virginia.gov/special_ed/disabilities/speech_language_impairment/talking_ebp/v5n1_2015_spring.pdf](http://www.doe.virginia.gov/special_ed/disabilities/speech_language_impairment/talking_ebp/v5n1_2015_spring.pdf) or [http://curry.virginia.edu/TalkingEBP](http://curry.virginia.edu/TalkingEBP)

1) True
2) A
3) E

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