Understanding Childhood Apraxia

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*Childhood Apraxia of Speech* (CAS) is a very specific motor speech disorder. Children with this diagnosis have difficulty planning and consistently producing sequences of speech movements using their tongue, lips, jaw, and palate. These difficulties limit a listener’s understanding of the child’s speech and prevent the child from producing intelligible speech. A child with a diagnosis of childhood apraxia of speech specifically experiences problems in programming and planning his/her speech movements.

When we try to communicate, an idea forms in our brain as to what we want to say. Our brain thinks of words for our messages and puts them in the correct order using correct grammar. This information then translates into a series of highly coordinated movements of the *articulators*—the lips, jaw, tongue, and soft palate. The brain tells the muscles that control the articulators the exact order and timing of the movements to produce intelligible speech. Children with apraxia of speech may not be able to accurately and consistently produce speech motor plans. This may be due to neurological impairments or developmental disabilities.

When a child receives a diagnosis of CAS, he/she needs to begin *speech therapy* immediately. Therapy will vary with each child according to the severity of the diagnosis. Experienced SLPs use many different therapy methods since there is not a “one-size-fits-all” program for apraxia. Children with apraxia need frequent one-on-one therapy and lots of repetitive practice with sounds, sequences, and movement patterns in order to incorporate them into their speech and make them automatic. Practicing at home is important to any speech and language program.
Many therapists recommend the use of sign language, picture communication systems, and other augmentative or alternative communications. This combination of therapies (sign and vocal word attempt) enhances the chance that the listener will be able to understand the speaker.

Very young children realize their speech difficulties. Any successful communication experiences will encourage them to work harder. For some children, *visual cues* (e.g., pointing to lips for “b” sound) aid in learning to use their articulators to produce a desired word. When the word and sign are consistent, children begin to associate the visual image of the sign with the placement of the articulators.

If you notice speech delays/difficulties with your child’s production or problems with his/her communication skills, please contact your physician or consult a speech-language pathologist in your area.

Resources
Here are some Super Duper® products that may help in understanding the complexities of Childhood Apraxia. Visit www.superduperinc.com or call 1-800-277-8737. Click the links below to see the product and description.

**Say and Do® Sound Production—Flip Book and Activities for Apraxia and More!**
Ask item #BK-317  www.superduperinc.com/B_Pages/bk_317.htm

**Word FLIPS™**
Ask item #BK-318  www.superduperinc.com/B_Pages/bk_318.htm

**Speech Steps™—Reproducible Drills for Artic and Language**
Ask for item #BK-303  www.superduperinc.com/B_Pages/bk303.htm

**Webber Big Apraxia - Webber BIG Apraxia Photo Cards**
Ask for item #PRAX-450  www.superduperinc.com/prax450.htm

**Mini Apraxia- Webber MINI Apraxia Photo Cards**
Ask for item # PRAXM-560  www.superduperinc.com/praxm560.htm