

Barrow Cleft and Craniofacial Center

Parent Education: Early Speech and Language Development and Recommendations for Children with Cleft Palate

1. What can parents do to help speech development before palate repair?

- a. Continue to treat, play, talk and interact with your child just as you would if she/he didn't have a cleft palate
- b. Family will hear the following sounds: 'm', 'n', 'w', 'y' (as in yellow) and sometimes 'h'. You should also hear many vowel sounds like: 'ah', 'oh', 'ay'. The sounds 'ee' and 'oo', can be more difficult for children with clefts, but you may hear some children produce them easily.
- c. Words to model prior to cleft palate repair (and continue to address after repair) include:

M, N: Mom, me, mine, my, more, moo, no, Nana, now, in, on, none

W: whoa, wow, whee, want, water, one, win

Y: yay, yeah, yum, yummy

H: who, how, hey, hi, he, hello, home, him

- d. Other suggestions to increase early language skill development:
 - i. Label items at the store, at home and in books, while reading with your child as often as you can.
 - ii. Hold items by mouth and verbally model the word before giving item to patient (i.e. hold apple by mouth and say "apple" then give child the apple). Encourage any sound made by your child.
 - iii. Begin to model and implement "baby signs" such as: all done, car, eat, drink, please, ball, shoes, etc.
 - iv. Talk while doing things and going places. When taking a walk in the stroller, for example, point to familiar objects (e.g., cars, trees, and birds) and say their names. "I see a dog. The dog says 'woof.' This is a big dog. This dog is brown."
 - v. Use simple but grammatical speech that is easy for your child to imitate.

2. How does speech change after palate repair?

- a. Parents will hear fewer 'm' and 'n' sounds because child will increase productions of 'b', 'p', 'd', 't', and possibly 'k', 'g'. Ideally you will hear these sounds and not sounds that are made in the throat.
- b. Sounds produced in the throat are one type of compensatory speech errors learned due to lack of palate closure (oral pressure). Our goal is to reduce development of these errors.
- c. An example of a throat sound is the "uh" in the word "uh-oh". Although this word may sound clear when your child says it, it is more helpful to say 'wow', 'oh no' or other sounds produced in the mouth using the lips or tongue – to avoid developing throat sounds. The "uh" sound may become overused for all stop (pressure sounds) - like 'b', 'p', 'd', 'k', 'g' and make it difficult to understand your child's speech.

3. How can parents help stimulate sound development?

- a. Early developing sounds include 'b, p, t, d, y, w, m, n, h.' Often 'm, b, p' are good starting sounds since they are easy for your child to see you produce with lips closed.

Barrow Cleft and Craniofacial Center

- b. If you continue to hear an 'm' sound when you child makes a 'p' or 'b' sound, or an 'n' sound when you child says a 't' or 'd' sound, you can plug the nose to demonstrate the sound. This does not change how the palate works, but it allows your child to have the feeling of saying a sound not coming out of the nose. You can also show you child to keep lips closed when making these sounds to help make them in the mouth (and not the throat).
- c. You can introduce sounds during daily activities: Make bath time "sound playtime" as well. You are eye-level with your child. Play with Peter Tugboat, who says "p-p-p-p." Let your child feel the air of sounds as you make them. Blow bubbles and make the sound "b-b-b-b." Or sound walk around your house or in the child's room. Introduce him/her to Timmy Clock, who says "t-t-t-t." Listen to the clock as it ticks.
- d. Words that may be helpful to model at this time include:

B: bye, bee, boy, ball, baby, bubble, beep, boo
P: Papa, pop, pie, puppy, up, hop, happy
T: two, tie, tea, top, it, hot, hat
D: do, did, (all) done, Dad, Daddy, hide, had, head

4. What should family be listening for in child's speech?

- a. Resonance describes how sound comes through the mouth and the nose for all speech sounds with voicing.
 - i. All sounds in English and Spanish are produced through the mouth (oral resonance) except n, m, ng (English) ñ (Spanish). These are the only sounds that should be made through the nose as nasals.
 - ii. When the palate cannot separate the nose from the mouth, oral sounds (all sounds except n, m,) have too much nasal resonance or nasality and this is considered hypernasality.
- b. Nasal emission is excessive airflow through the nose for a sound produced without voicing (like, p, t, f, s, sh, ch). This can often occur when hypernasality is also present.

References and Suggested Resources:

- a. American Speech-Language Hearing Association information page: <http://www.asha.org/public/speech/disorders/CleftLip/>
- b. Cleft Palate Foundation educational booklets and fact sheets: <http://www.cleftline.org/parents-individuals/publications/>
- c. Hardin-Jones, Chapman & Scherer (2015). Children with Cleft Lip and Palate. Bethesda, MD: Woodbine House. Paperback: http://woodbinehouse.com/contents.asp?product_id=978-1-60613-210-4
- d. or ebook: <https://store.kobobooks.com/en-us/ebook/children-with-cleft-lip-and-palate>
- e. Sulprizio, S. (2010). The Source for Cleft Palate and Craniofacial Speech Disorders. Austin, TX: PRO-ED.

Clinician Information:

Jessica Williams, MS, CCC-SLP
 Speech Language Pathologist
Jessica.Williams4@dignityhealth.org
 602-406-8514

Kelly Nett Cordero, PhD, CCC-SLP
 Bilingual Speech Language Pathologist
Kelly.Cordero@dignityhealth.org
 602-406-5734

Contributors:

Barrow Cleft and Craniofacial Center

Kelly Nett Cordero, PhD, CCC-SLP

Michelle Seim, MA, CCC-SLP

Megan Voss, MA, CCC-SLP