

SCHOOL-BASED PROFESSIONALS

Children with childhood apraxia of speech (CAS) who demonstrate academic concerns should be referred for further evaluation and help as early as possible. While children with CAS share common features of other speech disorders, they display unique and individualized learning needs.

APRAXIA AT A GLANCE...

- Childhood apraxia of speech (CAS) is a rare neurological speech disorder that varies from mild to severe and places the child at risk for other language, learning, and social difficulties.
- CAS makes it difficult or sometimes impossible for children to produce sounds, and to sequence the sounds into syllables or words which makes it difficult to understand their speech.
- Children with apraxia of speech typically understand language better than they can express it.
- Children with CAS require intensive speech therapy to improve their communication skills.
- Children with CAS will:
 - be inconsistent in their errors and can lose a word they previously could say.
 - have difficulty moving between sounds, syllables, and words.
 - have errors on the stress of words.

Teachers should look out for other language or learning disabilities that frequently co-occur with CAS.

- Fine and gross motor control difficulties
- Auditory Processing Disorder
- Word finding struggles
- Dyslexia/Reading and spelling disorders
- Dysgraphia
- Attention deficit disorders
- Sensory Processing Disorders

Some children have few of these other concerns, some have more so.

Classroom Impact

Your students with apraxia of speech may have difficulty...

- Speaking on demand.
- Being understood by peers and adults in the classroom.
- Participating in classroom discussion or giving presentations.
- Demonstrating what they are learning via assessments that require a verbal response.
- Gaining attention in the classroom.
- Explaining personal needs or defending oneself from bullying.
- Using appropriate language structures such as plurals, pronouns, verb forms, word endings, etc.
- Learning literacy related skills because they often depend on intact speech processing systems.

HOW TO HELP IN THE CLASSROOM



- Consult with the parents or caregivers and the child's speech language pathologist to find out strategies that motivate and engage the child to take communication risks, what adaptations might be needed, as well as approaches that do not work for the individual student.
- Response accommodations may be necessary, especially in cases of oral presentations or assessments that require oral responses. Provide alternatives to speech, if necessary, so that the student can successfully complete assignments, tests, and activities.
- Learn about and encourage the assistive technology or augmentative communication strategies the student may be using. This includes:
 - sign language
 - picture communication
 - high-tech communication devices
 - tablets/apps
- Ask the student to repeat their statement or question, when appropriate. Let the student know what they have to say is important to you, but do not put them "on the spot."
- Summarize the student's message, as doing so can help the student know that you understood them.
- Increase wait time and allow the student time to think about what they want to say and how they will say it. Do not interrupt the child or hurry them along.
- Modify sharing time so that the student can share in a smaller group of friends.
- Create signals the student can use in order to meet basic needs, if needed, such as expressing frustration, leaving the classroom to use the restroom, needing to go see the nurse, etc.
- Help build connections between the student and their peers so that they are included in games or play.
- Educate other students in the classroom about speech disorders and apraxia of speech, when appropriate. Let other students know how they can help or be a good friend.
- Help the child learn to advocate for themselves.
- Consider ways that the child can shine in the classroom and demonstrate their special talents or abilities to peers. Help the student assume leadership roles whenever possible.
- Encourage and praise the child for their effort and resilience, if not for speech accuracy.
 - "I like when you try to use your voice to tell me."
 - "You try so hard and I am so proud of you!"
 - "It is so wonderful to hear you speak up for yourself!"

Because of their communication barrier, children with childhood apraxia of speech are at high risk of becoming passive observers and classroom bystanders. Effective and compassionate educators can help these students become involved, active, and enthused learners instead!