NSW Speech Pathology
Evidence Based Practice Interest Group

Critically Appraised Paper (CAP)

CLINICAL BOTTOM LINE: Phonological awareness therapy for children who have an isolated phonological disorder and who have relatively good metaphonological skills prior to intervention may be successful in improving speech output.

Clinical Question [patient/problem, intervention, (comparison), outcome]:
In a child with phonological impairment of unknown origin, is a Metaphon approach effective in improving speech accuracy (e.g., as measured by PCC, error analysis, or consonant probe) over time?

Search Terms:

Search Systems:

Citation: Adams, C., Nightingale, C., Hesketh, A. & Hall, R. (2000). Targeting metaphonologicial ability in intervention for children with developmental phonological disorders. *Child Language and Teaching Therapy, 6*(3), 285-299. doi: 10.1177/026565900001600304

Design: Pre-test baseline assessment of speech and metaphonological skills.

Participants: 31 children with isolated phonological output problems aged between 3;6 and 5;0. Standard score on Edinburgh Articulation Test (EAT) below 85. Nil known language or hearing difficulties.

Experimental Group:
Pre-test data prior to intervention were taken. 10 sessions of metaphonological based therapy over a period of 10 weeks. In the first 4 weeks, intervention covered general phonemic awareness tasks, 5-8 weeks on therapy target sounds, and in the last two weeks minimal pair games were incorporated. All children were reassessed following the 10 week block.

Control Group: 34 children who had no speech and language problems were assessed on on the same assessments as the experimental group. Nil intervention. Assessment 1 and assessment 2 were 10 weeks apart.

Results: Metaphonological abilities improved significantly as a result of therapy when compared with control subjects. Children who received therapy improved significantly more than controls on rhyme matching and blending phonemes. Children with good metaphonological ability prior to intervention made significant improvements in speech output compared to controls. No such improvement was made for children with poor metaphonlogical abilities prior to therapy

Comments on Design: Little known about what processes were targeted

Level of Evidence (NH&MRC): III

Appraised By: Members of the EBP paediatric speech group
Clinical Group: Paediatric Speech Group

Date: July, 2004

Form based on Worrall & Bennett, Evidence based Practice: Barriers & Facilitators for Speech-Language Pathologists, *Journal of Medical Speech-Language Pathology* 2:9, xi – xvi