A comparison of therapy approaches: multiple oppositions and maximal oppositions in phonological intervention
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Introduction
- Children with moderate to severe phonological impairments typically present with multiple phonemic collapses.
- Multiple oppositions is a treatment approach in phonological intervention which contrasts several target sounds to a comparison sound.
- Maximal oppositions is an intervention approach which targets several error sounds within the same phoneme collapse and contrasts them to the child’s production.
- Research shows that children with multiple phonemic collapses benefit from both multiple and maximal oppositions.

Clinical Scenario
I am a graduate student clinician at the University of Nevada, Reno. I have a three-year-old client with phonological disorder. Her test results indicate that she reduces all clusters to single sounds, but is still unable to accurately use single phonemes in her speech production.

Purpose
The purpose of this research project was to:
Determine which approach to intervention, multiple oppositions (I) or maximal oppositions (C), results in faster acquisition of error sounds (O) in preschool aged children with moderate to severe phonological impairments (P).

Method
- Search terms: multiple oppositions, maximal oppositions, phonology, and intervention
- Electronic databases: PsychINFO, ERIC, PubMed
Ten research articles were appraised and evaluated for validity and reliability.

Results

<table>
<thead>
<tr>
<th>Title/Authors/Date/Research Design</th>
<th>Purpose of Investigation</th>
<th>Participants</th>
<th>Dependent Variable</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intervention efficacy and intensity for children with speech sound disorder</strong></td>
<td>Examine the effect of dose frequency of intervention on phonological performance using the multiple oppositions approach.</td>
<td>N=54</td>
<td>Percentage of consonants correct (PCC)</td>
<td>PCC</td>
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<tr>
<td>Allen (2013)</td>
<td></td>
<td></td>
<td>Groups:</td>
<td>After 8 weeks P3 &gt; P1, ANCOVA p &lt; 0.02, partial η² = .15</td>
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<td></td>
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<td>P1: 1x/wk</td>
<td>After 24 sessions P3 &gt; P1, ANCOVA p = 0.09, partial η² = .11</td>
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<td>Quasi-Experimental</td>
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<td>P1: 6x/wk</td>
<td>The group that attended sessions three times a week for 8 weeks (P3) showed significant changes in phonology, more than the group receiving intervention once weekly for 24 weeks (P1) or the control group (C)</td>
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<td></td>
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<td>C: story book</td>
<td>P3 adjusted mean (M = 63.7%) was significantly larger than P1 (M = 59.3%)</td>
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</tbody>
</table>
| **Intervention for children with severe speech disorder: A comparison of two approaches** | Examine the effect of two different therapy approaches on speech accuracy and consistency of word production of children with consistent and inconsistent speech disorder. | N=18 | Percentage of consonants correct (PCC) | |%
| Crosbie, Holm, & Dodd (2005) | | 4-6.5 years | | |%
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References


