

Appendix 5A

Metaphors, Descriptions and Demonstrations, and Touch Cues

A. Introduction

Options for metaphors, descriptions and demonstrations, and touch cues for consonants and [ə] are listed in this appendix. Rather than list a voiced and voiceless demonstration for each pair of obstruents, ideas for demonstrating this contrast are listed in Table 5-5.

Table 5-5. Five possible methods to demonstrate voicing.

<i>Methods</i>	<i>Instructions</i>
1.	Instruct the client to listen to and identify the difference between a voiceless and voiced [a].
2.	Place the client's hands over the ears and instruct him or her to hum, which heightens the sensation of vocal cord vibration.
3.	If the client is able to produce a voiced and voiceless fricative, ask him or her to cover the ears and make these sounds. Alternatively, ask the client to make [h] and [a].
4.	You and the client place one hand on your throat and the other on the client's throat while making voiced and voiceless sounds together. Tell each other when the voicing goes on and off.
5.	If the client is able to produce a voiced and voiceless oral stop, attach a small piece of paper or a paper flower to the end of a tongue depressor or pencil and ask the client to "make the paper (or flower) move." The paper is more likely to move when a voiceless consonant is produced than when a voiced consonant is produced. (Be careful in providing instructions to the client, however, because a strongly articulated voiced oral stop will also move the flower.)

Appendix 5C

Phonetic Placement and Shaping Techniques

A. Introduction

The following are phonetic placement and shaping techniques for American English consonants and [ə]. The instructions are "bare bones" descriptions of techniques that should be studied prior to commencing the treatment session and elaborated on in whatever way seems appropriate to the clinician. An instruction to "touch the client's lips together," for example, might be simply performed or elaborated into a complicated game, depending on the clinician's style and the client's needs.

Shaping techniques that involve common error patterns are indicated by three asterisks (***) . For many sounds, more than one technique is described. When this occurs, the methods are listed in approximate order of difficulty, from least to most difficult. When cognates (pairs of sounds differing only in voicing) are presented, the instructions are for the voiceless sound. The voiced sound is facilitated by following the instructions for the voiceless sound and then asking the client to "turn on the voice" or some similar metaphor. The demonstrations of voicing listed in Table 5-5 may also be used to facilitate the production of voicing, for example, with clients with Final Consonant Devoicing, or to facilitate lack of voicing in clients with Prevocalic Voicing.

How to Avoid a Frustrating Situation

The following frustrating situation can arise when performing phonetic placement and shaping techniques. The example describes [t], but the situation can arise with any sound. The clinician carefully and successfully leads the client through all but the last step to produce [t]. Yet, when the clinician says, "Now say [t]," the client moves his or her articulators and reverts to the old pronunciation. Although there is no guaranteed way to keep this situation from arising, the

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chance of it occurring can be reduced if the clinician uses instructions that do not remind the client of the old pronunciation. After the client's mouth is in position for [t], for example, instead of saying "Now say [t]," the clinician might say, "Now let's play. Lower your tongue quickly" (or some other such instruction). After the client produces the [t]-like sound correctly approximately five times, the clinician might then say, "What you just did — that's how you say the [t] sound."