



NSW Speech Pathology Evidence Based Practice Interest Group

Critically Appraised Paper (CAP)

CLINICAL BOTTOM LINE: Discourse-based intervention is a possible way to treat WFD in children, though more evidence is required to make a conclusive decision.

Clinical Question [patient/problem, intervention, (comparison), outcome]: Is Discourse-based intervention effective for children with word finding difficulties?

Search Terms: word finding, discourse language

Search Systems:

Citation: Stiegler, L. N & Hoffman, P. R. (2001). Approaches for improving children's word finding with one discourse-based approach. *Journal of Communication disorders*, 34, 277-303

Design: Within-subject multiple baseline across tasks design
Single subject design carried out 3 times.

Participants: n=3 9 years-olds, no mental retardation, no pervasive developmental disorders, no hearing loss or fluency disorder, no history of head trauma, neurological dysfunction or documented anxiety disorder, normal Peabody score, 1-2 standard deviation below mean for test of word finding in discourse.

Experimental Group: n=3

Control Group: Subjects act as their own control (see comments on design)

Comments on Design: 1) They needed to specify what WF behaviours they were counting compared to number of words (ie if number of words increased for a child, it would decrease overall percentage of WFD) 2) 'practice effect'-maybe child was used to activity and/or clinician by the third therapy session. Also same baseline and treatment activities used. 3) sample too small 4) There were 3 different discourse tasks used but their context was the same. 5) short treatment sessions and only one baseline session. 6) No statistical measures were made on design. 7) Not enough info on type and amount of feedback provided 8) no naïve listener for story re-tell task. 9) No generalised post-test measures. 10) Possible effect of previous speech therapy intervention. 11) Did not acknowledge the weaknesses in their article.

Results: 1) All 3 subjects produced fewer overt word finding behaviours after treatment. 2) One subject exhibited immediate change while the other two made more gradual changes. 3) The 3 discourse tasks were not equal in complexity (the story retell task was much more difficult than the picture-elicited narrative in conversation. 4) Longer, more complex communication units were associated with significantly higher levels of linguistic nonfluency, including overt word finding difficulties.

Level of Evidence (NH&MRC): level 4

Appraised By: Paediatric language group

Date: October 2003