ACCENT REDUCTION

BEHAVIORAL DEFINITIONS

1. Non-native speakers of American English who have difficulty producing specific English phonemes in different positions within words, phrases, and/or sentences.
2. Good American English vocabulary and syntax skills.
3. Difficulty with suprasegmental features of American English words and phrases.
5. Difficulty with American English cultural rules of communication.
6. Speech production in conversations interferes significantly with effective communication at school, work, and/or in the community.

LONG-TERM GOALS

1. Produce American English phonemes correctly in different communicative contexts.
2. Clear intelligibility when speaking in American English with others at school, work, and in the community.
3. Understand the phonological features of American English.
4. Understand the phonological differences between the client’s first language and English sounds.
5. Produce intonational features of the American English language appropriately in different communicative situations.
6. Implement the cultural rules of using American English in different communicative contexts.

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SHORT-TERM OBJECTIVES

1. Participate willingly in an assessment. (1, 2, 3, 4)

THERAPEUTIC INTERVENTIONS

1. Administer the *Proficiency in Oral English Communication* (Sikorski) to determine the client’s articulation, auditory discrimination, intonation, syntax, vocabulary, and pragmatic language skills in American English.

2. Videotape conversational speech samples that represent the client’s typical American English speech production; analyze his/her American English proficiency by noting features such as phoneme production, body language, syntax, and intonation.

3. Ask the client to provide information on his/her background (e.g., how long he/she has been speaking English, native language and dialect, academic and work history; previous professional intervention and relevant social, academic, and occupational concerns).
1. Cooperate with an oral-motor examination. (5)

2. Establish a measurable baseline of the client’s English speaking skills before treatment begins.

5. Evaluate the client’s oral-motor skills by first observing the visible structure of his/her face, lips, teeth, tongue, and hard and soft palate and then assess how he/she uses specific structures important for speech production (e.g., movement, strength, and closure of the lips; strength, protrusion, retraction, and lateralization of the tongue; or movement of the soft palate when producing the /a/ phoneme).

6. Conduct a pure-tone audiological screening at 500 Hz, 1000 Hz, 2000 Hz, and 4000 Hz at 20 dB for children and 25 dB for adults (see Guidelines for Audiologic Screening by American Speech-Language-Hearing Association).

7. Refer the client to an audiologist for a complete evaluation if results of the audiological screening indicate a need for further assessment.

8. Conduct a meeting with the client, first, to review assessment results and, second, to develop collaborative goals and intervention strategies.

9. Determine the most appropriate general therapeutic approach by considering key linguistic and cultural differences between the client’s native language and American English.

3. Participate willingly in an audiological evaluation. (6, 7)

4. Accept the recommendations given, and collaboratively select specific goals and a general intervention strategy. (8, 9, 10)
5. Verbalize an understanding of how specific therapeutic interventions contribute to better American English speaking skills. (11,12)

10. Select specific phonemes as targets for intervention based on the client’s accent.

11. Before beginning an activity, clearly state the therapeutic goal of the activity for the client and again, at the end of the activity, ask him/her to state the specific goal for that activity.

12. Help the client chart therapeutic progress by indicating accomplishments on a visual aid illustrating the sequential stages necessary for achieving long-term goals.

6. Discriminate between two words with minimally different phonetic sounds with 90% accuracy. (13, 14, 15)

13. Instruct the client to choose the pictures that represent the words that he/she hears when shown pictures of minimal pair words (e.g., “me” or “meet”) that highlight his/her target phonemes (e.g., /l/ and /r/).

14. Provide the client with audiotapes or Internet web sites that have lists of minimally contrasting words to practice discriminating between minimally different sounds (see Listening Comprehension Exercises by Beare at http://esl.about.com).

15. Assist the client in determining whether target sounds occur in the initial prevocalic, medial intervocalic, or final postvocalic positions of words (e.g., ask if the /l/ sound in “yellow” is at the beginning, middle, or end of the word).

7. Practice listening and speaking exercises 10- to 30-minutes daily, as directed by the SLP. (16)

16. Give the client exercises (e.g., listening to word lists and repeating words and sentences) to practice with an audio recorder.
8. Identify correct American English productions with 90% accuracy. (17, 18)

9. Make the correct articulatory placement for American English phonemes. (19, 20, 21)

10. Pronounce American English phonemes correctly in words with 90% accuracy. (22, 23, 24, 25)

17. Say the client’s incorrect patterns of speech production purposefully on some of the words in a familiar short story and instruct him/her to listen carefully and say, “I heard it!” after hearing the incorrect production.

18. While viewing video recordings of the client practicing intervention strategies, ask the client to identify his/her correct and incorrect American English productions.

19. Use mirrors and tongue blades or cotton swab sticks to provide detailed kinesthetic and visual cues to position the client’s lips, teeth, and/or tongue for target phonemes.

20. Present pictures, diagrams, or computer simulations of the positions of the articulators to the client as models of the placement needed for specific phonemes.

21. Use phonemes with similar distinctive features to elicit target phonemes (e.g., ask the client to repeat the aspirated /t/ phoneme quickly to produce the /s/ phoneme); point out that the articulator positions are similar.

22. Provide practice on phonemes that are difficult for the client to pronounce.

23. Provide practice on target phonemes in phrases or short sentences by using slow-motion speech, echo speech, unison speaking, or role playing.

24. Teach the client phonetic symbols and features, so he/she will
understand the placement, manner, and voicing features of American English sounds and to enable him/her to look up pronunciations of unfamiliar words in American English dictionaries (refer the client to *Reference and Introduction to Phonetic Symbols* by Beare at http://esl.about.com/library/weekly/aa040998.htm).

25. Teach the client the use of unstressed vowels, less intensity, and lowered pitch for the pronunciation of unstressed syllables in words and phrases.

11. Pronounce American phonemes correctly in common phrases and sentences with 80% accuracy. (26, 27, 28)

26. Have the client read or tell jokes and riddles using correct phonological productions of the target phonemes.

27. Help the client practice common phrases he/she would use in his/her occupation and/or in social situations.

28. Monitor and correct the client’s speech production during conversations by asking leading questions: (a) “Tell me about your favorite movie or television show,” (b) “If you won a million dollars, what would you do?” or (c) “What did you do during your vacation?”

12. Use stress and unstressed words correctly in sentences with 90% accuracy. (29, 30)

29. Teach the difference between content words (e.g., nouns, verbs, and adjectives) that are generally stressed, and function words (e.g., prepositions, auxiliaries, pronouns, and articles) that are usually unstressed.

30. Teach the client how using stress contrastively on different
13. Use rate and pitch correctly in different situations to convey different meanings. 
(31, 32, 33)

31. Teach the client how the prosodic features of pitch, intensity, and rate affect the meaning and emotional interest of what is spoken.

32. Model various intonation patterns (e.g., declarative statements, question forms, embedded phrases); have the client mark a reading passage with varying intonation patterns and then read the passage; critique him/her on the effectiveness of his/her expression.

33. Count the number of words the client reads in one minute; have him/her adjust his/her rate by using a stopwatch when reading and bringing the rate into the 150 to 180 words per minute range, which is typical for speakers of American English.

14. Use American English morphemes correctly with 90% accuracy. (34)

34. Teach the client various morphemes (e.g., regular and irregular plurals, regular and irregular past tense markers); provide him/her with word lists to study; engage him/her in conversation and randomly insert errors of usage (e.g., “I goed away”) while talking; ask the client to listen for errors and note them by holding up a finger, then ask him/her to say the word in its correct form.

15. Learn American English pragmatic conversational strategies. (35)

35. Teach the client how to manage interruptions (e.g., “excuse me”), revise messages if misunderstood, and appropriately
use American English nonverbal cues (e.g., eye contact, gestures, and proximity) to the listener.

DIAGNOSTIC SUGGESTIONS:

Axis I: 307.9 Communication Disorder NOS