

Building Early Sentences in your language:

a service evaluation study of the 'BEST' home language intervention

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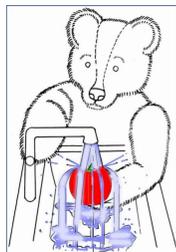
Introduction

Building Early Sentences Therapy (BEST) is:

- a specialist intervention for children of 3 - 6 years with significantly delayed language development.
- delivered by SLTs and SLT Assistants (SLTA) in close partnership with the child's parent(s)/carer(s).
- delivered individually or in groups, and has been adapted for delivery in a number of languages.
- based on 'usage-based' theories of language acquisition^[1]
- aims to improve children's use and understanding of two, three and four clause element sentences
- delivered over 16 sessions targeting 16 different verbs
- delivered using a standardised set of procedures and resources

Key Features of BEST:

- A focus on **Input**
- **Output** occurs only when the child is ready
- **Homework** is accessible to parents
- A focus on **Cognitive Strategies**^[2]
- Promotes **Abstract Grammatical Representations**^[3]
- Can be **Applied to a Number of Languages**



Methods

Initial Development

- Identification of difficulty meeting needs of this group of children
- Identification of gap in evidence
- Identification of theory
- Development of therapy approach
- Early 'piloting'
- Development of resources
- Staff Training
- Implementation across clinics

Service Evaluation

- Devise 'progress tracker' scoring number of morphemes and argument structures used
- Evaluate service through
 1. analysis of progress trackers
 2. focus groups
 3. regular meetings with staff for feedback and development

Phase 2 Development

- Review of procedures & materials informed by evaluation
- Development of new resources & manual
- Distribution across clinics
- New Training package to be delivered

Results

- Quantitative Results:** Data from 14 children receiving therapy in English and 4 in Mirpuri were analysed to determine which children had made significant progress in the target structures. All 18 children made significant progress; 15 in both morphology and argument structure use, 3 in either argument structure or morphology (Table 1). Summary Group data are presented in Graphs 1 and 2.
- Qualitative Results:** Focus group data from SLTs and SLTAs indicated high levels of acceptability and accessibility of the approach with SLTs, SLTAs and parents/carers

Table 1

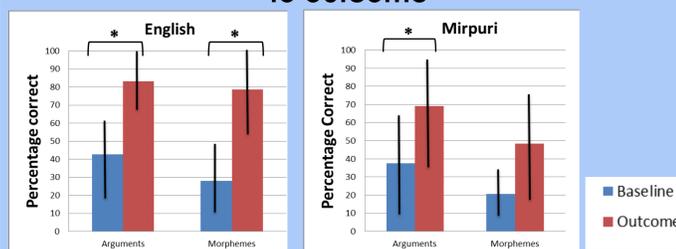
	No. of children making significant progress*	
	English (N = 14)	Mirpuri (N = 4)
Arguments	12 = 86%	4 = 100%
Morphemes	13 = 93%	4 = 100%

- * p<.05
- Note. All children made significant progress in at least one area

Note. Statistical analysis = a repeated-measures trend analysis for dichotomous data^[4]

Graphs 1 and 2

Group summary data of change from baseline to outcome



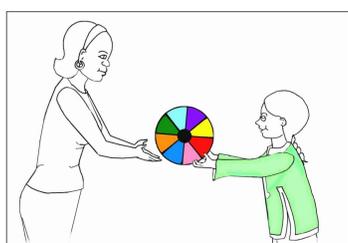
Note. Wilcoxon matched pairs analysis. All significant at p <.05 except for Mirpuri morphology where p = .05

"...and Dad was like 'So actually can I have some homework and can I take it home?' because he saw him achieving in sessions and he thought I can do that.....because it was structured with the family they appreciated that"

"It was really motivating because you could instantly see the results and the impact it was having. Previously you've been running groups and you've done stuff and you've kept doing the same stuff...Because you could see how quickly they have grasped it, it kept you motivated."

Discussion

- BEST is associated with significant progress in targeted language structures
- Significant progress was achieved by children who received BEST in English and Mirpuri
- Significant progress was achieved by children from monolingual and bilingual backgrounds
- BEST is an accessible and acceptable intervention approach to SLTs, SLTAs and parents



These results suggest that a theoretically motivated, structured, direct therapy intervention which promotes parent/carer buy-in, and which is delivered in a sufficiently high dosage can promote significant progress in the language development of young children with severe language difficulties.

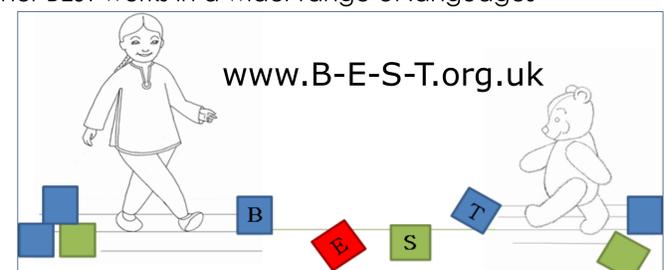
Conclusion

This service evaluation is the first step in the development and evaluation of a complex intervention^[5]

Further evaluation is necessary to definitively test the efficacy of BEST

Future plans include publication of a standard manual and set of resources and further research to evaluate

- how BEST compares to other interventions
- whether gains generalise
- whether BEST works in a wider range of languages



References

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