

Traditional Scheduling versus Block Scheduling for Articulation Treatment in the School Setting

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Scheduling

- Traditional Itinerant Schedule:
 - 2 sessions per week with 15-30 minutes each session (Weaver & Wollershein, 1963, ASHA, 1973).
- Block Schedule:
 - 3-5 sessions per week for 5-10 weeks followed by the same block of time with minimal therapy (Neidecker & Blosser, 1993)

Research

- Weaver & Wollersheim, 1963
 - Investigated articulation improvement using a block system compared to an itinerant system in ages 7-9;5.
 - Positive results for block scheduling
- Westen & Harber, 1975
 - Compared 5 different schedules with 70 children with articulation disorders in grades 1-6.
 - Positive results for itinerant scheduling
- Maclearie & Gross, 1966
 - Carried out a series of studies comparing the effectiveness of block scheduling.
 - Nonsignificant differences between scheduling types

Initial Testing and Participant Schedules

Participant	Sex	Error Sounds	PPVT SS	GFTA SS	Therapy Schedule
1 (BT1)	M	l, θ	110	73	Block Therapy
2 (TT1)	M	l, θ	107	75	Traditional Therapy
3 (BT2)	M	s, z	105	73	Block Therapy
4 (TT2)	M	s, z	115	82	Traditional Therapy

Schedule

- Block A: Participant 1 received 6 weeks intense therapy (4 days per week) followed by 6 weeks minimal therapy (1 day per week)
- Block B: Participant 3 received 6 weeks minimal therapy followed by 6 weeks intense therapy.
- Traditional itinerant schedule: Participants 2 and 4 received 2 times per week, 30 minutes each session for 12 weeks.

Pre-, Mid-, and Post- Test Assessments

- Conducted by a senior CDS student and a certified SLP who was blind to participants schedules

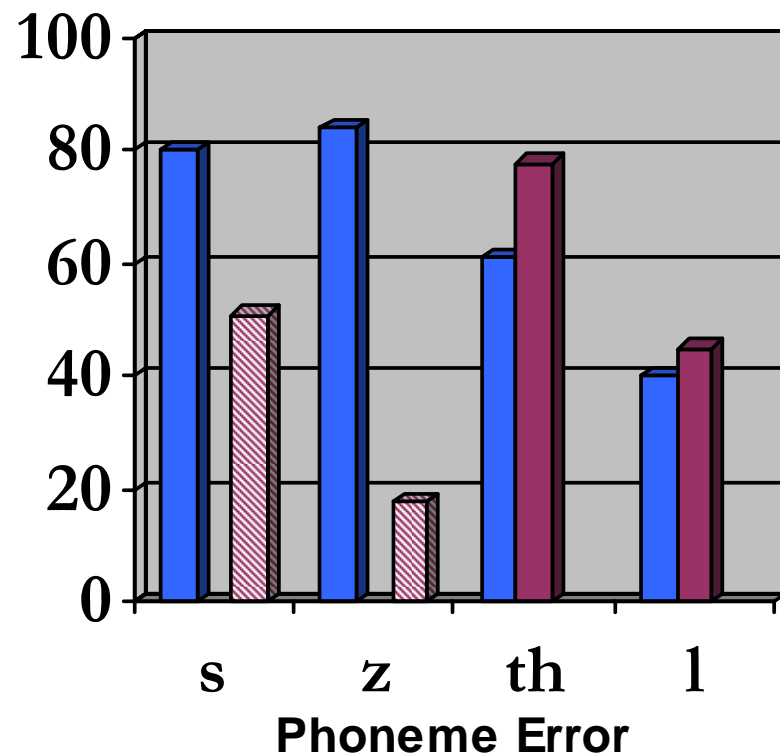
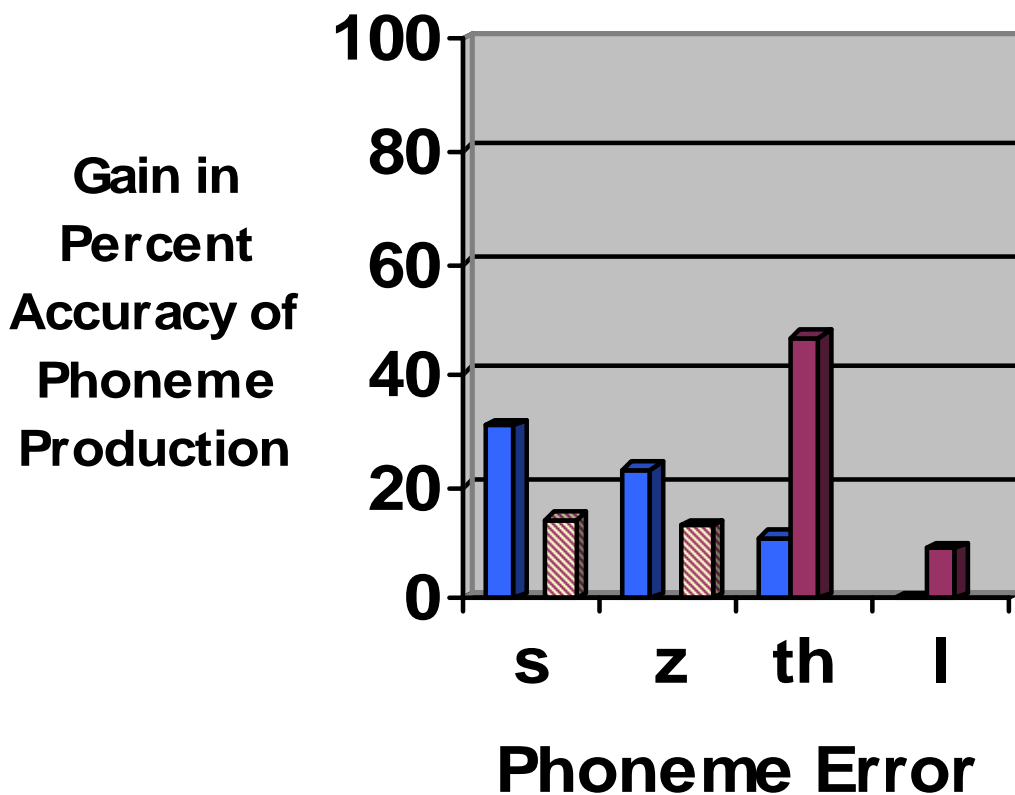
GFTA Results

Participant	Pre-test SS	Post-test SS	Standard Score Gain
BT1	73	85	12
TT1	75	79	4
BT2	82	90	8
TT2	73	85	12



Mid-term Results

Final Results



Discussion

- Both therapy schedules facilitated improvement
- The current study best supports Maclearie and Gross, who found inconclusive results
- Possible order effect

Implications and Future Research

- Clinical implications are limited with a small study.
- Future research should include:
 - More participants of different ages and severity of articulation disorders
 - Order of intense therapy minimal therapy