A MANUAL OF EXERCISES FOR THE CORRECTION OF SPEECH DISORDERS

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A manual of exercises for the correction of speech disorders by $\,$ May Kirk Scripture $\&\,$ Eugene Jackson

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OF

SPEECH DISORDERS

BY

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ILLUSTRATED



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PREFACE.

WE, who speak the English language, can no longer be reproached for our inattention to the subject of speech disorders; for not only during the past year have the Boards of Education in many large cities made the much needed advanced step of appointing Directors of Speech Improvement in the Public Schools, but all over the country numerous other authorities in Speech and Music have already started movements along the lines of diction. Picked teachers are being sent to the speech experts to study their methods in this field, and to carry back this special knowledge to the various school systems,

This movement deserves the highest commendation, for should not the "glory of the English tongue" be upheld? Refinement of dress, of person, is always desirable; ideas of cleanliness and neatness are more and more respected. Young men spend much thought on the shape of their collars and the shade of their ties, and young women on the thousand and one little things that go to make up an attractive appearance; but are they always so particular about the shapes and shades of their vowels or consonants, that their speech may be as attractive as their persons? Slovenly language should no more be accepted than slovenly manners.

It has long been recognized that the average American voice is shrill and the speech careless compared to the voice and speech of an Englishman. The National Council of the Teachers of English recently authorized the organization of a Committee on Ameri-

can Speech, with the hope of arousing public sentiment on this subject. Prof. Clapp, of Lake Forest, Illinois, says in "The Reformation of American Speech"*: "Many have come to realize that our vicious speech habits are a serious handicap to national They impair the speed and accuracy of communication in business as well as in social life; they increase our liability to disease. Or, to put it the other way around, a general insistence on decent speech-distinct utterance, and clear, quiet tonewould not only make life pleasanter, but would actually enable us to talk faster, and be more easily understood, in all our business dealings. It would lessen disease because it would promote better hygiene of the entire vocal tract-mouth, nose, throat, and lungs-among all persons, and because it would lead to the detection and correction of thousands of irregularities which now go unhelped and almost unnoticed. When a whole populace says 'cer'nly' and 'mou'n' for 'certainly' and 'mountain,' the victim of adenoids, of bad teeth, of cleft palate, is not likely to be caught and cured. Yet a people which has learned the importance of the care of its teeth should not be too hard to convince of the importance of the care of its utterance."

If all this be true of the so-called normal speech, how much more careful and particular should we who devote our attention to abnormal speech—be about insisting upon slowness; distinctness, plenty of

^{*}Speech and Voice Hygiene: A Symposium Reprinted from The Journal of Ophthalmology, Otology, and Laryngology, April, 1916.

tone, resonance, rhythm, emphasis, breath, and all the other attributes that go to make up correct speech? Correct normal speech must be our standard in the correction of speech disorders.

These books on Speech Correction, the first volume of which appeared serially in the "Laryngoscope" of 1918, are devoted to the theory of speech disorders and explanation of the methods to be used in the correction of stuttering, lisping, cluttering-the speech resulting from various organic defects and negligent speech in general. They are written in the hope of meeting the demands of teachers who must undertake the correction of pupils, either in private or public schools. In preparing them we have been impelled to explain a few fallacies that exist concerning the subject of speech defects, and at the same time provide systematic methods for those who are intending to correct such defects. The first volume is devoted to definitions of the defects, the etiology of them, diagnosis and therapy. This, the second volume, is an exercise book for both teacher and pupil, and contains material which is the result of years of labor and experimentation with both private and clinical dispensary patients.

At the Vanderbilt Clinic, where the speech work is a part of the Neurological Department, we have had every facility through the kindness of Professors Tilney and Casamajor, to carry out scientific experimentation and practical work for most of the disorders of speech. We have had similar facilities at the University and Bellevue Hospital Medical College Clinic through the kindness of Drs. Neustaedter and Steinach.

Here, possibly, is the time and the place to say that there would be less correction of speech defects needed in the upper grades of the school if attention to distinct enunciation and articulation were taught in the very first year of school life-yes, and even farther back, in the home, where the child gets its first impression of the spoken language. If parents and guardians would insist, first, upon distinct utterance; second, that there be no baby talk; third, no elision of syllables; fourth, no slang; fifth, no short grunts for polite answers; sixth, no carelessness in thought as well as in speech; and seventh, that no nervous habits be allowed to creep into the speech, such as hesitation, catching breath, putting "er" on words, etc., much of the time and labor spent later on these defects would be saved, and much misery averted.

Dr. Smiley Blanton, of the University of Wisconsin, in writing of speech defects in children, says: "Speech defects among children have been neglected by both physicians and educators in America, with a few notable exceptions. Dr. G. Hudson Makuen, of Philadelphia, worked in this field for many years, and the careful work of Dr. Scripture, especially in corrective phonetics, is too well known to need comment." Dr. John Reigart, also, Principal of one of the New York public schools, must be mentioned as one of the first American educators to give his attention to this neglected field.

Even the education of physicians in the matter of speech defects has been so neglected that often they advise against any treatment, and the parents of stuttering children are assured that the trouble will be outgrown. As a result of this lack of knowledge on the part of the physician, sufferers from this defect have flocked to the "Stammering Schools" and the non-medical "Speech Specialists," who are, in most cases, quacks of the worst kind, guaranteeing cures which they know they cannot always obtain. Dr. C. S. Blumel, who was a stutterer himself, and who has taken treatment at many of the "Stammering Schools" of this country and abroad, in his book, "Stammering and Cognate Speech Defects," has this to say of these schools: "Many of them (the systems used at these schools) are entirely devoid of merit; they have been recorded merely because they are the gold bricks that are daily sold to stammerers by an infamous fraternity of 'speech specialists' . . . Progress is hampered by the charlatans who rob the stammerer and bring everybody and everything connected with the treatment or investigation of stammering into disrepute."

Cordial thanks are herein expressed to Dr. Mac-Laren, of Princeton, and Dr. T. H. Ames, of New York, for valuable suggestions; to Dr. Otto Glogau, of New York, for much valuable aid upon the laryngological side of speech defects, both physiologically and experimentally; to Mr. Simon Goldbloom, of Brooklyn, for his invaluable pedagogical aid; to Mr. Arthur DeBra, experimental psychologist in the speech research laboratory of the Vanderbilt Clinic.

In the correction of speech defects at our clinics, our procedure is more along psychological than physio-