
SPEECH THERAPY IN A CAMP SETTING:
THE GROWTH AND DEVELOPMENT OF A SPEECH HABILITATION CENTER

The complexity of dynamics which comes to surround all types of deviant speech often causes this behavior to be remarkably resistant to therapeutic change. In 1932 a camp was established in order to provide certain ingredients which are felt to be basic to an effective program for assisting individuals in the modification of maladaptive speech patterns. The purpose of this report is to present a rationale for the development of a camp setting as a speech habilitation center, to describe the growth of a particular camp program, and to discuss certain unique therapeutic features of a camp-clinic.

JOHN N. CLANCY, M.S., Director, and DAVID PRINS, Ph.D., Assistant Director, The University of Michigan Speech Improvement Camp, prepared this Special Report.

THE SPEECH IMPROVEMENT CAMP—
PHILOSOPHY AND EARLY HISTORY

Most of the theories regarding the etiology and course of development of speech defects are based upon the assumption that disturbances of speech may arise from many factors which influence the growth and development of a child. Usually these factors exert their influence not just once or consistently, but often and unpredictably, causing many aspects of the individual's psychological and physical being to become associated with his speech impairment. No matter what the specific etiological circumstances, however, speech becomes established as a learned response and is conditioned in the complex environmental situations which surround everyday experi-

ences. For this reason, the therapeutic setting must permit new speech patterns to be learned in actual social events, in the presence of stimuli previously associated with maladaptive verbal responses. The therapy program must provide a totality of communicative experiences in which the patient can discover a new role for himself as a communicator, develop more acceptable verbal responses, and more mature, self-improving, and socially gratifying behavior.

It was felt that a camp-clinic setting was ideally suited for offering several of these basic conditions which are essential to an effective speech habilitation program:

(a) A New Environment Is Provided. The individual is separated from influences which tend to perpetuate his problem, and in this new environment, a new expectancy for improved communication surrounds him continuously.

(b) Physical Health And Social Adjustment Are Emphasized. A well-regulated program integrates speech therapy with personal counseling, physical education, social experiences of daily living, and opportunities for self-expression.

(c) Continuing Diagnosis Accompanies Therapy. As a result of the round-the-clock living with his clients, the clinician is able to observe their behavior in all kinds of activities, rather than in the office or classroom only, and is able to direct and adjust therapy accordingly.

(d) Carry-over Activities Are Abundant. Implicit within the camp setting is an opportunity for the conditioning of new speech behavior, not just in the direct therapy session, but in the events of daily experience in which oral communication actually plays its significant role.

Originally, it was not intended that an out-of-door camping program of itself would necessarily contribute to speech improvement. It soon became apparent, however, that those intangibles of camping which teach normal young people to live with others, to acquire self-confidence, and to develop leadership capacities and a willingness to accept responsibility, were obviously potential advantages to a boy overcoming a speech defect.

The first enrollment at the University of Michigan Speech Improvement Camp numbered four boys, all from Michigan. This number increased steadily and in recent years the annual attendance has been approximately 90 boys and young men from more than 20 states. About half of the campers have been stutterers. Other communication handicaps have included boys with disorders of articulation, voice, and (or) language. These have been both functionally based or associated with problems of brain damage, hearing loss, or cleft palate.

For seventeen years the camp operated as a privately owned organization, and in 1949 it became a unit of The University of Michigan. Since that time the camp has broadened the scope of its habilitation program and provided for the integration of several disciplines allied with speech pathology, to form a more total approach to the diagnosis and treatment of communication disorders. Special clinical programs in remedial reading, language training of the deaf and hard of hearing, and speech problems associated with cleft palate have been established. In addition to specialist clinicians in the above areas, the staff has been enlarged to include visiting diagnostic consultants in the areas of speech pathology, audiology, clinical psychology, medicine, and dentistry. These consultants remain in camp for a period of one to three days, evaluate selected campers, and give lectures to the staff regarding clinical problems and the application of their approaches to the camp setting.

A training program also has been developed within the habilitation framework. This "internship in speech pathology" is designed to provide graduate speech clinicians an opportunity for supervised clinical training in a round-the-clock residential therapy program. The internship provides a learning experience which is not available in the usual clinical setting. By living with his clients the intern comes to realize the value of continuous observation and evaluation so that he can adjust his approaches in therapy to meet changing individual needs. He discovers from actual experience the reality of an academic cliché, that speech is a part of the total behavior pattern of the patient and is effectively altered only as a function of the client's complete social readjustment.

CONTRIBUTIONS OF A CAMP-CLINIC TO SPEECH HABILITATION

The philosophy which initially motivated the establishment of a camp-clinic has continued to serve as the basis for evaluating its particular contributions to habilitation of the speech impaired.

Development Of A New Speaker Self Image. Every speaker, as he receives feedback from his auditors, begins to internalize images of himself as a communicator. The individual with defective speech has met with communicative failure to some degree, has known some form of social ostracism, has received the unwelcome sympathy of parents or friends, and has begun to see himself generally as ineffective in communicating. For this reason it is an important function of a camp program to permit the development of a new self image which is based on success in communicative experience.

The old image of ineffectuality in communication need not surround the camper in his new environment. His entire world in the camp community has a different response set, a new expectancy for his successful achievement in speech rather than his failure. A different speaker image can develop and can be experienced in the absence of those stimuli which automatically were associated with images of ineffectuality and defeat.

Serving Total Physical And Social Needs. Speech is a product of combined physiologic and psychologic forces, dependent upon the integrity of neuro-motor and neurosensory mechanisms, personality, and variable environmental circumstances. A genuinely effective relearning program for individuals with speech handicaps cannot become fragmented so that speech is looked upon as a behavior separate from the individual's total response in a given interpersonal event.

Camp living provides a variety of activities which make up a major portion of a young man's experience. In addition to learning new verbal response patterns in individual and group speech therapy sessions, emphasis is placed on successful verbal, and general social achievement in meal-time conversation and etiquette, after-dinner speaking, skits and dramatic performances in front of large audiences, club activities, athletic training and sports events, and in the group structure provided by cabin living. Repeated experience in these situations under controlled conditions allows new social response patterns to be learned and to become an integral part of the individual's response hierarchy.

In particular, it has been discovered that a strong emphasis on instruction and improvement in various sports skills is an important adjunct to a speech therapy program for boys. Success in the achievement of peer group status often is a function of performance ability in athletic skills. For the boy with a speech problem, achievement in sports becomes even more important, and failure in this area can be a crippling blow to his attempts to relate satisfactorily to other boys his own age. In a camp program an attempt is made to give each boy additional skill and confidence in sports activities. For the camper who already has achieved a high level of excellence as an athlete, a sports program provides an opportunity for the development of appropriate leadership qualities in this area. For the camper who is unskilled athletically, this program offers a lift in an area vital to social relationships and communication with others.

An additional therapeutic feature of a camp setting is each boy's intensive participation in group-living with other campers who have similar problems of communication. This offers more than just a protective and supportive environment. The camp community brings its combined energies to bear on a common problem and the individual, through identification with group goals, receives strong reinforcement and satisfaction in achievement as a result of community acceptance.

Intensive Therapy—Consistent Separation From The Old Environment. Speech behavior varies as a function of the environmental stimuli which surround its production. As a specific example of this, research in the area of stuttering has shown repeatedly the dependency of this behavior upon both situational and linguistic cues. Because of this, during a therapy program sporadic contact with an environment which presents cues associated with undesirable verbal responses, may introduce a confusion of stimulus conditions, sufficient to inhibit progress in developing new speech patterns. In a camp program therapy takes place throughout each day, over an extended period, and the therapeutic climate surrounds all activities. The camper is not faced with the problem of attempting to alter speech for several hours or days and then returning to an environment in which the nature of the stimuli, and needs for information exchange, cause him to regress to previously learned, unsuccessful speech patterns. In camp his total environment, over a sustained period, is different from that out of which the problem developed, and in this new milieu, new verbal response patterns can be learned and can become habitual.

Speech Therapy In Life Space. Most stutterers can speak fluently in selected activities, and many articulatory defectives can learn quickly to produce phonemes adequately in structured situations. These abilities, however, tend to mask the true severity of the communication disorders. As an integral component of human relationships in every day experience, speech is significantly modified only as it becomes altered within this experience framework.

One of the major stumbling blocks in many therapy programs is that of developing the carry-over of newly learned verbal responses from the therapy session to actual speaking events. Perhaps the most significant feature of a camp-clinic for the speech defective is that therapy and daily communication

activities occur together. As an example of this the use of meal time as a therapy situation has become one of the most important aspects of the Speech Improvement Camp's program. Campers and staff members eat together at small tables where the staff can lead the conversation and provide a new expectancy for the camper's achievement in communication. In this way each boy is given daily practice in a speaking situation which will be an important part of his life after he leaves camp. In addition, following every meal, a period is set aside for announcements. When a camper stands and makes his announcement, he confronts the entire group of campers and staff and can face his speech limitations directly, become desensitized to them, and demonstrate his progress in making a change.

Other activities, inherent to camp programs, have shown themselves to have natural therapeutic value for the speech handicapped. Group skits or plays in front of large audiences give some participants a chance to face a feared situation; some a chance to laugh at themselves, to learn to tolerate imperfection; and others a chance to develop confidence in an activity in which they never before have had a chance to participate. After dinner speaking, both planned and impromptu, offers each camper an opportunity to confront hesitancy and fear and to succeed in the face of it. Improved speech patterns are demonstrated in front of the entire camp population and strongly reinforced by group approval.

In all of this, the object of a camp program is to take therapy out of the office or classroom and have it occur within activities which involve interpersonal relations and oral communication. In a camp setting an attempt is made to bridge the gap between the artificiality of direct therapy and the life-space settings in which communication problems become important.

SUMMARY

This report presents a rationale for the development and growth of a camp setting as a speech habilitation center and includes a description of certain significant therapeutic features of a camp-clinic. A philosophy has been developed which serves as a basic framework within which individualized approaches to speech therapy can be effectively administered. It is based upon an acceptance of the premise that all disturbances of speech arise from, and are sustained by, a complex of causative factors which influence the growth and development of a child. On this basis the ingredients of an effective therapy program include the establishment of a new environment which surrounds the individual continuously, which provides a new expectancy for change in speech behavior, and with appropriate teaching and guidance, allows each individual to seek out the resolution of his own communication problem and come to maximum self-realization.

