

Unless you have a child who is in speech therapy or who has difficulties with feeding, you may never have heard of oral motor skills before. Although the term is commonly used in the occupational and speech therapy fields, many families are unfamiliar with it. However, it designates a crucial area of development that is often overlooked. In this article, I will take a closer look at oral motor intervention because it can transform your child's life. Keep in mind that it does not work for everyone, and that not every child is a candidate for this intervention.

Oral Motor Skills

Oral motor skills refer to the movements of the muscles in the mouth, including the tongue, lips, cheeks and jaw. As with any other muscles, these can be weak or strong, coordinated or uncoordinated, and can have a wide or limited range of motion.

Oral motor skills allow us to chew our food, swallow, drink from a straw, put our lips around a spoon, lick a lollipop, blow out candles on a birthday cake, formulate sounds, talk, and so much more! While we tend not to give much thought to these skills, our oral motor muscles play a key role in our daily lives.

During the first few years of life, children go through significant structural and neurological growth. In particular, oral motor development undergoes rapid change and growth as children begin to explore their need for food, safety and comfort.

Identifying Oral Motor Difficulties

There are some common signs that might indicate either difficulty in coordinating oral motor structures or challenges with range of motion. Please keep in mind that the list shown here is not a diagnostic tool but rather a guide to help you seek more information when you meet with a licensed specialist for an evaluation. Any one of these signs alone does not justify a need for oral motor intervention. If many of these signs are present, however, you and your specialist can determine if oral motor intervention would be the best fit for your child.

Oral Motor Exercises

About a decade ago, I became certified in Beckman Oral Motor Intervention. I took the three-day course in Seattle, Washington, and it changed my world. I immediately started practicing on myself and noticed a difference in my facial tone. I went back to work, and started implementing oral motor intervention with an eight-year-old client. He had an open mouth posture, forward protruding tongue, low tone and weakness in his lips and tongue, and an excessive amount of drooling. After just three sessions, he had a greater awareness of his oral motor structures and was better able to manage his saliva. After a few more sessions, he achieved a closed mouth posture at rest with minimal drooling.

Many toddlers find it nearly impossible to sit still and allow an adult to touch their mouth to do mouth exercises. It is even more challenging for them to allow something inside their mouth. There are some things you can do at home to begin focusing on those oral motor skills in ways that they won't find scary. Consider the following tips.

- **Provide tactile stimulation around the mouth.** When you cuddle with your little one, lightly touch around the lips, cheeks, and jawline with your finger.
- When you are brushing your child's teeth, brush the tongue, the inside of the cheeks, the gums, and the lips.
- Make silly faces! Get eye to eye with your child and make silly faces while exaggerating your own range of motion. Open your mouth wide when you say "A," retract your lips for "EE," and round your lips for "O." When you are saying words like "ball" or "up," exaggerate the words so your child can see the shape of your mouth. This tip is one of my favorites and may be the most important, especially right now. Over the past two years, kids have grown up not seeing our mouths due to the use of masks. Imitation is one of the earliest skills developed and a precursor to speech and language development. It comes as no surprise, then, that children have less range of motion because they are not seeing mouths moving behind the masks.
- **Practice blowing bubbles, whistles, cotton balls, and candles!** This is a great activity for lip rounding and for coordinating respiration to produce sounds.
- **Strengthen the tongue** by placing something sticky around your little one's lips and having the child lick it off using only the tongue. Do tongue wiggles from side to side, and up and down.

Signs of oral motor difficulties include:

- · open mouth posture
- drooling
- food falling out of the mouth while trying to eat
- difficulty chewing
- sucking on food instead of chewing it
- difficulty rounding lips
- difficulty putting lips together
- difficulty retracting lips
- mashing food with tongue
- pocketing or holding food in the mouth
- gagging on food
- tongue lays flat and slightly out of the mouth
- difficulty sticking out tongue or lifting tongue up
- preference for certain textures of food
- difficulty swallowing
- difficulty drinking from a straw
- difficulty pronouncing consonant-vowel combinations together.

There are many benefits to oral motor intervention. The ideas listed above are just some of the things you and your child can do together to draw awareness to and strengthen the mouth muscles.

Oral motor intervention improves the movement, coordination and strength of oral motor muscles. This, in turn, helps with speech production and supports an individual's ability to eat and drink more effectively. If you are interested in seeking an oral motor assessment to address your child's speech or feeding challenges, contact a speech language pathologist. The sooner we can identify and work on areas that need extra support, the better the outcome!



Sholeh Shahinfar, MA, CCC-SLP, RYT, is a board certified and licensed Speech Language Pathologist and Founder of Valued Voices. She has earned her Bachelor of Arts (B.A.) degree in Hearing and Speech Sciences from University of Maryland, and Master's of Arts (M.A.) in Communicative Disorders from California State University, Long Beach. She holds a Certificate of Clinical Competence in Speech Language Pathology (CCC-SLP) and is a certified Beckman Oral Motor Trained therapist. She holds multiple state licensures and is a member of the American Speech and Hearing Association (ASHA) and the California Speech Language and Hearing Association (CSHA).

Sholeh has extensive experience working with children with autism, apraxia, phonological impairments, intellectual disabilities, expressive and/ or receptive language delays, and feeding/swallowing deficits. She also has extensive training and experience working with adults with aphasia, apraxia, dysphagia, traumatic brain injury, voice and cognitive deficits; among many more speech and language differences.

Sholeh continues to expand her knowledge by attending various continuing education services in order to implement the most evidence-based treatment into her work with individuals with speech and language needs. Sholeh's passion for the profession has led her to work with a variety of individuals, in several different settings throughout the years. Sholeh embodies and cultivates a whole-family, child-centered and naturalistic approach when working with clients. Developing relationships with her clients and their families is one of the great rewards of her career. She is dedicated to connecting children to their voice and inspiring self-expression.

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