

Lisps

A lisp is the inability to produce certain speech sounds due to incorrect tongue placement. Children with lisps usually have challenges producing one or more of the following sounds: /s/, /z/, /sh/, /ch/, /j/. There are four main types of lisps, each with their own characteristics. While some minor speech issues may resolve on their own, many lisps require intervention. Treatment typically involves speech therapy to correct tongue placement and improve articulation. It is important to note that lisps have no bearing on a person's intelligence or cognitive abilities.

Types of Lisps

- **Frontal (interdental) lisp:** A frontal lisp occurs when the tongue protrudes between the front teeth while speaking. Often times, /s/ and /z/ sound like /th/. For example, a child with a frontal lisp might say "thoup" instead of "soup," or "thebra" instead of "zebra." Frontal lisps can be developmentally appropriate until approximately 4.5 years of age (there is no guarantee these will resolve on their own).
- **Dental lisp:** A dental lisp occurs when the tongue pushes against the back of the top front teeth when producing /s/ and /z/. Unlike the frontal lisp, the tongue does not extend past the front teeth. The airflow is directed forwards in the mouth making the child's speech sound muffled. Dental lisps can be developmentally appropriate until approximately 4.5 years of age (there is no guarantee these will resolve on their own).
- **Lateral lisp:** Lateral lisps occur when air is directed over the sides of the tongue and into the cheeks during the production of /s/, /z/, /ch/ and/or /j/. This makes the child's speech sound slushy and wet. Lateral lisps are not observed in typical speech development.
- **Palatal lisp:** Palatal lisps occur when the middle of the tongue makes contact with the roof of the mouth when producing /s/ or /z/. This creates a distorted sound. Palatal lisps are not observed in typical speech development.

The Importance of Early Intervention

Most children with lisps benefit from speech therapy services. Early childhood is a critical period for speech and language development, making it the ideal time for intervention. Without intervention, speech sound errors can become ingrained and habitual over time, making them challenging to correct later in life. These errors can persist into adulthood and negatively impact a person's self-esteem and confidence.

The frequency and intensity of intervention for lisps varies. Influencing factors include:

- Age of the child
- Severity of the lisp
- Child's insight and awareness of lisp
- Child's understanding of instructions and cues
- Level of engagement during therapy sessions
- Consistency of home practice