Literary Review

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Robyn Merkel-Walsh (Diamond MYO, Mouths in Motion Mentoring, Ridgefield, NJ)

Contact Author
Robyn Merkel-Walsh, MA, CCC-SLP, COM®
480 Bergen Blvd. Suite 3, Ridgefield, NJ 07657
Email: Robynslp95@aol.com

Suggested Citation
DOI: 10.52010/ijom.2022.48.1.3

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LITERARY REVIEW

Review of A Trip to The Land of Funny Animals: Oral Motor and Myofunctional Exercises for Toddlers by Hilit Brown

Robyn Merkel-Walsh, MA, CCC-SLP, COM®
Diamond MYO, Mouths in Motion Mentoring, Ridgefield, NJ, U.S.

Abstract: The book A Trip to the Land of Funny Animals: Oral Motor and Myofunctional Exercises for Toddlers by Hilit Brown (illustrated by Karin Berenshtein) is reviewed by a Certified Orofacial Myologist®. The review lists several strengths and weaknesses of the book and concludes that it may be a useful addition to a therapist’s “toolbox.” Parents are cautioned to work with a speech therapist before implementing the exercises for further instruction and guidance. In addition, the activities are more appropriate for children closer to the age of 4 years rather than toddlers (ages 1–3).

Keywords: oral motor exercises, orofacial myofunctional therapy, carryover, parents, pediatrics

This 32-page paperback children’s book was immediately intriguing as a first of its kind format, incorporating specific oral motor exercises into children’s literature. However, the title immediately raised concerns. As this reviewer has published previously (Merkel-Walsh, 2020), orofacial myofunctional therapy is appropriate for children ages 4 and older and this book is targeted to toddlers. The author seemingly acknowledges this by stating “voluntary movements based on imitation of speech organs can be challenging for toddlers” and suggests repeated practice and seeking the support of a speech therapist.

The author, Hilit Braun, “is a speech therapist with a B.A. in Communication Disorders, a B.A. in Behavioral Sciences, and an M.A. in Labor Studies. She works with children, teenagers, and adults in the areas of communication, language, speech and the functions of the mouth.” This review considers whether this book is a helpful addition to therapists and parents when working with toddlers (ages 1–3) who have orofacial myofunctional disorders.

Overall, the concept of this book is appealing. This review considers both its strengths and weaknesses.

Strengths

- This book is nicely illustrated with appealing colors and vibrancy.
- It has a diverse cast of characters with ethnic diversity. Children of various races and ethnicity will feel included.
- The oral motor illustrations are exaggerated and “silly,” which appeals to young children in the author’s target audience.
- There are targets for jaw, lips, cheeks and tongue which covers many muscle groups.
- The book encourages joint attention (mutual focus to one activity), attention to the orofacial complex, imitation, and oral sensory awareness.
- The book supports the proper labial and lingual placements on a straw. Straws are common tools in orofacial myology that support jaw stability, lip rounding and tongue retraction and can be used to mitigate myofunctional concerns in younger populations.
- In the “Crocodile Johnny” section, there is a note on how to properly execute the task. This is helpful as parents may not know what to look for.
- The author’s inclusion of specific exercises considers the scope of practice in orofacial myology such as strength and resistance training and swallowing.

Weaknesses

- If the parent is performing the exercises incorrectly, without jaw-lip-tongue dissociation or with compensations, the book will not be goal directed (Marshalla, 2020).
- The book lacks guidance on how to do most of the exercises correctly. The above referenced “Crocodile Johnny” was not consistent throughout the publication.
- While the author’s book description targets myofunctional targets, some exercises are extraneous oral motor tasks and seem to fall under the rubric of non-speech oral motor Exercises (NSOME), which have been previously criticized in the literature (Bahr & Rosenfeld-Johnson, 2010).

Correspondence: Robyn Merkel-Walsh, MA, CCC, COM®, 480 Bergen Blvd. Suite 3, Ridgefield, NJ 07657, Email: Robynslp95@aol.com

Received June 8, 2022; Accepted July 7, 2022

https://doi.org/10.52010/ijom.2022.48.1.3
The book suggests a “stick” and a trick of “shoving the stick right in”. The reviewer was confused regarding the goal of this task and how to do the task, and was worried that this could be dangerous.

The stick was mentioned again with the giraffe for assisting elevating the tongue outside of the mouth. Oral motor exercises outside of the mouth can also be viewed as an NSOME. The task would be more goal directed if the tongue was lifted to the palate, or tongue tip to the alveolar ridge in a more specific fashion for myofunctional goals such as: lingual alveolar phonemes, tongue to the spot or improved oral resting posture.

The book is missing page numbers, making it challenging to refer to a specific task listed in the story.

Seemingly this book was designed for parents, to read along with their children and model the prescribed oral motor exercises in an imitative model. “The adult reads the book in a practical matter, demonstrating the exercises for the toddler and mutually imitating the exercises.” The author suggests using a mirror, dolls and stuffed animals to make the book practical during play amongst her list of directions. The directions were not as thorough as they could have been; as the book progresses, tactile tools (stick) and bubbles were required. A bulleted list of suggested items would be beneficial to maximize the effectiveness of the product. In addition, it refers to having the assistance of a therapist, but it was not clear what the credentials should be. A speech-language pathologist (SLP) with proper training in orofacial myofunctional and/or oral-motor disorders would be best suited to assist with supporting the patient and parent/caregiver who will be reading the book.

The author gives some brief explanations on the importance of oral function such as breathing and swallowing; however, some of the terminology could be ambiguous or confusing to parents. For example, the author discusses the use of “accessories” for “assistance” that toddlers may need. Reading this as a seasoned therapist presumes that accessories include such tools as bubbles or tongue depressors, but a parent may be unfamiliar what an accessory may be. In addition, the author describes specific parameters for some of the orofacial myofunctional tasks, but not all.

From the perspective of a Certified Orofacial Myologist® (COM®), this book can be easily used in therapy and the exercises modified for each patient using tactile cues, tools, and therapeutic strategies. Oral motor therapy is an umbrella term that ranges from passive to active strategies. An experienced SLP trained in pre-feeding and oral-placement therapies can easily adapt this book for younger toddlers by adding tactile tools to make these movements more age appropriate by using sensory motor mapping (Morris & Klein, 2000; Overland, 2010). For older toddlers and children, SLPs and registered dental hygienists who are appropriately trained in orofacial myofunctional therapy would be able to modify some of the tasks to keep it goal specific to the patient’s needs.

In summary, this book can be a part of a therapist’s “toolbox,” but its main target audience is for parents. The book should be reviewed between the clinician and the parent and demonstrated in therapy, because if left to independent parental interpretation, there may be extraneous oral motor movements or improper use of myofunctional “accessories” without clear instructions.

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