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Pragmatics and Social Communication: Assessment

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Pragmatics and Social Communication

PART 1: Assessment

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Disclosure Statement

Financial –
Author, *The Pirate Who Couldn’t Say Arrr*
Author, *Simply Social At School* (Super Duper Publications)
Author, contributes various works on “TeachersPayTeachers”
Author, *Spelling That Makes Sense*
Presenter, receiving an honorarium for today’s workshop
Non-Financial – None

Learner Objectives

- List the considerations involved in using a standardized measure of pragmatic language knowledge.
- Identify the components of social communication as outlined by ASHA.
- Describe the impact of screen time on the development of social communication abilities.
- List at least three important questions or factors to consider related to differentiation of pragmatic difficulties from related areas of disability.
- Define at least three key terms that relate to early social communication.
ASSESSMENT:

- The question should not be “is this behavior present (yes or no)?”, but WHEN is the behavior appropriate vs. inappropriate.

- Absence of evidence is not evidence of absence

- Standardized assessments of pragmatics do not take into account stressors in an academic environment like…

  - Interactions with peers
  - Sensory stressors
  - Impulse control
  - New and novel situations
  - Non-predictable routines and environments

  - Inconsistent structure
  - Peer Interactions
  - Disinhibition
  - Emotionality
Code of Federal Regulation 300.304

- Use a variety of assessment tools and strategies to gather relevant functional, developmental, and academic information.

- Do not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability and for determining an appropriate educational program for the child.

- Use assessment tools and strategies that provide relevant information.

Components of Social Communication

- Social Interaction
- Social Cognition
- Verbal Language
- Nonverbal Language
- Language Processing

Medical Diagnosis:
- A medical diagnosis helps determine medical and/or pharmacological needs and/or rule out genetic syndromes, related conditions or comorbid diagnoses with similar symptoms...
  - Prader-Willi Syndrome,
  - Fragile X Syndrome,
  - Angelman Syndrome,
  - Landau-Kleffner Syndrome,
  - 22q deletion,
  - Reactive Attachment Disorder,
  - Obsessive Compulsive Disorder,
  - Seizure Disorder
  - Selective Mutism,
  - Traumatic Brain Injury,
  - Post Traumatic Stress Disorder,
  - Bipolar Disorder,
  - Anxiety,
  - gastrointestinal problems
  - ADHD

Educational Classification:
- Includes information about academic achievement
- Notes any adverse effect on functional performance
- Is designed to provide the foundation for writing an IEP

Misdiagnosis:
- “… misdiagnosis may be as high as 15-20%” (Dr. Barry Prizant, Autism Quarterly, Summer 2012)
- “13% of children who were diagnosed with autism spectrum disorders lose their diagnosis later” (The Center for Health Statistics)
- A 2012 study published in the Journal of Developmental and Behavioral Pediatrics, found that 4 percent of children lost their diagnosis by age 8.
- In a Yale Child Study Center report, it was noted that “toddlers with delayed language development are almost identical to their autism spectrum disordered counterparts in their use of eye contact to gauge social interaction”.
Incidence and Prevalence:

- According to the CDC, in 2014 the prevalence of Autism in U.S. children increased 119.4% from 2000-2010.
- According to the U.S. Department of Education National Center for Educational Statistics, in the 2000-2001 school year the number of students age 3-21 receiving special education for Autism was 93,000... In 2011-2012, it was 455,000.

1975 – 1 in 5,000
2005 – 1 in 500
2008 – 1 in 168
2010 – 1 in 110
2012 – 1 in 88
2014 – 1 in 68
2017 – 1 in 45

Screen Time:

- In 2011, 38% of children eight and under were using tablets or smartphones. In 2013, it increased to 72%.
- In 2013, 40% percent of kids under the age 2 were using tablets or smartphones before they could speak.
- Screen time negatively impacts the development of...
  - problem-solving skills
  - face-to-face interactions
  - self-regulation
  - eye contact
  - reading comprehension
  - being physically active from a sensory perspective
  - learning how to deal with things that are out of their control
- “Virtual Autism”
Is the student breaking a social rule they do not LIKE, do not AGREE with and/or are unable to STOP themselves from breaking OR are they breaking a social rule they do not KNOW?

Once they learn the rule, do they continue to break it? If so, why?

What is the pervasiveness of the difficulties? Is it specific to certain topics, times of day, settings, people or location?

**Self-Regulation:**
The ability to stop, inhibit and/or change your behavior or emotions, persist through things that are hard, ignore distractions and consider consequences before committing to an action.

**Means to an End:**
Understanding that a certain word or behavior will achieve a desired outcome.

**Imitation:**
Imitating words, actions, facial expressions, songs, fingerplays, gestures, etc. NOTE: You imitating the student is often the first step.

**Joint Attention:**
A shared focus towards an object, each other or another person.
**Link between Behavior and Consequence:**
If _____, then _____.

**Nonverbal performatives:**
Nonverbal skills including gestures, facial expressions, giving, showing, pointing waving, and much, much more!

**Responding to adults/peers:**
- protest
- comment
- label
- request

**Play:**
- onlooker
- parallel
- associative
- cooperative

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**Top 10 Early Social Communication Recommendations (especially in classrooms)**

1. Five words at a time/core words
2. K.I.S.S.
3. Predictable routines
4. Choice of two
5. Imitation
6. Sabotage
7. Books (especially repetitive books)
8. Sensory breaks
9. See it say, it
10. I start, you finish
THANK YOU!

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