

# Communication

Jim Mancini, MS CCC-SLP

# Communication!

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Communication is part of our everyday lives,

Our communication skills change given different variables, including our emotional states and by factors present in the environment

Strong emotions impact communication skills in all of us (e.g. when anxious or angry we can struggle with communication)

Communication skills can be significantly impacted in people with mental health conditions (even without IDD)

People with IDD including those with language delays/differences with mental health conditions can impact access to typical mental health strategies

# Domains of Communication

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**Language**  
- Receptive  
- Expressive

**Speech**  
- Articulation  
- Oral Motor skills

**Fluency**  
- Stuttering

**Voice**

**Social  
Communication  
(Pragmatics)**  
- Nonverbal  
- Social Use of  
Language

# Nonverbal Communication

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Studies have indicated that nonverbal communication accounts for up to 75% of social communication

- Gestures (e.g. pointing, waving, shrugging, descriptive gestures)
- Eye Contact (e.g. social referencing, joint attention)
- Facial Expression (in part to communicate emotional state, expression and interpreting)
- Physical Proximity, body language
- Paralinguistics – tone, prosody, intonation, inflection

# Social Communication

- Requesting
  - Things/Actions
  - Permission
  - Information
- Protesting
- Commenting/Showing Off
- Greeting/Taking Leave
- Clarification
- Persuasion/Negotiation
- Self - Advocacy
- Problem Solving
- Understanding thoughts & perspectives of others (and how they differ from own thoughts)
- Emotions (understanding & expression)
- Humor, sarcasm, nonliteral language
- Coordination of verbal and nonverbal

# Social Communication: Conversations

- *A reciprocal conversation involves:*
  - Attending to others
  - Accessing personal knowledge (through experience)
  - Responding to the questions or comments of others
  - Relating personal stories
  - Asking *relevant* questions to the topic
  - Staying on topic
  - Turn taking (Interrupting or not taking turn)
  - Modifying conversation based on partner
  - “Reading” intentions/nonverbals
  - **Executive Functioning Requirements**



# Echolalia/Scripted Communication

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- Echolalia - Literal repetition of others' speech either immediately (***immediate echolalia***) or later (***delayed echolalia***).
  - May serve a variety of communicative functions, and, not unlike imitation for typically developing children, it may be a productive language learning strategy for many children with autism (atypical development).
- Scripted Communication – Use of words/phrases/sentences that are learned wholistically and can be used verbatim during specific situations (“I don’t know”)
  - Positive or effective scripts (“I’m doing the best I can”)
  - Negative or ineffective (“I’m gonna hurt you”)

## Communication Functioning Level

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- Prior to beginning treatment, gather information about client's communication strengths and challenges
- If on an IEP, communication assessments and IEP goals should provide information; contact current SLP for additional information
- Some clients may have history of or currently in community-based speech-language therapy
- Be sure to gather information related to both receptive and expressive communication
- If no information is available and there are concerns related to communication, request an evaluation (school or community)

## Promote success in comprehension

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- Use explicit instructions and plain language whenever possible; define terms clearly (e.g. what is advocacy; independence)
- Avoid using vague or abstract terms; try to use clear, concise language to avoid misunderstanding or misinterpretation
- Consider other modalities; reading/writing may be more effective than spoken language (or use both); use of visual supports
- When teaching a strategy, use a “repeat back” strategy to insure client has understood and not just “yessing”

# Visual Supports

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- Visual Schedules to help with predictability (can be written or pictures)
- Use of writing/reading; written reminders to use skills
- Pictures that demonstrate use of calming strategies
- Augmentative/Alternative Communication (AAC) – not just for non-speaking individuals
- Social Stories

# Communication & Behavior

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- What role does an individual's communication abilities/difficulties play with regards to behavior?
- What communication skills do we teach in place of challenging behaviors?

# A Common Profile

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Child possesses adequate verbal skills though communication skills decrease when child becomes agitated, anxious, or overwhelmed

- May try to communicate initially
- Escalation can include arguing, swearing, threats
- Emotional dysregulation leads to drop in communication skills
- Behavior occurs when communication has not been effective

# Complex Behavior – 2 Sets of Goals

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## Goals when child is NOT engaging in challenging behavior:

- Increasing vocabulary and grammar.
- Increasing understanding and use of non-verbal communication.
- Increasing social communication skills (conversations) \*goals should always align with the goals of the individual

## Goals when child IS engaging in challenging behavior:

- Teach functional communication based on results of a functional behavioral assessment.
- Teach scripts that can be utilized when child is frustrated (e.g. “ I need a break”).

# SLP or ABA??



# Collaboration!

