VOL. 21, NO. 2 SUMMER 1989

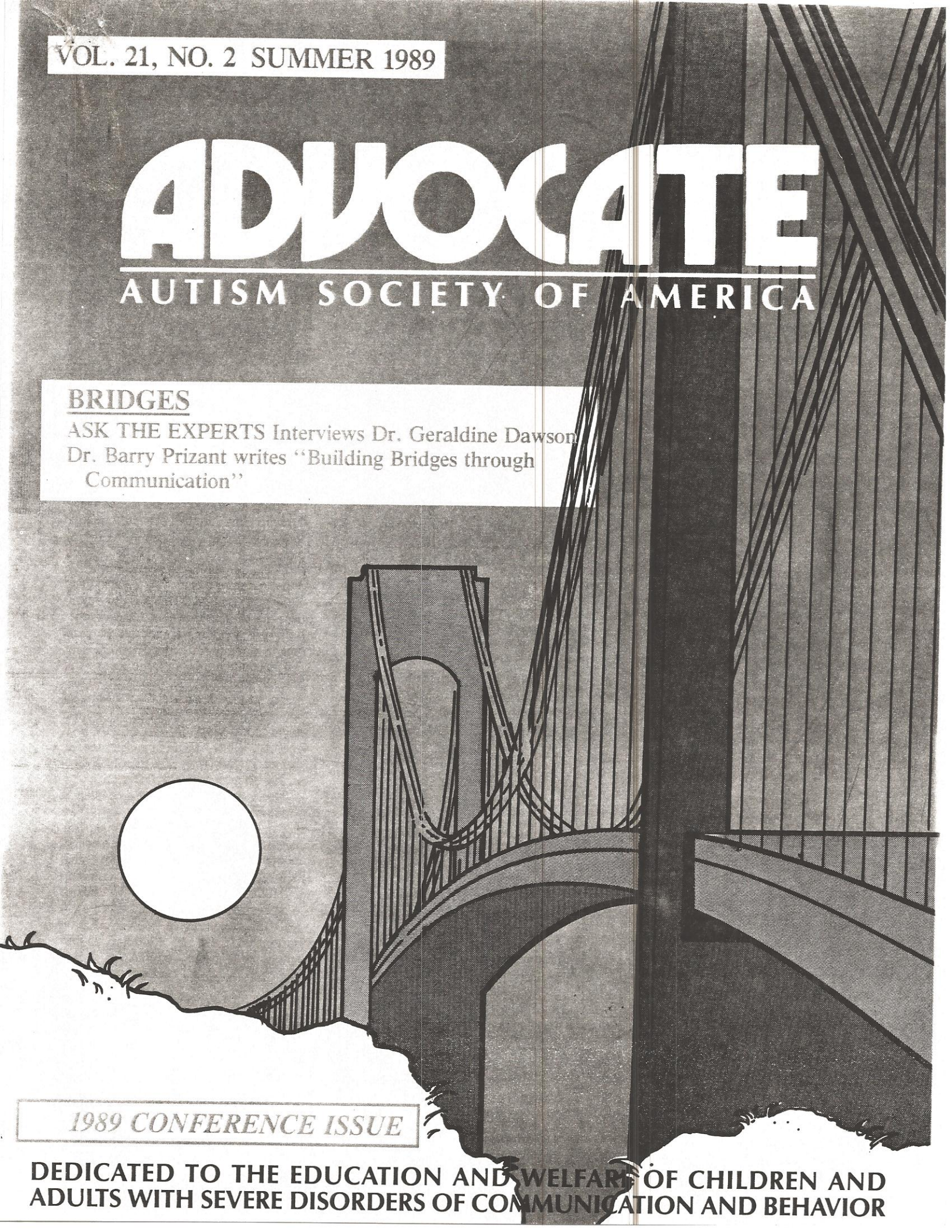
ADVOCATE

AUTISM SOCIETY OF AMERICA

BRIDGES

ASK THE EXPERTS Interviews Dr. Geraldine Dawson

Dr. Barry Prizant writes "Building Bridges through Communication"



1989 CONFERENCE ISSUE

DEDICATED TO THE EDUCATION AND WELFARE OF CHILDREN AND ADULTS WITH SEVERE DISORDERS OF COMMUNICATION AND BEHAVIOR

Building Bridges Through Communication

by Dr. Barry Prizant, Ph.D.

Since Dr. Leo Kanner's early description of autism in his now classic 1943 article, parents and professionals have come to recognize language and communication impairments as central to an understanding of autism. Currently, efforts to increase communication and language abilities are considered to be an essential thrust of appropriate educational and treatment programs for persons with autism of all ages.

The development of language and communication ability is closely related to many other aspects of an individual's development, including social development, and one's developing sense of self-image and self-esteem. This is obviously true for all persons with or without disabilities.

Communication impairments have a great impact on persons with autism, because communication is a fundamental bridge between human beings, and is crucial to the development of mutually satisfying relationships.

Fortunately, great gains have been made in understanding communication impairments in autism, and in approaching the challenge of helping persons with autism to communicate more effectively.

In this discussion, recent directions concerning enhancement of communication abilities for persons with autism will be considered, especially in reference to how current developmental knowledge is having a profound impact on education and treatment.

Three general categories of knowledge have contributed greatly to recent approaches in communication enhancement for persons with autism. These include knowledge about normal development of communication and language, about the role of the learner and the environment in communication development, and about the nature of autism and the effect of impairments in autism on communicative growth.

First, knowledge about normal development of communication and language has helped to provide a framework for assessment and communication enhancement. For many years, descriptions of language and communication in autism included impressionistic and negatively skewed descriptions such as the presence of psychotic speech, deviant and bizarre language, self-stimulatory speech and others. In general, persons with autism were described as non-communicative and non-interactive.

Over the past decade, literature on the development of language and communication has emphasized the broad range of behavior, both conventional and unconventional, that must be considered a part of a person's developing communicative competence. The word "developing" is significant, because for people with autism, as for all of us, the ability to communicate is not static.

Regardless of age, there is the potential for change and growth. This literature and research has emphasized the continuous progression in communication development from pre-verbal communication (i.e., communication before language) to communication through language.

In other words, the use of speech for communication is built on a foundation of gestural and vocal communication prior to speech. Thus, a greater understanding has developed that speech is not the only acceptable mode of communication, and that many persons communicate without speech, both in socially acceptable and appropriate ways (e.g., gestures, body orientation, facial expression), as well as in socially unacceptable ways (e.g., aggressive behaviors for protesting, screaming for rejecting, etc.).

Earlier approaches to training language, especially those that focused narrowly on speech training, often ignored an individual's full range of communicative behavior and levels of communication. Unfortunately, many persons with autism were subjected to years of speech training (e.g., imitation of sounds or simple words) when such training was developmentally inappropriate relative to their level of comprehension and communication ability.

Current approaches incorporating developmental principles begin with assessment of a full range of communicative behaviors that may be observed. Furthermore, the purposes for which an individual is attempting to communicate (e.g., requesting objects or actions, protesting or rejecting, requesting social interaction, commenting, etc.) must also be documented across a wide variety of environments and situations in order to get a complete picture of how a person communicates, with whom he or she communciates, and under which circumstances communication is most successful. Additionally, observations of the most challenging situations for communication, as well as documentation of a person's communicative needs across a variety of everyday life situations, is essential for planning strategies for appropriate communication enhancement.

Earlier approaches to "training" language dictated that the "trainer" was responsible for determining what was to be learned, how it was to be learned, and what behaviors or responses were judged to be acceptable or unacceptable. This often resulted in "compliance" training or respondent training, which in our clinical experience, has resulted in a lack of initiative, and even extreme passivity for many individuals.

By focusing efforts at the levels of an individual's ability to communicate, communication enhancement efforts then build upon strengths, rather than simply addressing deficits or focusing solely on difficulties.

While the ultimate hope is that an individual will acquire speech for communication, which is the most conventional mode of communication in our culture, developmental approaches recognize that for many individuals with autism, non-speech communication may be the most effective and efficient mode. This may include natural gestures, picture communication boards or books, sign language, and possibly even voice or print output electronic communication systems.

The primary impetus for selecting a non-speech mode or a combination of modes of communication is to increase the ability of an individual to communicate spontaneously in different environments, and to help individuals understand the impact of their communicative attempts, which may then further increase motivation to interact and communicate with others.

The developmental literature has also emphasized that for individuals who learn to speak, there may be different

continued on page 16

BUILDING BRIDGES. . .

(continued from page 15)

paths to speech and language development. Most children begin by using single words and then gradually "build" more complex utterances of two words, then three words, etc., with an understanding of the meaning and function of these words.

Other children, albeit a small minority, rely heavily on memorizing "chunks" of speech with minimal initial understanding. This latter style, referred to as a "gestalt" style of language acquisition and use, is commonly observed in the immediate and delayed echolalia, and memorized phases of persons with autism who speak. This literature, along with supporting data examining immediate and delayed echolalia in autistic children, has demonstrated that echolalic speech, previously considered meaningless and nonfunctional, is often used functionally by persons with autism who demonstrate echolalia early in development. This is important because it has been estimated that echolalia is observed in 75 to 85% of persons who acquire speech.

Furthermore, recent studies have demonstrated that echolalia is an essential part of the process of speech and language acquisition for those individuals who move on to more creative and generative language.

Thus, the language learning style of persons with autism may represent an extreme form of the "gestalt" style that has been identified infrequently in normally developing children. The implications are clear: echolalia should be viewed as a part of linguistic and communicative development, rather than as an obstacle to it, as has previously been suggested.

Furthermore, because echolalia sometimes occurs when an individual does not understand what is being said to him or her, or during states of fatigue or high distractibility, its production should signal the listener that they need to repeat, paraphrase, simplify, or adjust their communication in some way so as to help maximize comprehension.

These adjustments may include the addition of gestures, or even alllowing a person a greater amount of time to process what was being said. In other instances, immediate or delayed echolalia often represents clear attempts to communicate.

Acknowledging a person's intentions, with subsequent simplification or paraphrasing of what has been said, provides the necessary feedback to help foster further growth in language development.

Recent approaches to language and communication development also have placed greater emphasis on the active role of the learner in communication development, in this case the child, adolescent or adult with autism. For years, approaches to training language and communication viewed children as passive recipients of information.

Earlier approaches to "training" language dictated that the "trainer" was responsible for determining what was to be learned, how it was to be learned, and what behaviors or responses were judged to be acceptable or unacceptable. This often resulted in "compliance" training or respondent training, which in our clinical experience, has resulted in a lack of initiative, and even extreme passivity for many individuals.

Training often focused on labeling pictures or responding to questions preselected by the trainer rather than recognizing what motivates communicative attempts.

Viewing persons with autism as active learners changes the role of clinicians, educators and parents from "trainers" of communication, to "facilitators" of communication development.

Following this model, it is the clinician's, educator's or parent's responsibility to structure opportunities for learning and actively build upon and shape goal-directed actions or communicative attempts.

As noted, a person's current level of communication, as well as his/her communicative needs must be determined by analyzing successful and unsuccessful communicative exchanges in natural, everyday situations, and determining priorities based upon current communicative levels and communicative needs.

Additionally, by being sensitive to an individual's level of language comprehension, as well as his/her communicative behaviors and motivations, an important part of communication enhancement is the appropriate adjustment of language and communicative behaviors when communicating with persons with autism. Use of language or communicative signals that are too advanced for a person's level of ability, may actually result in further avoidance or withdrawal from communicative interactions.

Current knowledge about the nature of autism also has contributed to communication enhancement efforts. This literature has emphasized that an uneven profile of learning strengths and weaknesses is partially definitive of the syndrome. It has been documented repeatedly that persons with autism demonstrate relative abilities in rote memory, visual-spatial and configurational problem solving, and for some individuals, specific musical skills.

Relative disabilities are in communication and social interaction, symbolization, and the ability to express emotions in a conventional manner as well as understand the emotions and intentions of others.

In general, strengths tend to revolve around knowledge about the inanimate (non-social) world and weaknesses revolve around knowledge of the social world, including interpersonal interaction, and social conventions of behavior.

These recent changes in understanding patterns of abilities and disabilities in autism indiciate that efforts to understand and enhance communication *must* be guided by addressing the learning strengths of persons with autism. Thus, abstract concepts such as time may be depicted through picture schedules or time boards, thus taking advantage of the strengths of most persons with autism in processing visual as opposed to auditory information.

The knowledge of daily routine and event structure that may develop from presenting information in the visual modality in and of itself often provides increased motivation to communicate.

Finally, the communication problems observed in autism, and the challenges we face in enhancing communication abilities has led caregivers and professionals to reconsider the essence of what communication is. In the most basic sense, communication is sharing. It is sharing wants, desires, observations, frustrations, fears and emotions. It is also control, or at least the opportunity to state one's opinion.

Communication involves an expression of one's knowledge of the world,

continued on page 20

Free Software Given to Charities by Seattle Computer Company

reprinted from the Chronicle of Philanthropy

Many charities across the country can get free computer software from a company in Seattle.

The Aldus Corporation is offering two free packages to charities: Aldus PageMaker, a desktop publishing system that is available in several versions for different personal computers, and Aldus FreeHand, a graphics program available only for the Apple Macintosh.

"So far, we've been able to give software to everybody who's asked and who's been qualified," said Dianne Nicholson, the company's director of corporate contributions.

To qualify to receive software, a group must be a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and must fit one of the following categories: a health, research, or service organization; an organization that assists children or the elderly; an environmental group; a cultural organization; or a federation of charities, such as a United Way chapter. Religious groups are not eligible.

"Most non-profits do some form of newsletter, write grant proposals, etc.," says Ms. Nicholson, who says that the software packages save time and money. "We get letters from people who say they spend $200 a month getting their newsletter typeset."

Organizations that are given free software are also entitled to "registered-user benefits" from the company. Those include 45 days of free technical advice, as well as the option to trade in the software when an upgraded version becomes available.

"There is usually a nominal fee of less than $100 for the upgrade," says Ms. Nicholson, "but it brings them up to the most current program available on store shelves."

The charities also receive *MasterPages*, a monthly publication from Aldus Corporation that offers tips on using the computer programs.

"It's almost like being a stockholder," says Ms. Nicholson. "The charities get all the latest information.

Begun in early 1988, the program falls under the corporate-contributions department of the company, which also makes grants to four-year educational institutions in Washington State. The company sent out 207 software packages to non-profit groups in the fourth quarter of 1988, and 130 so far in the first quarter of 1989.

For more information contact Ms. Nicholson, Director of Corporate Contributions, Aldus Corporation, 411 First Avenue South, Suite 200, Seattle, WA 98104.

BUILDING BRIDGES. . .

(continued from page 16)

for example, of the trip to the zoo yesterday, or the neat way that lunch always manages to start at noon (or so we hope!), or of the expression of anger or confusion that is experienced when lunch is late.

Communication is bodily expression, a certain look, a push of the hand to the juice, or the production of sounds which may or may not include recognizable words. It occurs when one intends to have specific results and other times not necessarily so.

A child's smile may communicate to us that he is relaxed and comfortable in a situation, and is enjoying it, yet he may not intend to communicate that to us. On the other hand, a person may clearly intend to communicate that he does not want a drink, does not want to sit in a chair, or does not want a certain puzzle to be put on a certain shelf.

Communication is also a dance. When partners are in step, it should involve a graceful, synchronized exchange of feelings, attitudes, desires and knowledge. As we all know, the dance is far from perfect for any of us trying to communicate with each other. For persons with autism, learning the dance is fraught with difficulties. (These problems are attributed to a biological/neurological dysfunction or difference, resulting in limitations in social and communicative competence.) However, a successful dance most often involves two or more partners.

Communicative partners of persons with autism must also take responsibility for the dance to be successful, not through rigid control, but through careful observation and gradual adjustments.

Thus, the dance of communication with persons with autism must involve negotiation, and to the extent possible, a mutual sharing with sincere efforts to help persons with autism modify their steps and style so that they can communicate successfully with many persons.

This can only occur, however, if we approach the task with open mindedness and respect for both the abilities and interests of persons with autism, as well as the challenges they face in attempting to be actively involved in the very difficult process of social communication.

This discussion is based on the chapter, Prizant, B.M. & Wetherby, A.M. (1989). Enhancing language and communication in autism: From theory to practice. In G. Dawson (Ed.). **Autism: Nature, diagnosis and treatment**. New York; Guilford Press. The contributions of Dr. Amy Wetherby are acknowledged.

The following recent references on communication enhancement may be of interest to readers:

Prizant, B.M. & Schuler, A.L. (1987). Three chapters on "Facilitating Communication" in D. Cohen and A. Donnellan (Eds.). **Handbook of autism and pervasive Developmental Disorders**. New York: Wiley.

Watson, L., Lord, C., Schaffer, B. & Schopler, E. (1989). **Teaching spontaneous communication to autistic and developmentally handicapped children**. New York: Irvington.

Miller, P. (Ed.) (1099). **Autism: Ecological issues in intervention**. Quarterly issue of **Topics in Language Disorders**. December.

Layton, T. (Ed.) (1987). **Language and treatment of autistic and developmentally disordered children**. Springfield, IL: Charles Thomas.

Barry M. Prizant, Ph.D., CCC-SLP
Director, Communication Disorders Dept., Bradley Hospital
Associate Professor of Psychiatry and Human Behavior
Div. of Child and Adolescent Psychiatry, Brown University Program in Medicine