

The Role of the School Speech Language Pathologist and the Student with Autism

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Speech language pathologists (SLPs) sometimes wonder what role they should perform when asked to provide services for a student with an autism spectrum disorder (ASD). Parents may equally wonder what types of services they should request or approve for their son or daughter. Since individuals with ASD vary across the many dimensions of communication, such as ability to talk, to communicate basic needs, or to engage in conversation, a single answer is not possible. Instead, it is feasible to review a menu of options and related ideas that may impact the selection of a delivery of services to meet individual needs.

Qualitative Communication Impairment—By Definition

As a starting point, it may be appropriate to begin with a set of questions:

- Does the student with ASD have a communication problem?
- Does he or she need the services of a school speech language pathologist?
- Does this need for special services also apply to the student who is high functioning, that is, a student who has average or above average cognitive abilities?

The answer to all three questions is an unequivocal "yes." The degree of certainty emanates from what is known about the disability itself. A qualitative impairment in communication skills is considered to be a characteristic of an autism spectrum disorder. Even children who are verbal and high functioning still have significant needs in the area of social pragmatics. These children also often have difficulty with comprehension of text, narrative or story structure and the more complicated language demands associated with movement beyond the second grade. The need for services will be determined by the student's educational team based upon observations, appropriate assessment and interviews regarding skill levels. The objective is to determine whether the child's language/communication challenges impact his ability to progress within the curriculum. Being able to communicate in the right fashion at the right moment everyday would seem to be an important criteria for an educational outcome.

Services May Be Necessary But Direct Services Are Not Always Mandatory

Having qualitative communication impairment does not mean that each individual with ASD automatically requires direct or personally administered services by a speech language pathologist (SLP). Instead, it should mean that the SLP is familiar with each student and that the SLP works with each family and the school staff to plan and to customize a communication program which meets each student's needs.

Options for Individualizing a Program

There are several options or models for the provision of communication services to the student with ASD. This publication presents brief information about direct service, consultation and collaboration, and discusses other intensive roles that might be performed by the SLP. Following the discussion of models and roles, hypothetical case studies will illustrate how customized programs might be developed for individuals with differing needs.

The following is an overview of the options or models for providing services:

Direct Service Model—Pull-Out or Push-In

(Pull-out services—the child is taken from the classroom setting to another location.)

(Push-in services—services are provided in the classroom either one-on-one or in a group setting).

- Services are provided to a student by the SLP or by a speech/communication assistant, a paraprofessional under the supervision of the SLP.
- Services may take place in a separate room in the school, in the classroom, in the community, or in a
 combination of settings. With very young students or students with severe medical conditions, services may even
 occur within the home environment.
- Services may be one-on-one, in a group setting, or both.
- Services might include assessment (testing), and the instruction, practice, monitoring, and generalization of language/communication skills training. Examples of the many services include:
 - Observing in various environments to obtain functional assessment information about interaction skills;
 - o Observing in the classroom to check for generalization of skills;
 - Assessing vocabulary comprehension and use through formal and informal means;
 - Teaching someone to use lower volume control, that is, to speak with average or decreased volume (or to speak louder, if that is the problem);
 - Teaching someone acceptable ways of requesting peer or adult attention;
 - Teaching someone to understand when a question format requires a time-related response;
 - Teaching someone to signal when he or she wants to change topics during a conversation;
 - Teaching an AAC user to navigate though successive pages to generate a single message.
 - Teaching someone how to pragmatically use their communication device in a variety of situations with varying partners and with different communicative messages;
 - Teaching phonological awareness to a child who is struggling with reading.
 - Teaching a student to understand story structure.
- Generalization of skills is always a concern when using this model, especially for services that only take place in a therapy room. That does not mean, however, that pull out services (i.e., services in a therapy room) should never be provided on a short- or long-term basis. Instead, it means selecting the best option for a specific situation. Sometimes students may be too distractible or be unable to clearly hear the speech pathologist's instruction with a given level of classroom noise in the background.

Consultation Model

- Consultation can include a variety of activities. Before an individualized education program (IEP) is completed, a team discussion with clarification of roles and expectations regarding the consultant's services is necessary.
- Sometimes consultation services have a major collaborative or partnership component. (See Collaboration Model below). The team may think that services are best delivered by the classroom staff with some coaching and directions from the SLP.
- In other situations, a consultant uses an expert service delivery model. In this role, the service is, as needed, or on a one time basis, and is usually not on-going on a scheduled basis.

- Activities could include the following:
 - Someone has a problem and the SLP is requested to observe, evaluate the student, and provide suggestions to the teacher. Sometimes a consultation is requested in response to a challenging situation.
 - Consultation also can be used in a proactive manner. For example, an SLP may observe the effectiveness of a teacher's discourse or oral communication with a class during group instruction. The SLP might make suggestions that could improve the attending behavior or verbal comprehension of the student with an autism spectrum disorder as well as other students in classroom.
- Consultation services also may represent a means of monitoring a student's generalization of skills into everyday situations through intermittent checks with a teacher.
- SLP consultation services may be combined on the IEP with other service delivery options or roles, or instructional goals.

Collaboration Model

- Collaboration, like consultation, can vary and will need definition as it pertains to a particular student and his/her IEP. Collaboration can involve team planning and team implementation of a communication plan. The SLP, classroom teachers, and teaching assistants meet to plan specific activities. The SLP may or may not be in the classroom or community when activities occur.
- Collaboration could also include teaching a class or team teaching. Careful monitoring may be needed to insure
 that the student is given the designated amount of contact time or instruction specific to his/her goals when this
 option is used.
- Collaborative planning allows communication goals to be practiced throughout the school day. Potentially, more
 practice will occur each day than would occur if only a pull-out model (services in a therapy room) were used to
 teach a given skill. Data keeping is needed to insure that sufficient communication teaching or practice occurs
 during activities each day.
- A collaborative model has the potential to insure that communication is learned in functional or daily situations.
 Collaborative planning also must include adequate training and support of all persons who implement daily or weekly instruction.

Examples of collaboration include the following:

- Supporting the student with ASD and others during a classroom writing activity for the upcoming Young Author's Conference.
- With the classroom teacher, team teach a lesson about nonverbal communication.
- Attending a weekly problem-solving meeting that focuses on behavioral issues. (Communication and behavior are often intimately linked.)
- Designing topic communication boards that support a minimally verbal student during a classroom discussion and providing on-site support during the activity as a means of training the child's professional staff.
- Provide model lessons so teaching staff can observe how to best involve the child with ASD.
- Meeting with classroom teachers to discuss upcoming units in subject areas, the background knowledge students may need, as well as the visual supports and strategies that may be needed to aid comprehension.

Additional Roles

In addition to direct service, consultation, and collaboration, the SLP may perform other roles such as the support or management of the augmentative communication program for an individual with ASD, the provision of training to others, and advocacy for the student. Just as the various service delivery models or options could be used in

combination, so too may the various roles be combined with each other and with the various service delivery options. Example duties are listed for each role.

Example of Augmentative Communication (AAC) Support/Management Role

- Communication board development can consume much time. In order for students to participate in specific daily activities, mini-communication boards or specific overlays for activities need to be designed. The SLP may recruit or supervise volunteers to aid in the construction of materials.
- Electronic communication devices have become very sophisticated. Many hours of specific training and practice are usually needed before an SLP is able to program a student's electronic communication device. Often the SLP must be familiar with several different devices.
- Updates of vocabulary and specific messages are always needed for both electronic and nonelectronic communication devices. A student's desire to share some information may wane if he or she does not have the means for communicating that message.
- School staff and family need instruction on programming a device. It is advisable that more than one person know how to program a specific student's communication equipment. Training will need to occur when staff and family members can be available.
- Some staff and family also may need instruction in order to learn a core vocabulary of manual signs that may be used for short, quick communicative messages to the person who has an autism spectrum disorder. Signing may supplement the use of a communication board or device.

Example of Staff Training Role to Support AAC Student Communicator

- Training may be provided to classroom and specialty areas teachers (music, art, P.E.), the student's classmates, family members, instructional assistants, administrators, bus drivers, and others.
- Training may be a specific concentrated event such as a workshop that focuses on the use of visual backups to supplement verbal directions.
- Training also may be ongoing and occur in a more informal manner. In this type of training, the trainee may only be given small, manageable chunks of information on any given day.

Example of Advocacy Role for AAC Student Communicator

- Advocacy might be needed to gain support for an intervention method such as AAC, to identify additional
 opportunities for the student to contribute to the classroom discussion, or to achieve better staff understanding of
 a student's special needs. For example, the SLP might help other staff understand that acting out behavior will
 continue unless the use of better communication skills is taught and supported.
- Advocacy could take the form of soliciting funding for an electronic communication device.
- Advocacy also could involve the solicitation of a specific service for a student (e.g., an occupational therapy evaluation because the student has difficulty producing written communication).

Hypothetical Case Studies as Examples of Service Plans

A student's needs and opportunities for learning and practicing communication skills may change over the course of a school year. Parents, teachers, and SLPs may consider writing the IEP so that it specifies goals and the amount of time that will be spent by the SLP on a given student's case or needs during the course of a week, month, or semester (e.g., 1 hour of service per week). This is in contrast to the typical restrictive specifications which appear

on many IEPs in which both time and method of service delivery are specified, such as two 30-minute direct pull-out therapy sessions per week.

A student's needs may be more adequately met if a combination of service delivery methods is considered. A time-only specification on the IEP allows the SLP the flexibility of adapting to best meet the student's diverse needs on both a short-term or weekly basis, and on a long-term or school year basis. The time specification assures parents that a specific amount of time will be allocated for their son or daughter. The records kept by the SLP will document how time (e.g., one hour) was allocated each week. This documentation also verifies that the student received the total amount of service specified in the IEP. The concepts of time allocation and various service delivery options are illustrated by the following case scenarios. Without the flexibility to use service time as needed, some important activities might not occur.

Case #1: Joshua's Service Plan

Joshua has Asperger's syndrome. He attends third grade. He performs adequately in most areas at grade level but he struggles with comprehension of text. He is able to use speech in a fluent manner but it is not always socially appropriate.

Direct service:	The SLP teaches him perspective-taking in a one on one situation in the classroom; sometimes they meet in library which is near his classroom because it is more quiet. He also attends a group language class with 3 other peers that focuses on learning specific vocabulary for upcoming units of study within his 3rd grade classroom.	
	The SLP evaluates his language skills in more depth through formalized testing so that other challenge areas will not be overlooked.	
Consultation:	Periodically, the SLP observes during various classroom situations and on the playground. He meets with the classroom teacher and the resource teacher on a monthly basis to discuss Joshua's ongoing difficulties in social situations. Social skills training priorities are collectively identified for all staff so that informal and formal training occurs throughout the week.	
Training:	The SLP provides a workshop on the implications of perspective-taking problems to the school staff. This has the effect of training both present and future teachers.	
Advocacy:	The SLP combines several roles in working with Joshua's family. The main goal is to help his family be supportive when he engages in socially inappropriate behavior, i.e., to help his family avoid getting angry with him and helping them to see the need for teaching specific skills. His family members must view themselves as important partners in helping him develop better skills. The SLP develops video tapes which discuss and demonstrate how the family can help. The tapes are supplemented by phone calls and periodic meetings at school. The family may make some videos to show Joshua how to better manage disputes with siblings, for example.	

Case #2: Eric's Service Plan

	The SLP works with Eric to develop a personalized system of messages for the communication device that will meet his social and academic needs.
Augmentative Communication Support:	The SLP helps him learn to construct better grammatical sentences. This will also support him in eventually learning to produce written, i.e., typed text for assignments.
	The SLP teaches Eric strategies for managing conversations. Through field trips

	and planned activities with others, Eric practices his new and evolving skills with a variety of people, including his parents.
	The SLP helps Eric become efficient at retrieving stored messages such as greetings and asking important questions.
Training:	The SLP teaches parents, teachers, and volunteer staff how to program the communication device. She also teaches them to use software to design non-electronic topical communication displays that correspond to various one-time only activities.
Collaboration:	The SLP meets weekly with his classroom teacher and special education resource teacher to plan key lessons for the week and to discuss how to increase opportunities for Eric to engage in various activities via his new communication system. His SLP also participates in selective activities to monitor, teach, and model communicative behavior on his device for Eric, his classmates, and for the school staff.

In conclusion, a qualitative impairment in the communication area is a characteristic of autism spectrum disorders. A SLP's involvement in the educational program of a student with ASD represents a logical affiliation. The SLP's unique training makes him or her an educator with different skills than the classroom teacher. Together, this educational duo has the potential to make a significant difference in the life of students across the autism spectrum.

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