Informal Language and Communication Sample

Overview

Most standardized tests do not adequately assess social communication; therefore, it is necessary to provide informal assessments of social communication when assessing a child with autism spectrum disorder (ASD). Language and communication sampling is an informal tool that most speech pathologists are trained to complete and it allows the professional to examine as much or as little linguistic information as is necessary to “fill in the gaps” from the child’s formal assessment profile by determining the child’s functional language and communication skills.

The sample is often elicited using a picture, sabotaged testing environment, planned play activities, or a story starter. When analyzing an elicited language and communication sample within an autism (AU) assessment, the professional must not only analyze the child’s mean length of utterance (MLU) and grammatical skills, but also look deeper into the sample to analyze such communication skills as repertoire of communicative intent, responsiveness to speech (i.e., the proportion of adult utterances to which the child responds), presences of echolalia, pronoun use, discourse management (e.g., topic maintenance, turn taking, appropriate topic shifts), cohesion, presuppositions, social register (i.e., using appropriate language forms with different conversational partners and in varying situations), figurative language, sequencing of events, story development and narrative skill (Paul, 2007). What is analyzed is determined by the student’s age and language abilities.

Language and communication sampling for students with preverbal/prelinguistic skills should include an assessment of the prelinguistic predictors of language and communication. Prelingusitic predictors include the use of communicative gaze and gestures, quality of vocalizations, joint attention, vocabulary comprehension and quality of play (Paul, 2007; Rollins, 2014). In addition, rate of communication, range of communicative functions expressed (i.e., behavior regulatory functions versus social functions) and responsiveness to speech and gestures as well as an assessment for use of an augmentative communication device (AAC) can be preformed.

If possible, oral and written skills should both be assessed for higher-functioning children, and samples should be compared to determine if the child displays a strength in either oral or written language.

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Resources


