Introduction

Communication Solutions for Older Students: Assessment and Intervention Strategies highlights the best practices from our three previous textbooks on adolescents: *Adolescents' Communication: Development and Disorders* (Boyce and Larson, 1983), *Communication Assessment and Intervention Strategies for Adolescents* (Larson and McKinley, 1987), and *Language Disorders in Older Students* (Larson and McKinley, 1995) and incorporates the most current information on serving older students with language and literacy disorders (i.e., problems in thinking, listening, speaking, reading and/or writing). Thus, *Communication Solutions for Older Students* is our most comprehensive textbook on:

- Oral and written communication development and disorders,

- Assessment and intervention strategies

- Transition issues for older students ages 9 to 19

Language disorder is a term we use throughout this text. We concur with the ASHA (1993) definition of *language disorder* as "impaired comprehension and/or use of spoken, written and/or other symbol systems. The disorder may involve (1) the form of language (phonology, morphology, syntax), (2) the content of language (semantics), and/or (3) the function of language in communication (pragmatics) in any combination" (p. 40). Reference is also made to communication disorders, a broader term than language disorder, in numerous sections. "A communication disorder is an impairment in the ability to receive, send, process, and comprehend concepts or verbal, nonverbal and graphic symbol systems" (ASHA, 1993, p. 40). The latter term is used when the information presented holds true for older students who present with problems instead of or in addition to a language disorder (e.g., executive function impairments, speech disorders, hearing impairments, or social communication deficits).

Communication Solutions
for Older Students

The book is divided into four parts with several chapters in each part. Each chapter begins with a list of goals for the chapter and concludes with points of discussion and suggested readings. We recommend that you discuss the questions among yourselves and pursue the selected readings for more in-depth coverage of the topic. There are 24 appendixes, which feature numerous practical clinical forms or applications, many to be used as assessment and intervention protocols with older students. All these forms are on the accompanying CD-ROM and easily reprintable. Each of the four parts of the book will now be summarized as to the pertinent content in each of the chapters.

Part I: Adolescent Development— Normal and Disordered consists of seven chapters, which present an overview of the theoretical underpinnings of adolescence; normal developmental milestones in terms of physical, psychological, and cognitive skills; oral and written language; and nonverbal communication. In addition, there are chapters on communication parameters in culturally and linguistically diverse populations, the nature of language disorders in older students, and a discussion of frequent concomitant problems that older students with language disorders may face. Part I serves as an overview of, as well as the foundation for, the rest of the book. It is up to your discretion as to whether this section of the book needs to be read before proceeding to learning more about assessment and intervention. We provide this caveat: Because

of the critical nature this information plays for the parts of the book that follow, we urge you to read Part I either to review or to update your current knowledge of the topic.

Chapter 1: Adolescence—An Overview provides insights on what adolescence is and defines *adolescence* as the period between 10 and 19 years of age. The theories of adolescence reviewed are those that have been espoused during the 20th century and into the 21st century. A review of the biological, anthropological, sociological, and psychological theories of adolescence is presented. Over the decades, four psychological theories—psychoanalytic, field, social learning, and stage theory—have predominated. Of these, the most pertinent has been stage theory, as it provides a framework for general, identity, cognitive, and moral development. We provide a summary of the various theories by comparing and contrasting them to one another and then noting how the reader might cope with these different theories of adolescence. Selecting precepts from a variety of theories to develop a more comprehensive synthesized perspective is what we emphasize. We strongly subscribe to the notion that nothing is as practical as a good theory to provide a rationale for why, what, and how we conduct ourselves in research and provide clinical services.

Chapter 2: Developmental Milestones during Adolescence provides an overview of normal physical and psychological development. Physical development is characterized by rapid changes during early adolescence,

more modest changes during middle adolescence, and fewer changes during late adolescence. Adolescents' physical development is incomplete without acknowledging its interaction with psychological development. Psychological developmental principles of dividing adolescence into early, middle, and late are highlighted in terms of characteristics of the three stages and developmental tasks of normal adolescence. Cognitive development includes Piagetian, inductive and deductive reasoning, and Benjamin Bloom et al.'s (1956) taxonomy. Concept development of older students is noted, especially in the flexible nature of the adolescent's ability to shift back and forth between abstract-categorical and perceptual orientations. Critical thinking is noted as the ability to evaluate one's own thinking, and bipolar parameters that should be used to evaluate the quality of thinking are presented. Regardless of the approach used to evaluate cognitive development during adolescence, it should be noted that both quantitative and qualitative differences occur.

Chapter 3: Oral and Nonverbal Communication Development enumerates the comparisons of early to later language development. It is demonstrated and emphasized that language continues to grow throughout adolescence both quantitatively and qualitatively. Oral communication development in terms of both comprehension (listening) and production (speaking) of language is described. Listening is the skill that people use the most, yet it is the least taught in the educational system. Production

of linguistic features or speaking includes Loban's 13-year longitudinal study data to note the changes from grades 1 to 12. Normal discourse skills of conversation, narration, expository text, persuasion, and negotiation are defined, and major normal development characteristics are presented. The chapter also presents nonverbal communication development into the adolescent years. These normal developmental language, discourse, and nonverbal features serve as a foundation to provide baseline data to make decisions about when an older student's language is disordered.

Chapter 4: Literacy Development provides definitions of reading, writing, and spelling. Normal developmental trends in older students are discussed. Writing skills continue to develop into late adolescence and adult years. Perfecting the writing process of prewriting or planning, writing or drafting composition, and postwriting or revising/editing is a lifelong pursuit. Also, the skills needed to take adequate notes are presented since this skill is critical to being successful in gaining knowledge from classroom lectures. Reading skills that are needed to be successful when decoding unknown printed words—including phonological skills, synthesis, attention, auditory perceptual skills, knowledge of morphological rules, sequential memory, and visual perceptual memory—are presented. Likewise, skills required for reading with comprehension—including attention, syntax, semantics, memory, imagery, pragmatics, and higher

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level cognitive skills—are noted. Stages of spelling development from ages 1 to 12 years of age are described. The importance of spelling to word knowledge, reading, and writing is emphasized. Chapters 3 and 4 are closely intertwined since it has been established that there is an interrelationship between oral and written language. Also, like oral language, written language continues to emerge throughout adolescence.

Chapter 5: Communication in Culturally and Linguistically Diverse Populations provides pertinent statistics on cultural and linguistic diversity within the United States, especially as they relate to older students. Knowledge about culturally and linguistically diverse populations is critical for professionals because they must differentiate between a student with a language difference and a language disorder. A language difference is a rule-governed language code or system that is different from Standard American English (SAE) but that meets the norms of the individual's primary linguistic community. A series of tables presents linguistic and pragmatic features of various cultural populations, such as African Americans, Native Americans, Asian Americans, and Hispanic Americans.

Chapter 6: Language Disorders in Older Students cites the prevalence of communication disorders in adolescents in schools and juvenile detention facilities. A table provides an overview of the types of characteristic expectations and problems experienced by older students with language disorders,

across the areas of cognition, metalinguistics, comprehension and production of linguistic features, discourse, nonverbal communication, reading, and writing. Deficits within each of these areas are noted to provide data on what problems are likely to occur in the older student with a language disorder.

Chapter 7: Frequent Concomitant Problems with Language Disorders discusses the types of problems likely to co-occur with language disorders: Traumatic Brain Injury; Attention Deficit Disorders; fetal alcohol syndrome, learning disabilities, and autism. Many students who have language disorders also are youth-at-risk. They are at-risk for dropping out of school or for being unprepared to enter the workforce. A review of the literature reveals that many students with language disorders have lifelong language problems. Professionals refer to this phenomenon as a "continuum of failure." Various researchers have noted that there is a continuum of language disorders that initially is seen in oral language and eventually is revealed in written language or in both oral and written language (Aram, Ekelman, and Nation, 1984; Aram and Hall, 1989; C.J. Johnston, Beitchman, Young, Atkinson, Wilson, et al., 1999; Stothard, Snowling, Bishop, Chipchase, and Kaplan, 1998). It is apparent that most children do not outgrow their language problems and that they persist into the adolescent years and beyond.

Part II: Language Assessment of Adolescents consists of three chapters. These chapters provide an overview of

assessment as a dynamic process, a discussion of the specific behaviors (what to assess) and procedures (how to assess), and a presentation of how to use directed tasks to assess specific behaviors and skills.

Chapter 8: Assessment—A Comprehensive Process begins with a definition and overview of the assessment process. A comprehensive/holistic model is outlined consisting of five facets: descriptive, authentic, dynamic, student-centered, and multidimensional. The multidimensional aspect of assessment includes assessing the educational and environmental systems. It is critical to note that all problems may not be located in the student. The educational (e.g., teacher language, selected curriculum variables) or environmental (family constellation or peer group) systems may be the culprit. Within this chapter is also a discussion of assessment issues as they relate to a pluralistic society. Issues such as assessing communication dimensions using ethnographic methods, differentiating between a language difference and disorder, and determining when and how to use trained interpreters, to name only a few, are covered. A sample of standardized multicultural tests is provided.

Chapter 9: Procedures for Direct Assessment presents a comprehensive review of what behaviors to assess and how to assess those behaviors. More specifically, a discussion ensues on what aspects of language skills need to be assessed, such as history of thinking, listening, speaking, reading and writing intervention; learning style; emotional intelligence; social skills; cognition; linguistic features; discourse areas of conversations, narrations, and expository test; reading and writing; meta-abilities; and nonverbal communication. Two overriding procedures are used to provide insight on how to go about assessing the various components listed under what to assess: informal and formal assessment protocols. Informal procedures include using a case history form, interviews, questionnaires, checklists, rubrics, and portfolios, as well as gathering discourse samples (conversations, narrations, and expository text). Both spoken and written samples using semistructured procedures should be collected, analyzed, and interpreted. Formal assessment or standardized tests are presented, and a list of parameters to critique standardized tests is provided.

Chapter 10: Directed Tasks for Assessment presents a series of procedures that utilize dynamic assessment principles in which the emphasis is on the process the student goes through, rather than on the product or outcome. Eight directed tasks are provided: problem solving, organization, giving/getting directions, informational listening, critical listening, question asking and answering, topic management, and textbook analysis. Each of these directed tasks is presented using this format: administrative steps, analysis procedures, and interpretation guidelines. Directed tasks should be used to supplement, not supplant, other assessment procedures.

Part III: Language Intervention with Adolescents has three chapters, which focus on service delivery models for older students, general intervention considerations, and specific intervention methods. Collectively these chapters provide a framework for working with older students who have language disorders.

Chapter 11: Service Delivery Models and Issues contains a rationale for providing speech-language services to older students. This rationale can be used with school board members, district administrators, and all taxpayers to convince them of the need for and efficacy of services delivered to older students. A continuum of service delivery models is presented; we maintain that one or more of these models should be used. The selection of a given delivery model is contingent on the need of the student. The chapter provides considerable detail about the comprehensive delivery model for secondary-level students that we constructed, which consists of six components: information dissemination, identification, assessment, program planning, intervention, and follow-up. In addition, the chapter presents indirect service delivery models that show how to work within the educational and environmental systems to change these systems, as opposed to working with the student directly. Modifications of the educational system consists of such aspects as noting the organization of curriculum materials, modifying the teacher's language within the classroom context, restructuring the written language of the textbooks and other printed materials, and using peer tutors. Modifications of the environmental system consist of noting the oral language of others in the student's environment, analyzing the structure of the learning environment outside of school, and determining the attitudes and feeling of those in the student's surroundings.

Chapter 12: Overview of Intervention with Older Students presents an overview of general principles to be used in any given language session with the student. The general intervention principles to note with the older student are to determine the purpose of intervention; establish responsibility for the communication disorder; be prepared to counsel about the communication problems; adjust to the social-cognitive development level of the student; be cognizant of adult learning theory (e.g., active learning remains within one's repertoire far longer than passive learning); establish ground rules for intervention sessions; and hold a class meeting time that includes self-reports, issues, and compliments. The chapter goes on to discuss what to teach by providing an extensive list of potential goals in areas such as thinking, listening, reading, and writing. How to intervene using such principles as mediation and bridging, which are part of mediated learning experiences, is described. Enhancing listening, speaking, reading, and writing is also discussed in some length.

Chapter 13: Specific Intervention Methods lists a number of specific activities that can be selected depending on the student's needs. These activities consist of referential communication, narrative storytelling, expository discourse, word-finding, emotional intelligence enhancement, and social skills. Each of these specific intervention methods includes within them the procedures, materials, areas of emphasis, bridging questions, and strategies to mediate. Particularly noteworthy is the section on emotional intelligence that provides the 5 dimensions and 25 competencies needed to be developed to be proficient in this area, as well as prepared to be successful in school and at work.

Part IV: Transitions of Adolescents consists of two chapters. These chapters provide information on how adolescents must transition into the future and how, as professionals, we must be ever conscious about our evolving roles and the efficacy of our services.

Chapter 14: Transitions to the Future conveys information about transition points in the student's life: elementary to middle school, middle school to high school, and high school to postsecondary life. The chapter describes school-to-work issues as they relate to employment options and to society's old vs. new economy within the information age. Likewise, since some older students with language disorders will go on to postsecondary education, it is important to note the type of transition planning needed, legal accommodations available, and the guidelines for success in the postsecondary educational system.

Chapter 15: Merging the Futures explains the evolving roles of speech-language pathologists and contrasting generational viewpoints as they impact the scope and practice of the discipline. A survey conducted through the decades summarizes changes in personal preparation related to speech-language services for older students. Also discussed are the issues surrounding both the efficacy and effectiveness of services. A call to action is reiterated so that adolescents with language disorders do not continue to be unserved and underserved, thus wasting an enormous amount of human resources, which are needed if the United States—or any nation—is to compete in the global society.

The *appendixes* provide a wealth of practical tools and forms that are appropriate to use with older students. Some forms are intended to be used by the students themselves, and others are for those who serve them. All appendixes may be duplicated for clinical use with individual students and can easily be printed from the accompanying CD-ROM. It is our hope that by combining such practical resource materials, along with the depth of information in individual chapters to support them, *Communication Solutions for Older Students* can serve as an exemplary text for students and a much-used reference for practicing professionals.