

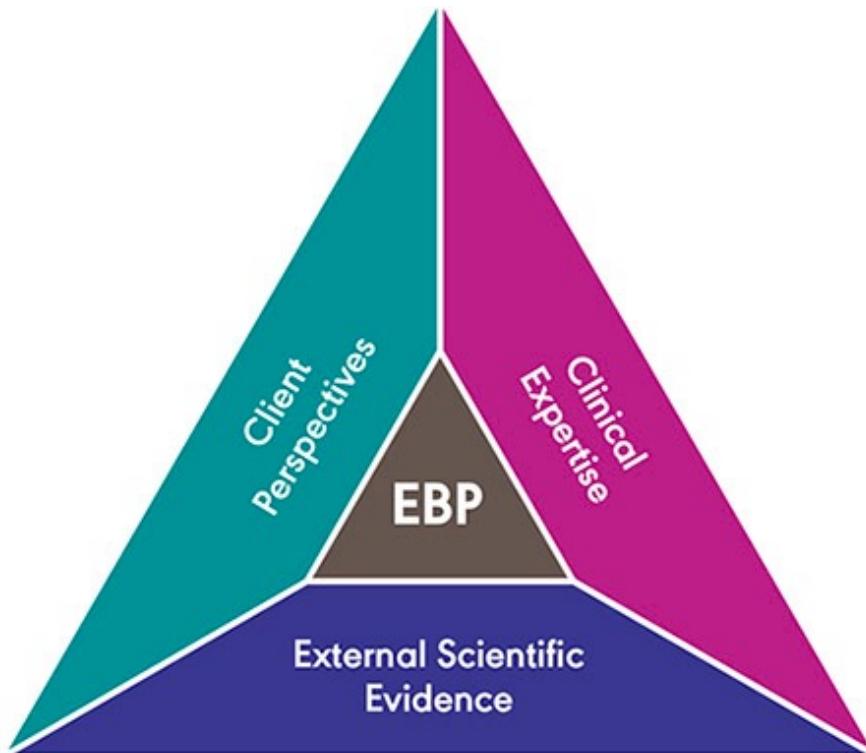
Toddler Communication & Language Intervention

Module 1

Purpose of intervention

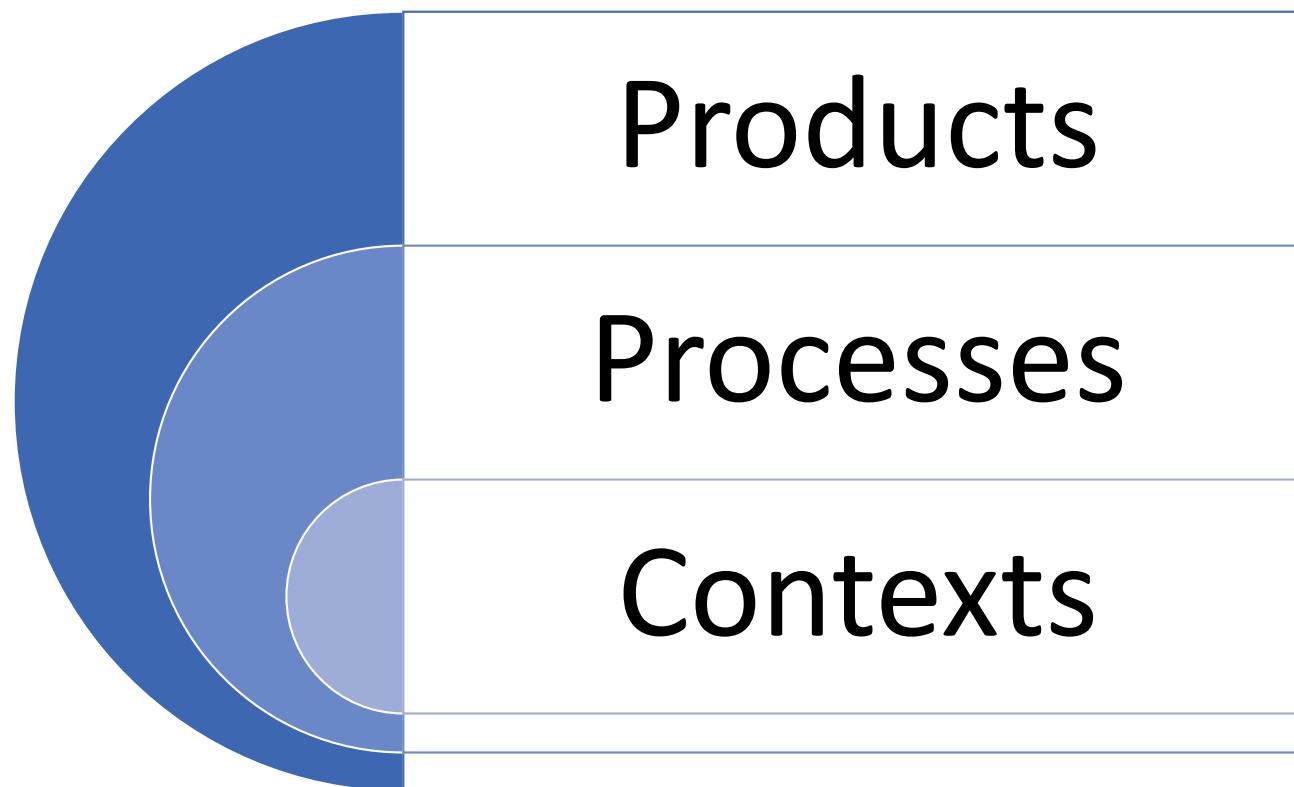
- Change/eliminate underlying problem
- Change the trajectory of the disorder
- Teach compensatory strategies
- Optimize environment

Evidence-based practice



- P: Patient/Problem
- I: Intervention considered
- C: Comparison Tx
- O: desired outcome

Early Communication Intervention: Infants and Toddlers



Intervention plan should include:

- Products of intervention (objectives)
- Methods to achieve objectives
- Contexts/Environments where intervention will take place
- Example:
- Objective: Increase use of grammatical morphemes in spoken sentences
- Method: Recasting
 - Child says, “Doggy jump”
 - Clinician elaborates, “The doggy is jumping”
- Environment: Clinic with eventual generalization to other contexts

Products of Intervention:

- Products: Setting Goals
 - Based on our assessment data!
 - Prioritizing goals (basic, intermediate & specific)
 - Zone of Proximal development
 - Service Plans

Zone of Proximal Development

Lev Vygotsky



What the student can do
(current knowledge and skills)

What the student can't do
(currently beyond reach)

ZPD

Learning / Development

ZPD is the gap between what the student is currently capable of doing independently, and what they can do with support.

Stable
Lifeless
Comfortable
Bored
Unchallenged
Easy
Safe

Challenged
Willing to risk
Excited
Alive

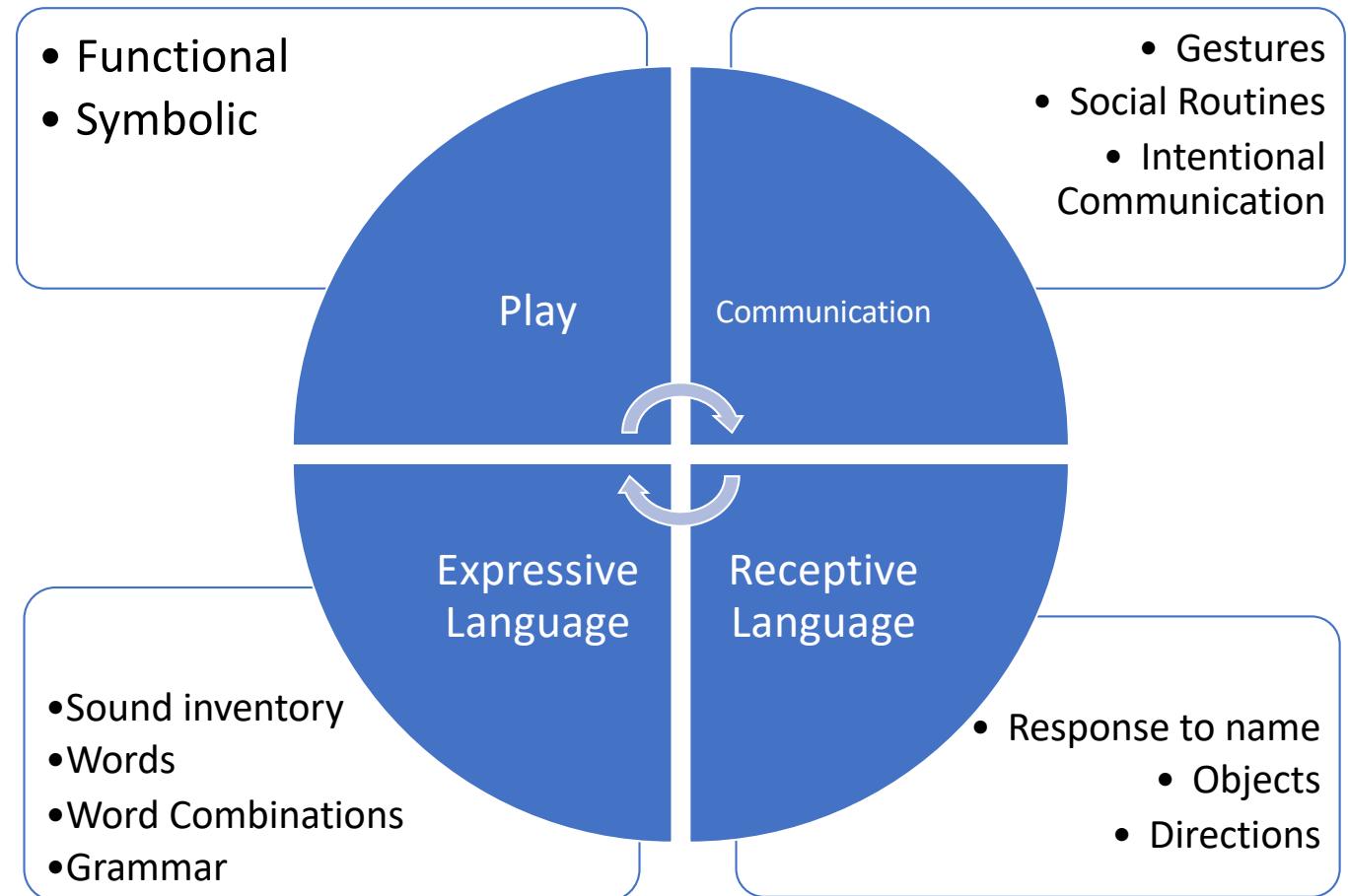
Stressed
Anxious
Disinclined
Frustrated
Exhausted
Fearful

<https://www.sace.sa.edu.au>

Toddler interventions: Pro tips

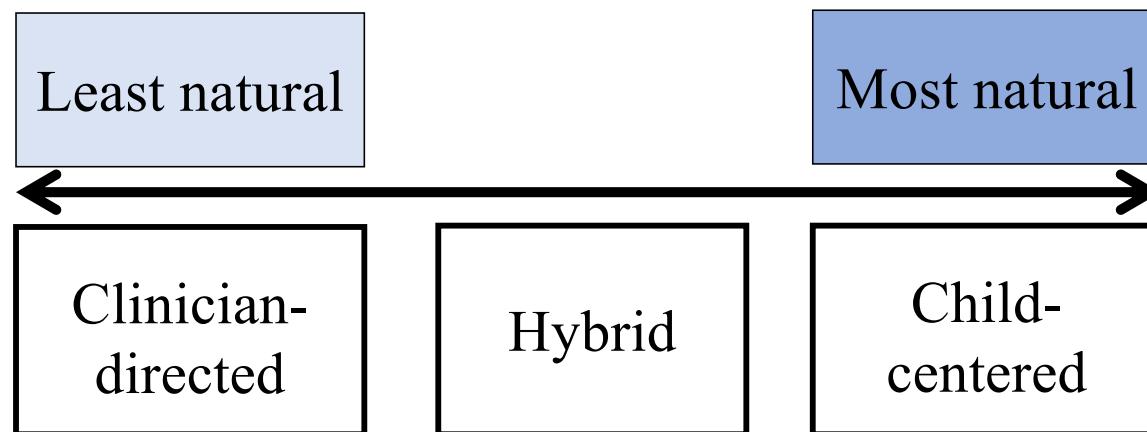
- They might be part of a package or a set of prompts/cues
- Intervention packages for toddlers are similar, they just go by different names!
- The clinician can choose to use a set of treatment strategies from a package or mix-match from packages (just make sure you're following the evidence)
- May be clinician or parent mediated (this is important!)

Products



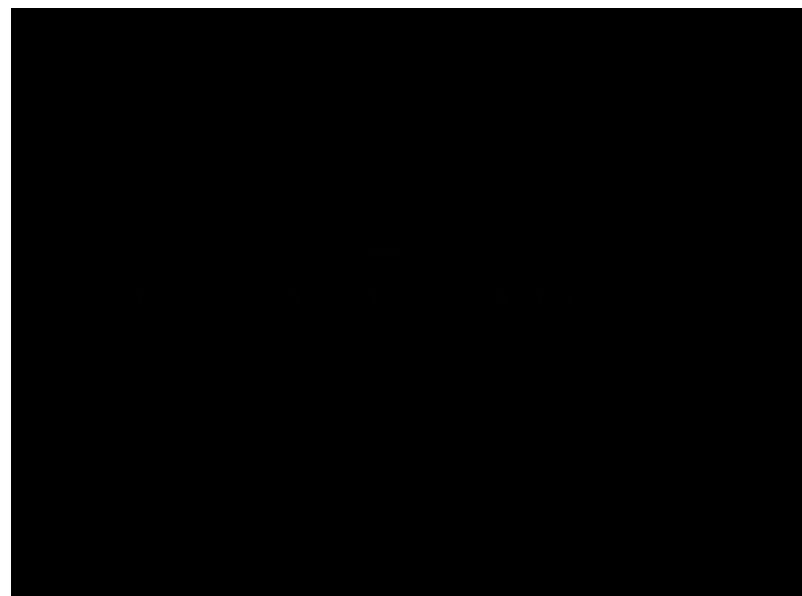
Intervention: Processes

- Continuum of naturalness



Intervention Processes: Drill and Drill Play

- Clinician-directed
- Explicit direction
- Modeling
- Feedback
- Need external reinforcers
- External reinforcers



Intervention Processes: Child-Centered Methods

- Indirect language stimulation, providing
 - Contingent feedback: interpret behavior as communicative
 - Balanced turn-taking: Enjoy the quiet/wait!
 - Extension of child's topic: Add information
 - Recast sentences: Elaborate
- Facilitated play
- Toy talk

Indirect Language Stimulation Methods

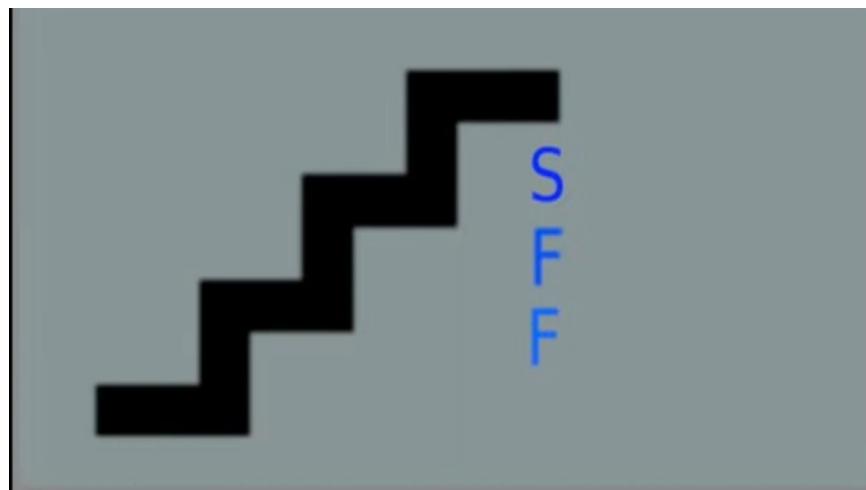
- **Self-talk:** describe own actions (I'm building a tall tower of blocks)
- **Parallel talk:** describe child's actions (Your horse is galloping quickly)
- **Imitations:** adult imitates child
- **Expansions:** add information to child's utterance (mommy sleep → Your mommy is sleeping)
- **Extensions:** Add semantic info (milk gone → Yes! Your cup is empty).
- **Buildups and breakdowns:** manipulating parts of child's utterance (milk gone → Yes! Your milk is gone. Is gone. Your milk).
- **Recasts:** make child's utterance more elaborate (mommy sleep → Is your mommy sleeping?; Your mommy is not sleeping)

Indirect language stimulation



**Which three
indirect
language
stimulation
techniques are
used in this
video?**

Toy talk: An extension of indirect language stimulation



- What are the similarities between indirect language stimulation and toy talk?
- What are the differences?

Toy talk: An extension of indirect language stimulation

- Two MAIN components:
 - Talk about the toy (states, actions, properties)
 - Give the toy a label
- The parent is train to provide the input

- Theory (statistical learning):
 - Noun subjects are lower in frequency compared to pronoun subjects which helps the toddler identify the word boundary
 - Noun subjects help toddlers learn tense and grammatical morphemes more easily

(Hadley, et al., 2017)

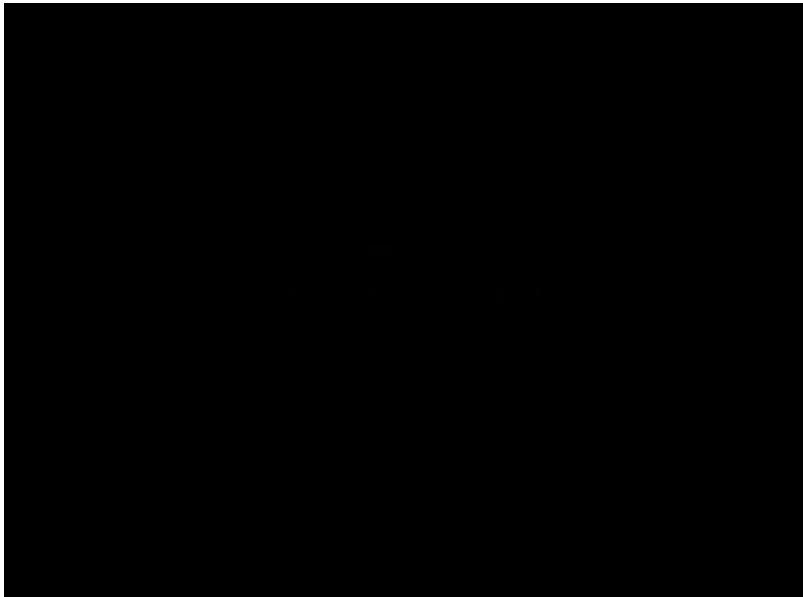
Hybrid Methods

- Focused stimulation
- Vertical Structuring
- Prelinguistic milieu training (PMT) & Milieu communication Training (MCT) (sometimes referred to as enhanced milieu communication therapy)

Focused stimulation

- Uses theory of statistical learning
- Modified input
- Provides multiple opportunities for toddler to hear and produce the structure
 - Continue providing input if no response
 - Recast when child responds
- Focus on teaching rules (not actual exemplars)

Focused Stimulation



- 1) What skill is the clinician teaching?
- 2) What techniques is the clinician using?

Vertical structuring

- Start with a question or follow up on a child's utterance by asking question
- Used to highlight target structures
- No imitation required
- More effective after focused stimulation – why do you think??
- What skills might you teach with this technique?

Prelinguistic milieu training

- PMT: 2 main components
 - 1) Environmental arrangement
 - Materials management: offer choices; piece by piece
 - Positioning: eye-to-eye
 - Arrange environment: in sight, out of reach
 - 2) Prompt hierarchy (least to most support!)
 - Time delay/expectant waiting
 - Feigned misunderstanding
 - Verbal Prompt
 - Verbal Model
 - Physical prompt (depending on behavior taught)

Prelinguistic milieu training



- Let's look for the two components of PMPT
 - 1) Environment arrangement
 - 2) Prompt hierarchy
- Describe your observations.
What did you see.

PMT: Goals

- Teaches early intentional communication acts increase and complexity of intentional communication prior to learning language.
- Coordinated attention
- Gestures
 - Proximal/Distal point – child points to object or event of interest without touching it
 - Shh gesture
 - Clapping
 - Reaching
- Vocalizations

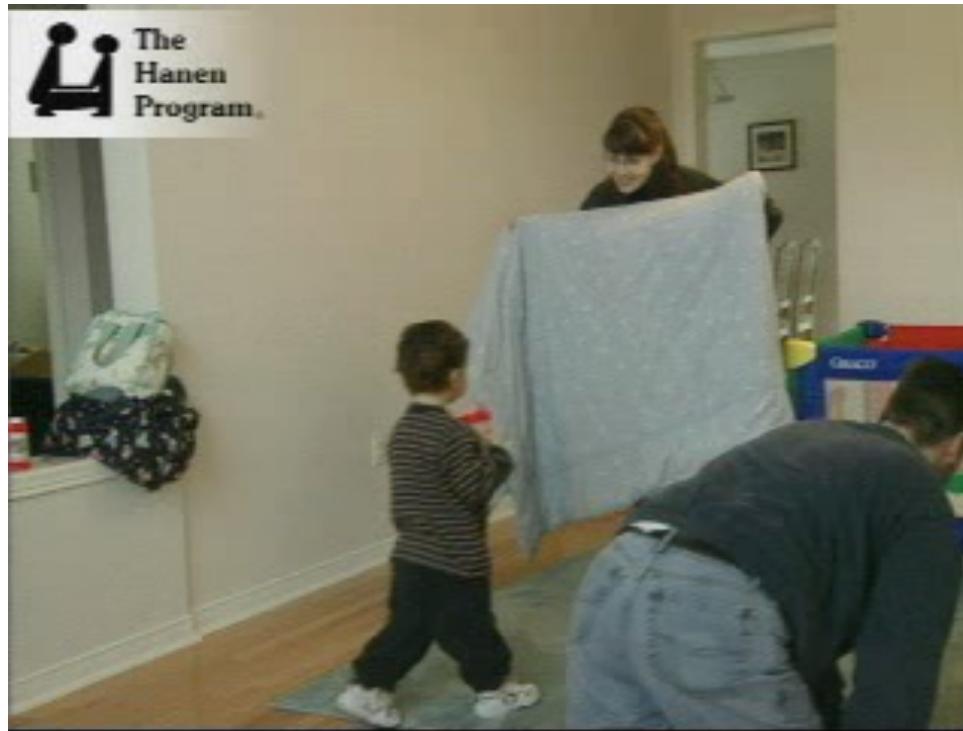
Positioning (Modifying environment)



Expectant Waiting (Time delay/Prompt Free Elicitation)



Coordinating Gaze and Gesture



Modeling Play



Social Routines



Modeling



Verbal prompts



Some Guiding Principles for Communication Programming for Infants & Toddlers

- Treat behavior as if it were communicative
- Use unconventional behaviors as a starting point for communication
- Teach language that expresses what the child is already trying to get across w/ other means
- Match child where s/he is; accept any communicative behavior; then up the ante
- Link 'here and now' language to objects and events

Some Guiding Principles for Communication Programming for Infants & Toddlers

- Provide language for what is on the child's mind
- Utilize the child's preferred strategies and modalities
- Teach both initiation and response
- Provide concentrated, repeated examples of language patterns
- Teach language in both structured and naturalistic contexts
- Teach language within real discourse to convey real information

Context: Birth to Three Service Plan - IFSP

- Present level of development
- Family resources, priorities and concerns
- Expected outcomes
- Early intervention services
- Other services
- Dates of initiation of service
- Service coordinator
- Transition plan

Sample IFSP

- [Sample IFSP.pdf](#)

Let's write some goals and come up with a treatment plan!

- Toddler 1: "Jack", 26 months of age
 - Mullen t-scores: Visual Reception: 52, Gross Motor: 49, Fine Motor: 51, Receptive Language: 45, Expressive Language: 36
 - CDI: <10th percentile on expressive vocabulary
 - Babbles a lot; has a couple of words (mama, dada, baba (for bottle), and guh (for go))
- Toddler 2: "Ethan"; 20 months of age
 - Batelle standard scores: Cognitive: 93; Motor: 101
 - PLS-5: Auditory Comprehension: 92; Expressive Communication: 76
 - Parents report he is very quiet; does not produce many sounds and has no words
- Toddler 3: "Jules"; 27 months of age
 - Mullen t-scores: Visual Reception: 36, Gross Motor: 30, Fine Motor: 31, Receptive Language: 34, Expressive Language: 32
 - CSBS Composite Score: Social: 97; Speech: 64; Symbolic: 67
 - Diagnosis of Down Syndrome

Let's write some goals and come up with a treatment plan!

- Toddler 4: “Darrell”, 32 months of age
 - Mullen t-scores: Visual Reception: 49, Gross Motor: 54, Fine Motor: 53,
 - PLS-5: Auditory Comprehension: 85; Expressive Communication: 72
 - Has about 50 words in his repertoire; starting to combine words but only uses canned 2-word phrases (all done, no more); no grammatical markers
- Toddler 5: “Teagan”; 18 months of age
 - Batelle standard scores: Cognitive: 111; Motor: 106
 - PLS-5: Auditory Comprehension: 104; Expressive Communication: 62
 - Older sibling has severe speech sound and expressive language disorder of unknown etiology
 - Produces a couple of vowel sounds (uh; ah), usually only when eating or distressed.