



SOCIAL SKILLS SQUAD



BY ADRIANA LAVI, PHD, CCC-SLP

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Dr. Adriana Lavi

SLP | RESEARCHER | VIDEOGRAPHER

A close-up portrait of a woman with long, dark brown hair, smiling slightly and looking towards the camera. She is wearing a dark top. The background is a neutral, light-colored wall.

HELLO! I'M DR. LAVI

I would like to thank you for interest in my program and I'd like to share with you my story and how I started making and using videos in my clinical practice...

During the 2008 to 2009 school year, I worked in both an elementary and a high school. I spent my time working with a variety of communication disorders and was having a tough time with social language materials. I found that using static pictures, illustrations, and hypothetical situations just wasn't working and did not address all the social language issues I was seeing. How could we target facial expressions? Vocal inflections? Tone of voice? Body language? The fast and dynamic back and forth conversation of a social interaction? So many components of real life interactions were being left out. I could also tell my students at both the elementary and high school quickly

lost interest and "tuned" or "zoned" out before I finished reading a hypothetical scenario, or explaining social mind. The worksheets and drawings I used to explain empathy or perspective-taking were just not working. On top of that, I found it difficult to navigate and fully grasp my students' pragmatic language ability. What did students know about social context and unspoken social rules? Were they just beginning to figure it all out? Did they get stuck somewhere along the way? I had so many questions that the current pragmatic assessments and materials could not solve. I was driving home one day and passed by a community park where I saw students interacting before their baseball game. I thought to myself, if only I could use real-life students to model social interactions for my kiddos.

Then I thought, what about videos? I could use videos of real-life situations in therapy. I went home and found my digital camera in my desk drawer and asked my sister if she could help.

I then asked my cousin if he could videotape my sister and I role-playing one of those hypothetical situations that I read to my students earlier that day. We did a couple of takes and made a few videos where a situation went wrong, and then where a situation went right. It was fun to do and I was excited to show the videos to my students the next day. When I got to school, I got the videos ready on my computer and used them throughout the day in my social language groups. I was amazed. All of my social language students were now paying attention and engaged! They loved the use of videos in their speech visit and were participating and responding to the material. They asked me if we could do videos next time they came to speech and I, without hesitation, said, “absolutely!” This is when my passion for video assessments and treatments began. What started out as a small therapy project grew into a much larger mission. I decided I wanted to not only create pragmatic language treatments but also create a comprehensive pragmatic language assessment – using videos! I reviewed research literature and analyzed as many pragmatic language assessments that I could find. Oddly, I found that there were not many assessments dedicated entirely to social language. I kept thinking of how many students I had come in contact with who would have benefited from pragmatic language therapy, however, were not fully assessed in all the areas of social language. An all-encompassing social language assessment was needed and that’s where I began. I started studying social context, paralinguistic cues, and affective expression. There is so much to the understanding and use of facial expressions, tone of voice, body language, intonation, sarcasm, etc. I began to slowly, but surely, develop The Clinical Assessment of Pragmatics (CAPs). Now, I am excited to say that I am onto the next part of my video-based mission with The Social Skills Squad. The treatment I started ten years ago while working as a school-based speech-language pathologist. I hope you find success with your child, student, or client and enjoy the video-based world of the Lavi Institute.

Dr. Adriana Lavi

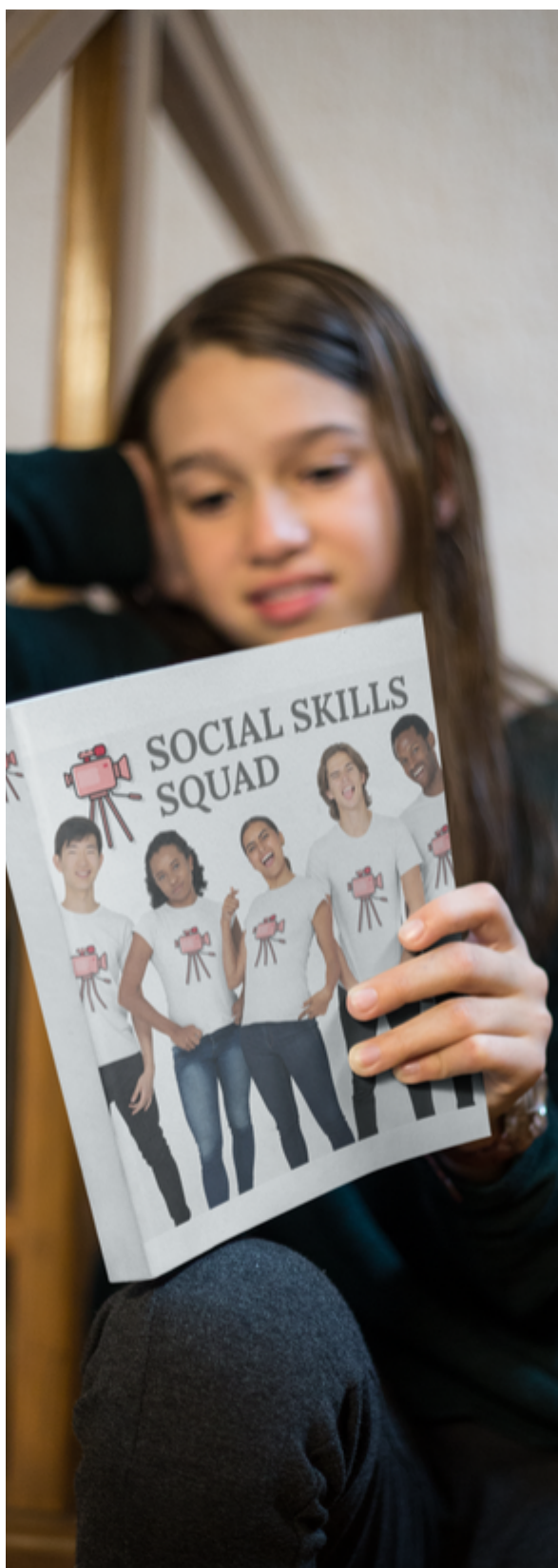


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01

OVERVIEW OF THE PROGRAM

SOCIAL SKILLS SQUAD PROGRAM DESCRIPTION

The Social Skills Squad Program created by the Lavi Institute is a treatment program designed for students who demonstrate difficulty with everyday social language.

Our world is full of conversations and opportunities to be social, yet sometimes we have difficulty understanding and expressing social language appropriately. Students may be confused on how to interpret a friend or family member's comments and decode facial expressions, or students may not know how to appropriately react to such comments (both verbally and visually). That's where the Social Skills Squad Program comes in. This treatment aims to not only target the basics of social language but also target

important concepts such as empathy, sarcasm, bullying, conversational adaptation, negotiation, and idioms, and so much more that will help our students thrive and become the social beings they are destined to be. The SOCIAL SKILLS SQUAD is a groundbreaking pragmatic language treatment that incorporates technology in the form of videos to help students decode facial expressions and practice their own facial expressions. Some of the highlights of this program include the use of age/developmental level videos (more on that later), the use of peer mentors for each concept, the practice of facial expressions using a mirror and/or camera to take a selfie, and the flexible conversation between clinician and student.

The program has been clinically used and field-tested with children and teens (between the ages of 7 and 18) with Autism Spectrum Disorder (ASD), Social Communication Disorder (SCD) or pragmatic language impairment, Emotional Disturbance (ED) and Intellectual Disability (ID)

Whereas other programs may target the basics (i.e., happy, sad, mad), the SOCIAL SKILLS SQUAD goes above and beyond to target more specific emotions (i.e., disappointed, excited, supportive, uninterested, and sarcastic). You will notice this manual does not include many references and this is purposeful. This program was designed by clinicians for clinicians. We know how busy life can be and sometimes we have limited time for reading. This manual is organized to be user friendly and the program is designed for working clinicians and practitioners (e.g., SLPs, Counselors, Clinical Psychologists, etc.). We want you to get straight to it and let our students do the talking. If you would like to learn more about the evidence regarding these concepts, please visit us at our website www.laviinstitute.com/



PROGRAM STRUCTURE

The Social Skills Squad program is organized to be 12 weeks long with students coming in twice a week for 30 minutes, for a total of 24 sessions. However, the program can be used throughout the duration of a school year where the clinician can repeat and review selected lessons as needed.

Now, let us get to the structure of the program. The program is designed for students between the ages of 7 and 21. The beginner treatment folder is recommended for younger children aged 7 to 12;11. The advanced student treatment is recommended for older students between the ages of 13 and 21. Of course, it is recommended that clinicians consider both chronological and developmental age when administering the treatment. That is, if a series of videos is more suitable based on the student's developmental age versus chronological age, it is acceptable to use that series of videos. Each grouping of videos includes five topics that are each targeted for two to three weeks. If a student requires more focus in a specific area, it is recommended to modify the structure of the program to meet each individual's needs. The five targeted topics include:

- Empathy – Understanding and Expressing Empathy
- Sarcasm – Detecting Sarcasm, Deceit, Bullying
- Conversational Adaptation
- Negotiation and Compromise
- Idioms and Expressions

The SOCIAL SKILLS SQUAD program is heavily rule based and focuses on two key concepts: social mind and big heart. Social mind refers to an individual's ability to read and detect social cues. Big heart refers to an individual's ability to understand, be supportive and demonstrate mindfulness and empathy.

Part of the treatment program includes the use of “selfies” (i.e., photos) and this can be done with a camera/smartphone or using a mirror. It is important to remember to obtain written parent consent before using a camera/smartphone and to remember to delete all photos/videos at the end of treatment.

PHASE 1

At the beginning of treatment, two key concepts are introduced and discussed: big heart and social mind. Big heart refers to a student’s ability to understand and demonstrate mindfulness and empathy. Social mind refers to a student’s ability to read and detect social cues. The program will contain videos to teach each of these concepts at the very beginning of treatment. Additionally, worksheets will be provided (see Appendix) to assist in the learning of these topics. Once the student has demonstrated an understanding of these two concepts, the five topics are introduced in Phase Two.

PHASE 2

After students demonstrate an understanding of social mind and big heart, the five topics are introduced. The order of these topics and the length of time each topic is focused on may vary. Each topic is designed to be targeted for two to three weeks and are suggested to be repeated and reviewed once the remaining topics have been targeted.

SOCIAL SKILLS SQUAD AT A GLANCE

WEEK 1 SUGGESTED SEQUENCE - NOT REQUIRED

Introduction

Introducing students to the program, presenting 2 concepts: Social Mind and Big Heart
Intro Video: Social Mind and Big Heart - prerequisite of the program

Empathy

- Step 1: Peer Mentored Video
- Step 2: Visual Bombardment Video #1/Tell Me What I'm Thinking exercise #1
- Step 3: Selfie or Mirror Time
- Step 4: Practice Videos and Role-Playing

WEEK 2

Empathy, cont.

- Step 1: Visual Bombardment Video #2 and Tell Me What I'm Thinking Exercise #2
- Step 2: Vocal Inflections Instructional Video
- Step 3: Selfie or Mirror Time/ Vocal Inflections Practice Video
- Step 4: Practice Videos and Role-Playing

WEEK 3

Empathy, cont.

- Step 1: Visual Bombardment Video #3 and Tell Me What I'm Thinking Exercise #3
- Step 2: Vocal Inflections Instructional Video
- Step 3: Selfie or Mirror Time/ Vocal Inflections Practice Video
- Step 4: Practice Videos and Role-Playing

WEEK 4

Funny Sarcasm, Mean Sarcasm (Teasing)

- Step 1: Visual Bombardment Video #1
- Step 2: Peer Mentored Video
- Step 3: Selfie or Mirror Time
- Step 4: Practice Videos and Role-Playing

SOCIAL SKILLS SQUAD

AT A GLANCE, CONT.

WEEK 5

SUGGESTED SEQUENCE - NOT REQUIRED

Mean Sarcasm and Bullying

Step 1: Visual Bombardment Video #2

Step 2: Selfie or Mirror Time

Step 3: Practice Videos and Role-Playing

WEEK 6

Mean Sarcasm and Bullying

Step 1: Visual Bombardment Video #2

Step 2: Selfie or Mirror Time

Step 3: Practice Videos and Role-Playing

WEEK 7

Conversational Adaptation

Step 1: Peer Mentored Video

Step 2: Visual Bombardment Video #1

Step 3: Selfie Time and Back Channeling

Step 4: Practice Videos and Role-Playing

WEEK 8

Conversational Adaptation

Step 1: Visual Bombardment Video #2

Step 2: Selfie Time and Back Channeling

Step 3: Practice Videos and Role-Playing

WEEK 9

Accepting Change

Step 1: Peer Mentored Video

Step 2: Visual Bombardment Video

Step 3: Practice Videos and Role-Playing

SOCIAL SKILLS SQUAD

AT A GLANCE, CONT.

WEEK 10

SUGGESTED SEQUENCE - NOT REQUIRED

Accepting Change

Step 1: Visual Bombardment Video

Step 2: Practice Videos and Role-Playing

WEEK 11

Idioms

Step 1: Peer Mentored Video

Step 2: Practice Videos and Role-Playing

WEEK 12

Idioms

Step 1: Review Concepts

Step 2: Practice Videos and Role-Playing

02 EMPATHY - UNDERSTANDING AND EXPRESSING EMPATHY



An important aspect of socio-emotional development is empathy. Empathy is demonstrated when a person feels concern and/or wants to assist someone who may need support. When you understand and share in another person's experiences and feelings, you are able to develop strong bonds and develop meaningful relationships with other people.

During this topic, students will work on identifying/understanding situations where empathy is appropriately expressed. Students will also practice their own expressions of empathy. This topic is suggested to be targeted for three weeks. Below, you will find a suggested sequence to follow.

WEEK 1

Introduction: Social Mind and Big Heart prerequisite

Welcome to the Social Skills Squad! Today you will be starting the first lesson of the program. To begin, you (the clinician) will introduce the program to your student(s). Explain to your student(s) that over the next few weeks, we will be watching some videos and having discussions of what makes a great communicator and how to make friends. As we go along watching videos, other students will share their thoughts on how to be a great communicator and talk to others. Sometimes, we will see videos where something goes wrong and we'll discuss what went wrong and how we can fix it. We'll also role-play different scenarios - we'll practice or rehearse situations as if they were happening to us and demonstrate the correct way to handle a situation. We'll learn about two concepts. The first is called, "social mind." To have a social mind is to be able to read and detect social cues. The second is called, "big heart." To have a big heart is to understand, support, and demonstrate mindfulness and empathy. In order to learn about social mind and big heart, we'll begin by watching videos of faces and discuss what we think each face tells us. Next, it's "selfie time" and we'll practice making faces in a mirror or on our phones.

Let's get started! It's time to learn about social mind and big heart. Start the first video now (read out loud the sentences in the video to your student(s). After the video, have a discussion with your student(s) and use the companion worksheet.

Video: Intro video: prerequisite of the program



EMPATHY, YOUNGER GROUP WEEK 1, CONTINUED

Step 1 : Peer Mentored Video

Students and clinician view a peer-mentored video titled, "My Friend and His Scooter." After viewing this video, the clinician and student engage in discussion with questions. Questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."

Step 2 : Visual Bombardment Video (#1)

Next, students will be visually bombarded with facial expressions that depict empathetic reactions. For example, faces may be disappointed or supportive. It is important we are able to read each other's faces in order to offer verbal support as well as offer support in our facial expressions.

NEW! Tell Me What I'm Thinking (Exercise 1)

Practice perspective taking skills. Students are asked to pretend to be the actor and say what they're thinking. For example, seeing a video of a girl who is sad, students say, "I'm so sad because I miss my friend".

Step 3: Selfie or Mirror Time

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would show empathy by being supportive to someone who is disappointed. Focus in on eyebrow movement and the corners of the mouth. Take selfies with the student and show how you would demonstrate empathy.

Step 4: Practice Videos and Role-Playing

Students and clinician view a practice videos titled, "Broken Toy" and "Juice". After viewing these practice videos, the clinician and student will engage in discussion with questions. First, we focus on the interpretation of emotions. Next, we focus on how to support these emotions (i.e., supportive look or comments). Questions may include, "What could you do to offer support? What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."Note: It can be very helpful to video tape students when role playing and then have students watch and rate themselves.

EMPATHY, YOUNGER GROUP WEEK 2

Step 1: Visual Bombardment Video (#2)

Review Concepts: Week two begins with a review of the previously learned concepts. Big heart, social mind, and empathy will be discussed. Visual Bombardment 2: Next, students will be visually bombarded again with facial expressions that depict empathetic reactions. This time, the faces may depict the following emotions: in pain, nervous, excited. Discuss with students what makes each face appear to depict each emotion (i.e., eye brows, mouth, expression).

NEW! Tell Me What I'm Thinking (Exercise 2)

Practice perspective taking skills. Students are asked to pretend to be the actor and say what they're thinking. For example, seeing a video of a girl who is sad, students say, "I'm so sad because I miss my friend".

Step 2: Vocal Inflections Video (Instructional)

Students will watch a video on vocal inflections. The clinician and student will discuss how inflection can change the entire meaning of a phrase or sentence and it is important to use correct inflection in order to socially communicate with our peers. The video explains upward and downward inflection. For example, when pitch goes from low to high, this may indicate questioning, excitement, surprise, or insincerity. When there is a downward inflection, the pitch goes from high to low and may indicate empathy, certainty, or confidence. After watching the video, students will practice vocal inflection. You may wish to show students that when different words are inflected in a sentence, it changes the meaning of the sentence. Additionally, there are some suggested upward and downward inflection phrases for your student to try. Feel free to add some of your own!

Step 3: Selfie or Mirror Time

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would show empathy by being supportive to someone who is disappointed. Focus in on eyebrow movement and the corners of the mouth. Take selfies with the student and show how you would demonstrate empathy.

New! Vocal Inflections Practice Video (#2)

Practice using appropriate vocal inflections and tone of voice. Students watch videos of children demonstrating various emotions, and practice using appropriate vocal inflections by pretending to talk to the actors.

Step 4: Practice Videos and Role-Playing

Students and clinician will view three additional practice videos titled, "Gum" and "Bad Day." After viewing each practice video, the clinician and student will engage in discussion with questions. First, the clinician and student should focus on the interpretation of the emotions seen in the videos (e.g., nervous, worried, excited, ashamed, and proud). Second, the focus changes to how to support these emotions (i.e., supportive look or comments). Questions may include, "How would you support a friend who is nervous for a big test? What if someone was excited for their birthday? Can you think of a time you were worried? What helps you when you feel worried or nervous? In the videos - What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."



EMPATHY, YOUNGER GROUP WEEK 3

Step 1: Visual Bombardment Video (#3)

Review Concepts: Week three begins with a review of the previously learned concepts. The clinician and student will review the following emotions: nervous, worried, excited, ashamed, and proud. Visual Bombardment 3: Next, students will be visually bombarded again with facial expressions that depict empathetic reactions. This time, the faces depict the following emotions: embarrassed and proud. Discuss with students what makes each face appear to depict each emotion (i.e., eye brows, mouth, expression).

NEW! Tell Me What I'm Thinking (Exercise 3)

Practice perspective taking skills. Students are asked to pretend to be the actor and say what they're thinking. For example, seeing a video of a girl who is sad, students say, "I'm so sad because I miss my friend".

Step 2: Vocal Inflections Video (Instructional)

Vocal Inflections Video: Students will watch the video on vocal inflections again. Review with students why inflection is so important when we speak. Go through examples and practice.

Step 3: Selfie or Mirror Time

New! Vocal Inflections Practice Video (#3)

Step 4: Practice Videos and Role Playing

Practice Videos and Role-Playing: Students and clinician will view three additional practice videos titled, "Soccer Game," "Neighbor," and "Birthday, New Puppy." After viewing each practice video, the clinician and student will engage in discussion with questions. First, the clinician and student should focus on the interpretation of the emotions seen in the videos. Second, the focus should change to how to support these emotions (i.e., supportive look or comments). Questions may include, "Why is it important to support peers' interests and accept others interests? If you felt sad or in pain, what would you expect someone's reaction to look like? What went right in this video? What went wrong? What could have been done instead? Let's role play this scenario correctly."

SARCASM, DECEIT, IRONY

Sarcasm occurs in everyday life in many conversations. For someone who does not understand sarcasm, it can be a form of bullying and a student may end up getting into trouble or placing themselves in a dangerous situation. Imagine misunderstanding a statement and interpreting a comment word-for-word. For example, if it was raining outside and a friend said, "Wow, it's a beautiful day." You may think that your friend perceives a rainy day as beautiful. When considering sarcastic remarks there are three key areas to think about: facial expressions, tone of voice, and context. If a person is being sarcastic, we can look to their facial expressions to decode a look of disgust or irritation. Next, we can consider tone of voice which may include pitch differences (e.g., nasal quality), elongated sound differences (e.g., "Thank you," becomes "Thaaaaank you"), or exciting words with flat affect (e.g., "WOW!" becomes "wow.").



Lastly, we must consider context, does the remark contradict the conversation or mean the opposite of what is going on. For example, if it is raining outside, does it make sense to describe it as "beautiful?" During this topic, students will work on identifying/understanding situations where sarcasm, deceit, and bullying takes place. This topic is suggested to be targeted for three weeks. Below, you will find is a suggested sequence to follow.

WEEK 1

FUNNY SARCASM, TEASING

Step 1: Visual Bombardment (#1)

Introduction to Sarcasm: students watch a video describing what sarcasm is. Two types of sarcasm are presented, funny sarcasm (irony) and mean sarcasm. Video also explains how to identify mean sarcasm as in teasing, and examples of teasing. After watching the video, the clinician and students will have a discussion. Ask students, “Why is teasing wrong?”, “Have you ever experienced teasing?”, “How did you feel?”, “What did you do?” Discuss with students that when dealing with teasing, it is best to ignore it. It is important to be able to identify teasing when it happens and we have found it is best to act like the teasing does not bother you. If teasing continues, it is important to speak with a trusted adult at school and at home. Additionally, students will be visually bombarded with facial expressions that depict sarcasm. It is important we are able to read other’s faces in order to understand when someone is being sarcastic.

Step 2: Peer Mentored Video

Students and clinician will next view a peer-mentored video titled, “Mrs. Hall”. After viewing this video, the clinician and student engage in discussion with questions. Questions may include, “What went right? What went wrong? What could have been done instead? Let’s role play this scenario correctly.”

Step 3: Selfie Time

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would react to someone who is sarcastic to them. If someone is sarcastic, sometimes they may be trying to show humor or they may be trying to be mean. Practice faces that show you are not bothered. Laugh it off or appear unfazed by the comments made. Take selfies with the student and show how you would react to sarcasm.

Step 4: Practice Videos and Role Plays

Students and clinician view a practice video titled, “Birthday Cake.” After viewing this practice video, the clinician and student will engage in discussion with questions. First, we focus on the interpretation of sarcasm. Next, we focus on how to respond to sarcasm.

WEEK 2

MEAN SARCASM, BULLYING

Step 1: Visual Bombardment (#2)

Review Concepts: Week two begins with a review of the previously learned concepts. Sarcasm, deceit, irony, and bullying will be discussed. Next, students will be visually bombarded with facial expressions that depict sarcasm and bullying. Two types of sarcasm are presented, funny sarcasm (irony) and mean sarcasm. Video also explains how to identify mean sarcasm as in bullying, and visual examples of bullying are presented. After watching the video, the clinician and students will have a discussion. Ask students, “Why is bullying wrong?”, “Have you ever experienced bullying?”, “How did you feel?”, “What did you do?” Discuss with students that when dealing with bullying, it is best to ignore it. It is important to be able to identify bullying when it happens. If bullying happens and continues, it is important to speak with a trusted adult at school and at home.

Step 2: Selfie Time

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would react to someone who is sarcastic to them. If someone is sarcastic, sometimes they may be trying to show humor or they may be trying to be mean. Practice faces that show you are not bothered. Laugh it off or appear unfazed by the comments made. Take selfies with the student and show how you would react to sarcasm.

Step 3: Practice Videos and Role Plays

Students and clinician will view two additional practice videos titled, “Champion” and “Four Eyes.” After viewing each practice video, the clinician and student will engage in discussion with questions. First, the clinician and student should focus on the interpretation of sarcasm seen in the videos. Consider facial expressions, tone of voice, and context. Next, the focus changes to how to react to sarcasm. Questions may include, “What did the student mean when she said, “what a champ” What went right in these videos? What went wrong? What could have been done instead? Let’s role play this scenario correctly.”

WEEK 3

MEAN SARCASM, BULLYING

Step 1: Visual Bombardment (#2)

Next, students will be visually bombarded again with facial expressions that depict sarcasm. Two types of sarcasm are presented again, funny sarcasm (irony) and mean sarcasm. Video also explains how to identify mean sarcasm as in bullying, and visual examples of bullying are presented. After watching the video, the clinician and students will have a discussion. Ask students, “Why is bullying wrong?”, “Have you ever experienced bullying?”, “How did you feel?”, “What did you do?” Discuss with students that when dealing with bullying, it is best to ignore it. It is important to be able to identify bullying when it happens. If bullying happens and continues, it is important to speak with a trusted adult at school and at home.

Step 2: Selfie Time

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would react to someone who is sarcastic to them. If someone is sarcastic, sometimes they may be trying to show humor or they may be trying to be mean. Practice faces that show you are not bothered. Laugh it off or appear unfazed by the comments made. Take selfies with the student and show how you would react to sarcasm.

Step 3: Practice Videos and Role Plays

Students and clinician will view two additional practice videos titled, “Shoes” and “Birthday Party Invitation.” After viewing each practice video, the clinician and student will engage in discussion with questions. First, the clinician and student should focus on the interpretation of sarcasm seen in the videos. Consider facial expressions, tone of voice, and context. Next, the focus changes to how to react to sarcasm. Questions may include, “What went right in this video? What went wrong? What could have been done instead? Let’s role play this scenario correctly.”

04 CONVERSATIONAL ADAPTATION



Language serves many different purposes. We can use language to greet our friends and family, to inform others about things, to ask or request for something, or to make a demand. It is critical that we are able to adapt our conversations to the purpose of the conversation and to meet the needs of the listener/conversational partner. For example, you will speak differently to your sister than you do to your teacher, and you will speak louder at recess or lunch than during class time.

You will also respond to your listener's facial expressions and comments and if they show disinterest or confusion, you will follow up to make sure that they are listening and/or understanding what you are saying.

Additionally, there are unspoken rules of conversation that need to be followed. For example, we engage in eye contact, turn-taking, use appropriate volume, do not interrupt, and we respond to our conversational partner's facial expressions, comments and/or questions. Sometimes, these unspoken rules are not so easy for all students and the rules have to be explained. During this topic, students will work on identifying/understanding situations where conversation needs to be adapted to meet the needs of the listener. This topic is suggested to be targeted for two weeks. Below, you will find a suggested sequence to follow.

WEEK 1

Step 1: Peer Mentored Video

Students and clinician will view a peer-mentored video titled, "Interrupted Soccer Game Conversation." After viewing this video, the clinician and student engage in discussion with questions. Questions may include, "What went right? What went wrong? What can you say to a friend if they interrupt you? What could have been done instead? Let's role play this scenario correctly."

Step 2: Visual Bombardment Video #1

Next, students will be visually bombarded with facial expressions such as confused, interested, and active listening. It is important we are able to read other's faces in order to understand when someone is following along with our conversation or if someone needs clarification. If a person appears confused, we can ask, "Does that make sense?" or offer further explanation. If a person appears to be listening and interested, the speaker knows that the listener cares about what he/she is saying.

Step 3: Selfie Time and Back Channeling

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would express confusion, interest, and active listening. Take selfies with the student and show how you would change your facial expression to indicate confusion, interest, and listening. Focus on eyebrow movement and mouth movement. Clinician and students may also choose to practice back channeling. Back channeling is non-verbal and verbal feedback which a listener gives to a speaker to show that they are following along and understanding what the speaker is trying to communicate. Back channeling may include head nods, facial expressions, and phrases such as, "Okay," "Yes," "That makes sense," "Wow," "Uh-huh," and "Wow."

Step 4: Practice Videos and Role-Plays

Clinician and students will view two practice videos titled, "Halloween Plans," and "Video Game." After viewing this practice video, the clinician and student will engage in discussion with questions. Questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly." Note: It can be very helpful to video tape students when role playing and then have students watch and rate themselves. (Remember to obtain written parental consent before incorporating photos/videos).

Step 1: Visual Bombardment Video #2

Review Concepts. Week two begins with a review of the previously learned concepts. Conversational adaptation will be discussed. Next, students will be visually bombarded with facial expressions such as boredom, uninterested, and talking over a friend. It is important we are able to read other's faces in order to understand when someone is interested in what we are saying. If a person appears uninterested in a topic or not paying attention, it is important we understand these cues so we can get their attention back or change the topic/conversation.

Step 2: Selfie Time and Back Channeling

Now it is time to practice facial expressions. Using a camera, smartphone, and/or mirror, have students practice how they would express boredom, disinterest and how they would react to someone talking over someone else in a conversation. Take selfies with the student and show how you would change your facial expression to indicate these emotions. Focus on eyebrow movement and mouth movement. Review back channeling and the importance of providing feedback during conversation. It is important to let our conversational partner know we are listening and interested.

Step 3: Practice Videos and Role-Plays

Students and clinician view four practice videos titled, "Trip to Hawaii," "Weekend Talk," "Bugs," and "Phone." During these videos, how to start a conversation and make friends will be discussed. Students will also demonstrate the understanding of the importance of allowing friends to speak and finish their thoughts. Interruptions will also be addressed. After viewing this practice video, the clinician and student will engage in discussion with questions. Questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."

05

ACCEPTING CHANGE

During this topic, students will work on identifying/understanding situations that involve negotiation and compromise. Sometimes it may seem scary to change a routine, and it may leave us feeling disorganized, upset, and frustrated. It is important to know that it is okay to make changes and modify a plan. Change of plans occur every day and when changes do occur students must remember to take deep breaths and speak in a calm voice. If we raise our voices and get angry or frustrated, we can upset our friends and teachers which is not our intention. This topic is suggested to be targeted for two weeks. Below, you will find is a suggested sequence to follow.



WEEK 1

ACCEPTING CHANGE

Step 1: Peer Mentored Video

Students and clinician will view a peer-mentored video titled, "Game Console." After viewing this video, the clinician and student engage in discussion with questions. Questions may include, "What reactions did you see? Was this the right reaction? What could have been done instead? Let's role play this scenario correctly."

Step 2: Visual Bombardment

Next, students will be visually bombarded with facial expressions that depict someone who is hurt by someone else's words. It is important we are able to understand that our words affect others and may hurt someone's feelings. When we realize we have hurt others, we must be quick to react and apologize for our actions and words.

Step 3: Practice Videos and Role Plays

Clinician and students will view two practice videos titled, "Absent Babysitter" and "Board Game." After viewing this practice video, the clinician and student will engage in discussion with questions. Questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly." Note: It can be very helpful to video tape students when role playing and then have students watch and rate themselves. (Remember to obtain written parental consent before incorporating photos/videos).

WEEK 2

ACCEPTING CHANGE

Step 1: Visual Bombardment

Review Concepts. Week two begins with a review of the previously learned concepts. Negotiation, compromise, and speaking in a calm voice will be discussed. Next, students will be visually bombarded with facial expressions that show anger, frustration, resistance to change in routine, and understanding that change is okay as long as you are safe. It is important we understand these emotions and we understand that change is not a bad thing. When we are scared, worried, frustrated, or angry there is no need to raise our voices. We must remain calm and take deep breaths as needed.

Step 3: Practice Videos and Role Plays

Students and clinician view two practice videos titled, "Line Leader" and "PB&J." After viewing this practice video, the clinician and student will engage in discussion with questions." The clinician and student will discuss why sharing is good, change is okay, and when changes occur we should not be angry or frustrated, but instead discuss our emotions calmly. Additional questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."

06 IDIOMS



Idioms and/or figures of speech can be seen every day in social conversations. A friend may tell you that he/she cannot meet you for lunch because he/she is “under the weather.” Now, “under the weather” does not mean that he/she is sitting in the rain, it means that they are sick. How does one connect the two ideas? In the English language and many other languages, idioms or expressions are used as a way to emphasize or draw attention to something.

Some idioms originated hundreds of years ago and are considered to be an everyday part of our language. For example, “it’s raining cats and dogs” is one of the most commonly heard idioms and simply means it’s raining very heavily. Idioms are generally learned over time from one person hearing another person saying it and so on. Some students may interpret idioms literally instead of figuratively. During this topic, students will work on identifying/understanding situations where idioms and expressions are used. It is important to remember it is okay to ask for clarification. If a friend says something that just does not make sense, ask them what they mean. This topic is suggested to be targeted for two weeks. Below, you will find a suggested sequence to follow.

WEEK 1

Step 1: Peer Mentored Video

Students and clinician will view a peer-mentored video titled, "Break a Leg." After viewing this video, the clinician and student engage in discussion with questions. Questions may include, "Why did a friend say, 'Break a leg?' Has anyone ever said a funny expression to you? If we don't understand why someone said something, what should we do?"

Step 2: Practice Videos and Role Plays

Clinician and students will view two practice videos titled, "Popstar" and "Heavy Books." After viewing this practice video, the clinician and student will engage in discussion with questions. Questions may include, "What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly." Note: It can be very helpful to video tape students when role playing and then have students watch and rate themselves. (Remember to obtain written parental consent before incorporating photos/videos).

WEEK 1

Step 1: Review Concepts

Week two begins with a review of the previously learned concepts. The concepts of idioms and expressions will be reviewed.

Step 2: Practice Videos and Role-Plays

Students and clinician view three practice videos titled, "Jungle," "Math, Eyes Closed," and "Raining Cats and Dogs." After viewing this practice video, the clinician and student will engage in discussion with questions." The clinician and student will discuss why idioms or expressions are used, why it is important to understand common expressions, and how to react when we are unsure of an expression being used. Additional questions may include, "What were the idioms used? What do you think the speaker meant when they used each idiom? What went right? What went wrong? What could have been done instead? Let's role play this scenario correctly."

SUGGESTED TREATMENT GOALS

Conversational Adaptation

- Will demonstrate ability to establish and maintain up to # turns on conversational topics of mutual interest
- Will demonstrate ability to acknowledge his/her conversational partner's interests by asking up to # relevant questions or making relevant comments
- Will initiate and maintain (up to #) conversational turns around various topics outside of personal interest
- Will demonstrate ability to interrupt conversations using socially appropriate apologies or excuses

Sarcasm, deceit, irony

- Will demonstrate ability to recognize sarcasm, deceit and irony by correctly decoding facial expressions/vocal inflections/tone of voice and making relevant comments to
- Will recognize implied communicative intent (e.g., sarcasm, deceit, irony) by correctly decoding facial expressions/vocal inflections and making relevant comments

Empathy, Peer, Support, Encouragement

- Will demonstrate ability to recognize disappointment, sorrow, sadness by correctly decoding facial expressions/vocal inflections/tone of voice and making relevant comments or asking relevant questions
- Will demonstrate ability to recognize his/her conversational partner's needs (need for empathy, emotional support) by using relevant facial expressions and vocal inflections

Idioms, Expressions

- Will demonstrate ability to respond appropriately to comments containing idioms, expressions or metaphors or politely ask about their meaning if familiar with

Making/Maintaining Friendships

- Will demonstrate ability to establish and maintain up to # turns on conversational topics of mutual interest
- Will demonstrate ability to acknowledge his/her conversational partner's interests by asking up to # relevant questions or making relevant comments
- Will initiate and maintain (up to #) conversational turns around various topics outside of personal interest
- Will demonstrate ability to interrupt conversations using socially appropriate apologies or excuses
- Will demonstrate ability to recognize his/her conversational partner's state of mind/mood (by correctly decoding facial expressions and vocal inflections) by making relevant comments and/or asking relevant questions

Negotiations and Compromise

- Will demonstrate ability to express displeasure and /or accept "no", an unwanted answer, or a loss in a game using socially appropriate responses with adequate tone of voice and facial expressions.
- Will demonstrate ability to politely disagree or state opinion using socially appropriate responses, tone of voice and facial expressions.



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CALL TO ACTION

