

Meet Rosie

Social Competency: Assertiveness

Assertiveness may be defined as the ability to express one's beliefs, wants, or feelings in a self-assured and direct manner (Test, Fowler, Wood, Brewer, & Eddy, 2005). (For more information on assertiveness see http://www.cccframework.org/assets/elementary_tg_assertiveness.pdf.)



Rosie is a 15-year-old high school girl with a diagnosis of autism. Rosie is non-verbal and uses an augmentative and alternative communication (AAC) device for communication at the conversational stage in terms of social emotional engagement. (For more about stages of communication for social-emotional engagement, see <https://www.see-ks.com>.) Rosie receives special education services in both a self-contained classroom and in general education classrooms with her peers. In addition to classes, she works in the library as a student aide and works at a cookie stand before and after school two days a week.

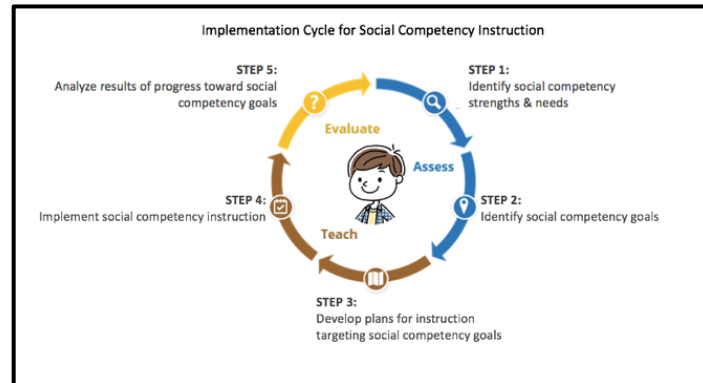
Rosie demonstrates an interest in communicating with others, particularly when she works in the library and at the cookie stand; this willingness to interact and to work independently are strengths that will support her work toward skills involved in assertiveness. Rosie uses her AAC device to communicate, but to gain the attention of her parents, peers, or school staff, she grabs, tugs, or pulls on the arms of their clothing until they acknowledge her. Her team wants Rosie to express her desire to communicate in a way that respects others. Growth in this social competency – assertiveness – will help Rosie interact with others at home, at school, and in the community.

To assess overall skills in initiating conversations, both her special education teacher and father completed the Autism Social Skills Profile (Bellini, 2016) to rate specific skills involved in social communication. This information validated team observations; Rosie needs support to communicate wants and needs respectfully.

Rosie's team used the TASN ATBS Implementation Cycle and Guide below.



Social Competencies: Implementation Guide



Assess: Step 1: Identify social competency strengths and needs:

- Interested in communicating and interacting with others
- Likes to work independently
- Difficulty gaining attention in an age-appropriate manner

Assess: Step 2: Identify social competency goals:

Rosie's goal is to increase her skills in the social competency of assertiveness by initiating interactions in a way that conveys respect for others

Teach: Step 3: Develop plans for instruction targeting social competency goals:

AAC vocabulary and non-verbal communication required in demonstrating assertiveness:

- Teaching age-appropriate non-verbal strategies such as tapping an arm or using gestures to gain attention
- Based on observation of Rosie in general education classes, in the library, at the cookie stand, and based on reports from family members, Rosie's speech and language pathologist reviewed the vocabulary on her device to ensure Rosie has access to words that support initiating social communication. Words and phrases already included that supported this function were the following
 - I need some help!
 - I want ...

- Ideas for words and phrases to add to communication device include the following:
 - *Do you have a second?*
 - *Can I talk to you?*
 - *What are you doing?*
 - *I need a break!*
 - *I'm feeling ...*
 - *Can I help you?*

Lessons to provide opportunities for Rosie to use both the current and new strategies will be provided daily as described in the implementation section.

Role-Playing (or Behavioral Rehearsal) during social groups

- In addition, social groups will allow Rosie to generalize these communication strategies with a small group of peers using role playing. This strategy promotes fluent performance of social skills and social-cognitive strategies for individuals on the autism spectrum (Bellini, Benner, & Peters-Myszak, 2009) so will be effective during social group targeting Rosie's assertiveness skills. (For more information about this practice, see <https://www.ksdetasn.org/atbs/instructional-strategies-that-support-social-competencies>).
- Rosie will practice age-appropriate non-verbal signals such as body positioning, eye-gaze, and gestures for gaining attention. She will also be using her AAC device to practice the new phrases that function to initiate communication in ways that are respectful of other individuals.
- Adult facilitator(s) will plan scenarios to facilitate this practice. For example, Rosie might be expected to practice this skill as peers are having a conversation, looking at magazines, talking on their phones, playing a game, or doing homework. The facilitator will also prompt, as needed, so Rosie's practice is positive and effective at gaining attention to initiate conversation.

Teach: Step 4: Implement social competency instruction:

One-on-one instruction:

- Frequency: taught **daily** by special education teacher and/or SLP
- Location: special education classroom
- Duration: 15-20 minutes per session

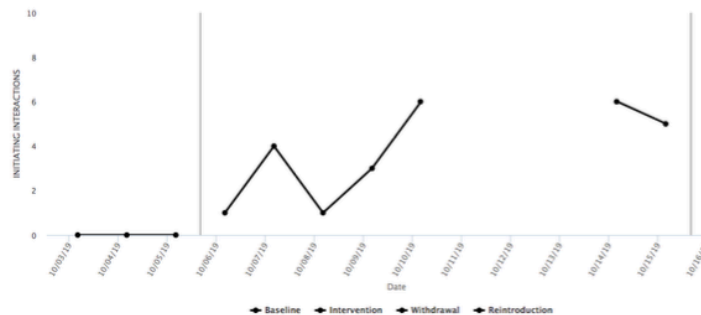
Social groups:

- Frequency: 3 days a week, taught by special education teacher and/or SLP
- Location: Special education classroom during Social Skills class
- Duration: 40 minutes per class period

Evaluate: Step 5: Analyze results of progress toward social competency goals:

The team used opportunity recording data collection to measure progress. Rosie initiates conversations using the non-verbal strategies highlighted above and the new vocabulary on her communication device. (For more information about opportunity recording see <https://www.ksdetasn.org/resources/502>).

Behavior that occurred during **the first fifteen minutes** for Rosie to initiate conversations using non-verbal strategies (taught in direct instruction) and/or the new vocabulary on her communication device (also taught in direct instruction) during daily social group. The graph below baseline data, as well as data for Monday-Friday of one week and Tuesday-Wednesday of the following week.



Notes and Next Steps:

Based on the data, Rosie and her team have modified her plan to support increased generalization of these skills. Discussion for continued growth in the components of assertiveness will include the following:

- Rosie will continue to participate in direct one-on-one instruction three days weekly and participate in the social group. Her team will begin work on expressing wants, needs, and feelings during the conversation after it has been initiated appropriately. They will create a new goal, develop plans, and implement instruction using evidence-based practices.
- In addition, her team will begin to plan for generalization of initiating conversations in her general education classes, in the library, and at the cookie stand.

References

Bellini, S. (2016). *Building social relationships 2: A systematic approach to teaching social interaction skills to children and adolescents on the autism spectrum*. Lenexa, KS: Autism Asperger Publishing Company.

Noonan, P.M. & Gaumer Erickson, A.S. (2017). *The skills that matter: teaching interpersonal and intrapersonal competencies in any classroom*. Thousand Oaks, CA: Corwin.

Test, D.W., Fowler, C.H., Wood, W.M., Brewer, D.M., & Eddy, S. (2005). A conceptual framework of self- advocacy for students with disabilities. *Remedial and Special Education*, 26(1), 43-54.

Rubin, E., Townsend, J. & Vittori, L. (2015). SEE-KS. Social Emotional Engagement- Knowledge and Skills. Retrieved from: <https://sites.google.com/view/seekseducation/home>

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