

Buzolich, Russell, Lunger-Bergh, & McCloskey Revised January 2011

Communication Sampling and Analysis Narrative Report

Name: Joshua Evaluator: Marilyn Buzolich

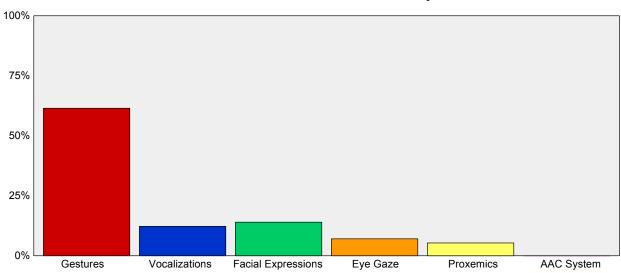
Birthdate: 2 years of age Sampling Date: 07-01-2007

Communication Sampling and Analysis (CSA) is an assessment tool designed for infants, toddlers, and children with multiple physical, sensory, speech, and/or cognitive/linguistic challenges. CSA provides speech/language pathologists an objective (clinical) measure for observing and analyzing communicative behavior in the natural setting. The purpose of the CSA is to capture and qualify the nature and extent of communication behavior of the communicative challenged with partners during interactive settings and contexts. This is important for establishing baseline levels of communicative functioning, setting goals for intervention, and evaluating the effectiveness of treatment. For children with multiple speech, motor, sensory, and cognitive impairments, nonverbal behavior is an integral part of the child's profile at all levels of development; even children who use augmentative communication systems. CSA provides a tool to objectify a process that has been based on anecdotal observation rather than objective data.

For the purposes of this evaluation, Communication Sampling and Analysis (Buzolich, Russell, Lunger-Bergh, McCloskey, 2011) was conducted in the home context(s). The actual sample is attached for reference purposes. Communication was sampled during interactive settings such as Joshua and mom playing in the living room with his toys and provided information regarding the child's means and functions.

The evaluator, as a third party observer, sampled and analyzed 25 interactive events. A summary of the communicator's means is shown below.

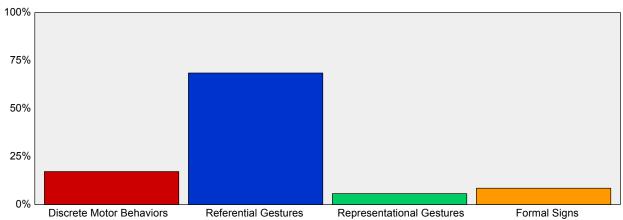
Communicative Means Graph



Of the interactive events sampled, 28% were single modality acts and 72% were multi-modality communication acts.

As shown in the graph above, 61.4% of the child's communication behavior was gestural. Of the gestures, 17% were discrete motor behaviors (e.g. arching back and moving his body forward or bouncing up and down), 69% referential gestures (e.g. pointing, reaching, touching, extending arm toward an object or location), 6% representational gestures (e.g. head nod), and 9% signs (e.g. more, eat).

Communicative Gestures Graph



Vocalizations occurred 3.5% in this sample. Verbalizations occurred 8.8% (e.g. /heh/, /yeah/, /ah/, /duh/, and /geh/).

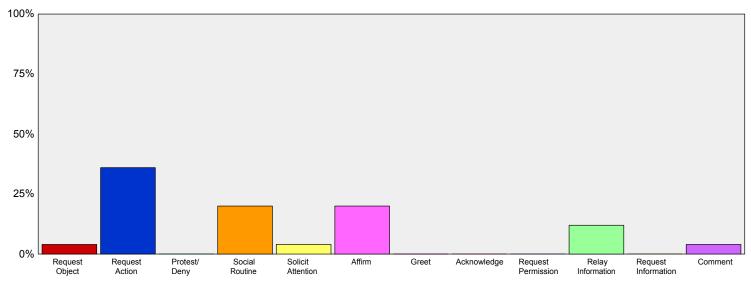
Facial expressions occurred 14% of the time and eye gaze occurred 7%. In this sample

proxemics occurred 5.3% of the time. AAC systems were not used in this sample.

Joshua is primarily using gestures (referential) to communicate. He has limited verbalizations, and is relying on multi-modality communication acts (72%) of the time to convey meaning. Single modality communication acts occurred only 28% of the time and usually when meaning was conveyed with a sign or verbalization. It is not surprising that when using symbolic communication (sign, verbal speech) he is able to make himself understood using single modality communicative means.

A summary of the child's communication functions graph is shown below.

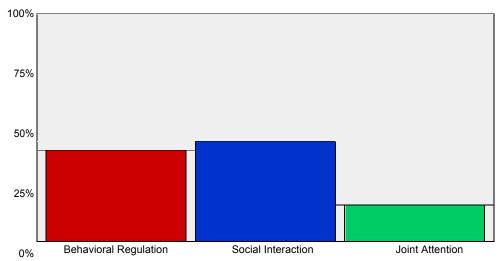
Communication Functions Graph



The child communicated primarily to request actions (36%), request a social routine (20%) and affirm (20%). In addition the child communicated to relay information, request objects, solicit attention, and comment.

A summary of the child's category of communication functions is illustrated on the next page.

Category of Communicative Functions Graph



The child is communicating to regulate behavior 40%, interact socially 44% and establish joint attention 16% as shown above in the figure.

It is clear from the profile that Joshua's language is emerging. He is beginning to communicate to establish joint attention but clearly needs Augmentative Communication. He is not able to communicate enough using gestures (sign) and speech.

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