Disfluency & ASD



Linguistic Approaches to Autism and Neurodevelopmental Disorders



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What is Fluency?

 Fluency/Disfluency describes the skill with which an individual produces forward flowing speech

 Fluency/Disfluency can be viewed as a continuum which varies greatly across time and settings

Speakers are fluent in their speech production if they produce normally long strings of sounds at a normally rapid rate without pausing or hesitation, and with a normal absence of effort Starkweather, 1987

Disfluencies

On-line strategies to self-repair perceived errors

- System self-monitors for errors and appropriateness
- Level of monitoring is context dependent
- When detected errors are sufficiently alarming, the speaker stops and revises the sound, syllable, word, or phrase

Strategies to gain extra time during speech planning and execution

- System stalls by re-executing a previous unit
- Allows time for "catching-up"
- Disfluency type hints to the nature of the deficit

Disfluencies

Breakdown in the linguistic plan

The individual struggles with organizing and formulating what they want to say

- Phrase Repetitions Conceptualization/syntactic complexity
- Whole Word Repetitions Word finding
- Part Word Repetitions Phonological
- Pauses & Interjections Processing difficulties
- Abandoned Words/Phrases Topic maintenance

Breakdown in the timing or sequencing of the motor plan

- The individual knows what they want to say but motor plan is lacking
- Results in sound/syllable repetitions, prolongations & blocks

What is Stuttering?

Stuttering is a neurologically based disorder which impairs an individual's ability to time and sequence the underlying movements necessary for speech

This often results in:

- The characteristic stuttering behaviors
- A lack of confidence in one's ability to effectively communicate and a sense of "losing control"
- The individual employing increased tension, struggle or pushing to try to force the words out
- The anticipation of future speech breakdowns causing the individual to avoid talking, switch words or do anything to hide the overt behaviors

Differential Diagnosis

	Typical Disfluencies	Stuttering	Atypical Disfluencies
Type of Behavior	 Whole-word & phrase repetitions Sentence Revions Interjections/Fillers 	Whole & part word repetitionsProlongationsBlocks	Whole or part word repetitionsSound prolongationsSound insertions
Location of Behavior	Primarily between words	Within wordsTypically initial positionTendency to cluster	Medial and/or final position
Frequency	 < 10% of Syllables 	> 4% of syll.2x as disfluentNoticed >10%	?
Duration	1-2 Repetitions	3 < RepetitionsTruncated pauses between repetitions	?
Reactions	 Typically no reactions & minimal awareness 	Secondary behaviorsAvoidancesFears/Anxiety	Typically no reactions & minimal awareness

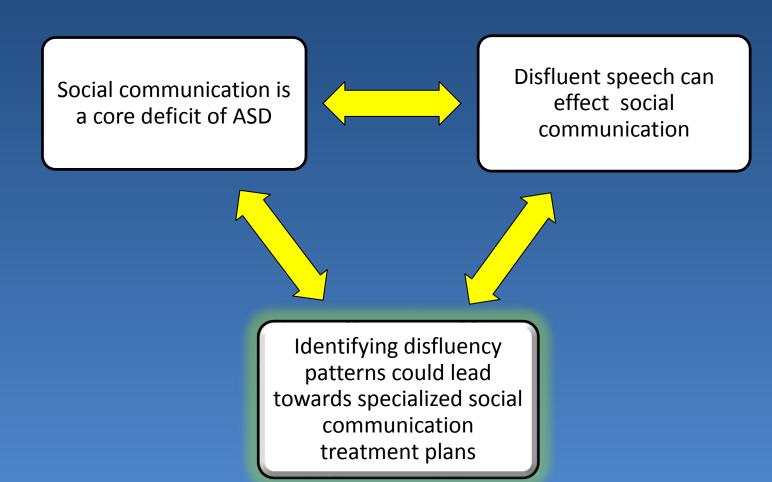
Fluency & ASD

Case reports and case series have suggested a higher prevalence of disfluencies in individuals with ASD. These include:

- Typical disfluencies
- Stuttering-like disfluencies
- Atypical disfluencies

(Lake et al., 2011; Scott et al., 2013; Shriberg et al., 2001; Scott et al., 2006; Sisskin, 2006)

Why study disfluency and ASD?



Fluency & ASD

Study	Authors	Year	Pop	Finding
Speech and prosody characteristics	Shriberg, Paul,	2001	15 HFA	CG > fluent than HFA & AS
of adolescents and adults with high-	McSweeney,		15 AS	• HFA > PWR, WR, REV than CG
functioning autism and Asperger	Klin, Cohen &		53 CG	• AS > PWR than CG
syndrome	Volkmar			
Brief Report: Relations between	Paul, Shriberg,	2005	(Same	Phrasing errors do not appear to
prosody performance and	Mcsweeny,		as	have any significant effect on
communication and socialization	Cicchetti, Klin, &		Above)	listeners' judgments of their
ratings in high functioning speakers	Volkmar			social/communication skill
with autism spectrum				(Vineland)
disorders				
Listener vs. speaker oriented	Lake,	2011	13 ASD	ASD < Filled pauses than TDP
aspects of speech: studying the	Humphreys, &		13 TDP	ASD > Silent pauses than TDP
disfluencies of individuals with	Cardy			ASD < Rev than TDP
autism spectrum disorders				ASD > Rep than TDP
Preliminary study of disfluency in	Scaler Scott,	2014	11 AS	No diff in TWD
school-aged children with autism	Tetnowski, Flaitz,		11 CWS	No diff in % NSD
	& Yaruss		11 TDP	CWS > SLD than AS
				• AS > SLD than TDP
				No differences in WFD

Mutual Questions

Can the disfluencies distinguish children with ASD from typically developing peers?

Do disfluency rates/types correlate with parent/clinician measures of social impairment?

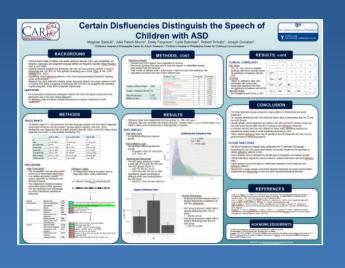
Poster Title: "Disfluencies Distinguish the Speech of Children with Autism Spectrum Disorder" Authors: Meghan Santulli, Julia Parish-Morris, Emily F. Ferguson, Leila Bateman, Robert T.

Schultz, Joseph G. Donaher

Session date/time: Friday, May 13, 2016, 5:30 PM - 7:30 PM

Baltimore Convention Center, Hall A.

Certain Disfluencies Distinguish the Speech of Children with ASD



79 Children aged 6-17

Categorized into three groups:

- ASD N/45
- Non-ASD (mixed clinical) N/17
- Typical Dev. Children N/17

Data from previously recorded clinical evaluations

ADOS (Module 3-expressive language skills with range of sentence types and grammatical forms)

Results: Disfluency

No significant differences in TDL

Unique patterns of disfluencies

ASD produced significantly more Stuttering-Like Disfluencies than Non-ASD & TDC

ASD produced significantly more Atypical Disfluencies than Non-ASD & TDC

TDC & Non-ASD *did not differ* on any disfluency measure

Results: Clinical Measures

Social Impairment: Parent Report - SRS

Clinician Report - ADOS

For ASD group TDL, SL, NSL, AD correlated with ADOS score but not with SRS

For TDC higher SL disfluency rates associated with more negative SRS scores

For Non-ASD disfluency rates *did not correlate* with ADOS or SRS scores

Future Directions

- Future research could shed light on relationships between an ASD diagnosis and disfluency patterns
 - Examine the Non-ASD group more closely to gain insight into the specificity of certain disfluency patterns in ASD versus ASD+
 - Investigate disparities in specific types of Non-SL disfluencies i.e. interjection use between groups
 - Explore factors impacting relationship between disfluency and social impairment
- Results from a larger sample could inform targeted treatments for social communication impairments and disfluencies in ASD and other neurodevelopmental disorders