

## Background

- > Autism spectrum disorder (ASD) is characterized by difficulties with social communication and interaction as well as repetitive behaviors and restricted interests (American Psychiatric Association, 2013)
- $\succ$  ASD entails deficits in understanding the **mental states** of others (Baron-Cohen, et al., 1985)
  - Children with ASD produce fewer words referring to mental states (Tager-Flusberg, 1993)
- $\succ$  Certain language impairments, such as difficulties with personal **pronouns**, are characteristic of ASD:
  - Individuals with ASD produce fewer pronouns in narratives (Colle et al., 2008)
- Speech errors or disfluencies increase under conditions of **stress** (Carroll, 1986)

### **Research Question**

**Do fluent children and adolescents** with ASD differ from typical children and adolescents in their production of pronouns, mental state expressions, and disfluencies when telling stories under stressful conditions?

### **Participants**

- > 20 typically-developing (TD) children and adolescents (8 females) and 20 children and adolescents with mild ASD (3 females) and fluent language.
- $\succ$  Matched for chronological age, English ability on the Clinical Evaluation of Language Fundamentals (CELF), and nonverbal intelligence on the Kaufman Brief Intelligence Test (KBIT).

Participants (n=40)	Mean Age (Years)	Mean CELF	Mean KBIT	
TD Participants (n=20)	13.8 (SD = 2.34)	109 (SD = 10.67)	<mark>110.0 (</mark> SD = 11.9)	
Participants with ASD (n=20)	13.7 (SD = 2.21)	106 (SD = 19.99)	109.95 (SD = 20.8	

# Linguistic Differences in the Production of Narratives by **Adolescents with and without Autism Spectrum Disorder** Bryn McElroy, Megan Igel, Sarah Kingsbury, & Theresa Adams (Mentor: Aaron Shield, Ph.D.)

Department of Speech Pathology and Audiology, Miami University - contact: <u>mcelrobn@miamioh.edu</u>

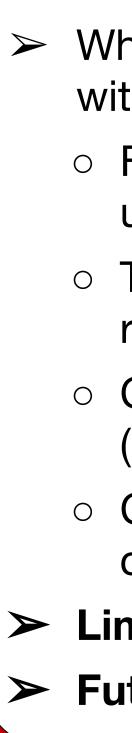
### Method

- Data collected at Emerson College
- Used the Trier Social Stress Test, a laboratory procedure used to induce stress and measure its effects (Kirschbaum, Pirke, & Hellhammer, 1993)
- $\succ$  Adapted the original narrative prompt for children with ASD: children were asked to complete a story about going to visit an old man in a big spooky house
- $\succ$  In order to induce stress, children were asked to recite the ending of the story in front of a panel of judges viewed on a screen through a fake Skype call (see picture below)
- Participants had 3 minutes to tell their story.



- > Data coded at Miami University
- Audio files were recorded and imported into ELAN multimodal coding software.
- $\succ$  Stories were coded for speech, personal pronouns, mental state terms, and speech disfluencies.
  - Disfluencies included: stutters, filler words, false starts, corrections, repetitions, phonological processes, prolonged syllables, tongue clicks, neologisms, and pronoun number mismatches.
- Reliability was performed by each member of the team checking each other's work and discussion coding at weekly meetings.

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### **Results**

# **Disfluencies**: Children with **ASD** produced more stutters (M = 4.5) and **repetitions** (M = 6.46) than TD children (M = 1.47, 3.63), p = 0.05. TD children produced more prolonged syllables (M = 3.95) than children with ASD (M=1.6), p = .05. • The groups did not differ on any other category. Disfluencies Stutter Filler North False stal orrection

■Typical ■ASD

• TD children produced nominally more mental state **terms** (*M*=10.55, *SD*=5.94, range 4-23) than children with ASD (*M*=8.75, *SD*=5.02, range (0-20), p = .15, ns.• TD children produced a nominally higher number of different mental state terms (*M*=6.9, *SD* 3.68, range 3-18) than children with ASD (M=5.65, SD 3.69, range 0-16), p = .15, ns. • TD children produced more cognition and affect terms than children with ASD.

#### Pronouns:

• TD children produced **nominally more pronouns** (M=62.9, SD=16.1, range 35-94) than children with ASD (M=52.85, SD=23.76, range 13-95), however, this difference was not significant, p = 0.13.

• The two groups did not differ in the overall proportion of pronouns that had clear antecedents (TD: 56.3%; ASD: 58.8%) versus ambiguous antecedents (TD: 43.6%; ASD: 41.1%).

• TD children produced more **3rd person pronouns** with **clear referents** (M=18.4, SD=11.34) than children with ASD (M=12.45, SD=8.94), p < .05. • Children with ASD produced more **3rd person pronouns** with **ambiguous referents** (M=11.2, SD=10.68) than TD children (M=6.1,=SD 6.82), p < .05.

### Discussion

When language ability is controlled for, linguistic differences between adolescents with and without ASD are quite small. However, we found that:

• Fluent children with ASD showed evidence of increased stutters and repetitions under stressful conditions.

• TD children may pay more attention to **suprasegmental** aspects of speech, thus resulting in more **prolonged syllables** than children with ASD.

• Children with ASD produced fewer mental state terms -- especially cognitive (e.g., think, know) and *affective* (e.g., scared, happy) terms -- than TD children. • Children with ASD produced more ambiguous 3rd person pronouns than TD

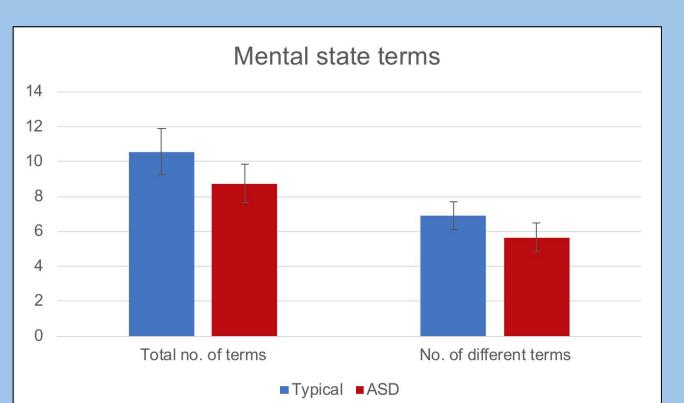
children, which may reflect differences in theory of mind.

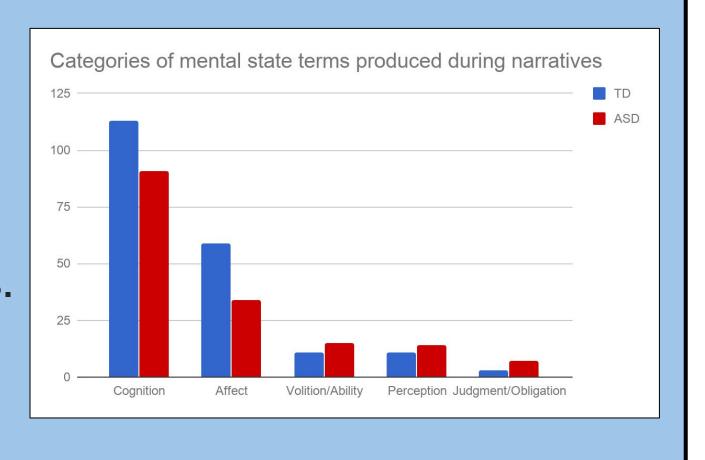
 $\blacktriangleright$  Limitations: sample size, data quality, and lack of a control (low-stress) condition. > Future Directions: analysis of prepositions, temporal terms, and spatial terms.

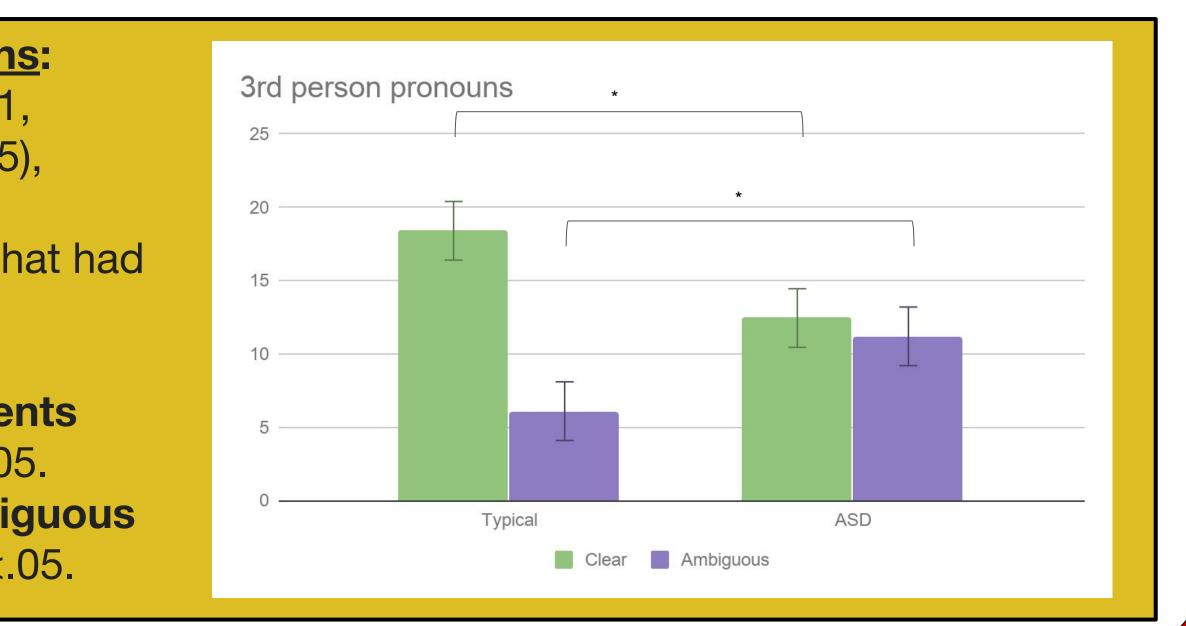
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#### Mental state terms:







### References

- American Psychiatric Association (2013). Diagnostic and statistical manual of mental disorders (5th ed.). Arlington, VA: American Psychiatric Publishing. Baron-Cohen, S., Leslie, A., & Frith, U. (1985). Does the
- autistic child have a "theory of mind"? Cognition, 21, 37-46.
- Carroll, D. (1986). *Psychology of language*. Pacific Grove, CA, USA: Brooks/Cole Pub. Co. (pp. 253–256).
- Colle, L., Baron-Cohen, S., Wheelwright, S., & van der Lely, H. J. (2008). Narrative discourse in adults with high-functioning autism or Asperger syndrome. Journal of Autism and Developmental Disorders, 38, 28-40. Kirschbaum, C., Pirke, K. M., & Hellhammer, D. H. The 'Trier
- Social Stress Test'—a tool for investigating psychobiological stress responses in a laboratory setting. Neuropsychobiology, 28, 76-81.

Tager-Flusberg, H. (1993). What language reveals about the understanding of minds in children with autism. In: Baron-Cohen, S., Tager-Flusberg, H., & Cohen, D. J. (eds.), Understanding other minds: Perspectives from autism. Oxford: Oxford University Press (pp. 138-157).