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#### ABSTRACT

An action research project implemented a program for improving the conversational skills of language impaired high school students. The students attended high school in a northwest suburb of Chicago, Illinois. Poor conversational skills in the language impaired students were documented through teacher observation, teacher assessment, and self-assessment. Analysis of probable cause data indicated that physically based deficits, visual misperceptions, lack of linguistic sophistication, and expressive language deficits may have resulted in conversational skill deficits. Also mentioned were lack of understanding of social relations and lack of familiarity with social role variables expressed in language in their community. A review of solution strategies suggested by knowledgeable authorities indicated a variety of strategies. The method chosen was a collaborative therapy model for speech and language therapy to deliver a social skills program in conversation using cooperative learning groups. Post-intervention data indicated an increase in the frequency and quality of student communication with peers and adults. Data also indicated an increase in students' relationships involving conversation. A post-intervention parent survey reported greater sociability at home. (Contains 22 references and 6 tables of data; appendices contain rules of conversation; a conversation rubric; advice on eye contact, speaking volume, staying on a conversation topic, and starting and ending a conversation; listening strategies; a teacher observation checklist; a parental release form; and a parent observation rubric.) (Author/RS)

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## IMPROVING CONVERSATIONAL SKILLS OF LANGUAGE IMPAIRED STUDENTS THROUGH COOPERATIVE LEARNING

## Donna Joseph

An Action Research Project Submitted to the School of Education in Partial Fulfillment of the Requirements for the Degree of Master of Arts in Teaching and Leadership

Saint Xavier University & IRI/Skylight

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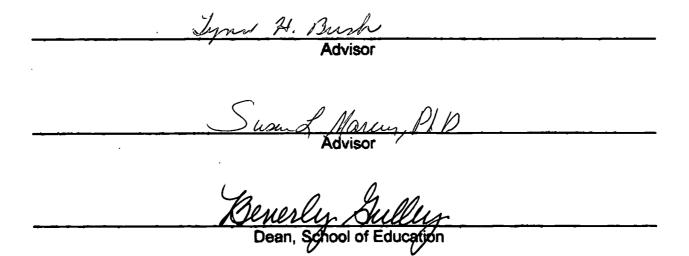
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# IMPROVING CONVERSATIONAL SKILLS OF LANGUAGE IMPAIRED STUDENTS THROUGH COOPERATIVE LEARNING

## Donna Joseph

#### ABSTRACT

This report describes a program for improving the conversational skills of language impaired secondary students. The students attend high school in a northwest suburb of Chicago. Poor conversational skills in the language impaired students has been documented through teacher observation, teacher assessment, and self-assessment.

Analysis of probable causes indicated that physically based deficits, visual misperceptions, lack of linguistic sophistication, and expressive language deficits may result in conversational skill deficits. Also mentioned were lack of understanding of social relations and lack of familiarity with social role variables expressed in language in their community.

A review of solution strategies suggested by knowledgeable authorities indicated a variety of strategies. The chosen method for this project was a collaborative therapy model for speech and language therapy to deliver a social skills program in conversation using cooperative learning groups.

Post-intervention data indicated an increase in the frequency and quality of student communication with peers and adults. Data also indicated an increase in student relationships involving conversation. A post-intervention parent survey reported greater student sociability at home.



#### CHAPTER 1

#### PROBLEM STATEMENT AND TEXT

## General Statement of the Problem

Poor conversational skills among targeted secondary school language impaired students result in their not successfully conversing with peers or adults in their environment. Evidence for the existence of the problem include teacher observation, parent interview, and teacher journal entries.

#### Immediate Problem Context

This project will target a large high school in a district located in the northwest suburban area of Chicago. The specific students involved are language impaired students who are part of the speech and language therapy caseload at the school.

The high school involved is one of three secondary schools in the district. The students attending the targeted school reside in a variety of neighborhoods ranging from lower to upper middle class. They come from a wide range of cultural backgrounds. Approximately 61.8% of the students in the school are Caucasian. Of the remaining students, about 26.4% are Asian/Pacific Islanders, 6.9% are Hispanic, 4.5% are Black, and 0.4% are Native American. The total number of students in the



school is 2,507. Additionally, of these students, 11.3% are from low-income families. Approximately 12.1% are limited English proficient. In 1995 the graduation rate of students was 91.1% (District 207, 1995).

The school staff consists of 177 faculty members, 19 department chairmen and administrators, and one permanent substitute. Of that number, 51.5% are male and 48.5% are female. Within the district 71.0% of the staff are teachers with a Master's Degree or above and their average teaching experience is 14.9 years. Presently the average class size is 21.4% (District 207, 1995).

The building principal is assisted by an assistant principal of students and by an assistant principal of staff. There are three disciplinary deans of students in the building as well.

The school staff is organized into departments, with a department chairman in the lead of each. The school receives services from auxiliary personnel which includes one school nurse, one speech and language therapist, two psychologists, three social workers, and part-time occupational and physical therapists. The speech and language therapist, one of the psychologists, one of the social workers and the part-time physical and occupational therapists work within the Special Education Department. There are 187 students designated as needing special education services in the building. There are 40 special education staff members in the building.

The speech and language therapy program in the targeted high school is administered by one speech and language therapist. The number of students in the caseload of the therapist is determined by current student need and is generally



between 60 and 65 students. Presently there are 63 students, 23 of which are developmentally disabled, 15 are learning disabled, 10 are in regular education, 9 are multi-impaired, and 6 are physically handicapped. These students exhibit a variety of speech problems in the areas of articulation, voice, fluency, language, and vocabulary. Of these students at least 92% are working on developing their language skills as well as on other aspects of speech.

The original building was built in 1929 and has been expanded on over the years. It has been extremely well cared for. The classroom are large and well lit. The library is up to date with the latest in technology. The technology in the total school is constantly being updated.

## The Surrounding Community

Portions of five communities are served by the targeted high school. The five communities differ somewhat in size, average family income, and average home price. Community A has a population of 38,120 people, an average family income of \$94,650 and an average home price of \$233,397. Community B has a population of 22,408, an average family income of \$47,808, and an average home price of between \$125,000 to \$149,999. Community C has a population of 53,223 people, an average family income of \$52,856, and an average home price of \$152,500. Community D has a population of 28,284 people, and an average family income of \$45,822. Community E has a population of 36,175 people and an average family income of \$61,048. Apartments in the communities rent for an average of \$550 a month. The communities are comprised of a very diverse population as evidenced by the fact that



52 countries of origin are represented in the high school's student population.

The total school district currently operates three high schools. Central administration is headed by a superintendent who is supported by a staff of assistant superintendents and directors. Each assistant superintendent and director has a staff to aid them.

The district's scores on the Illinois Goals Assessment Program shows the district meets state standard in English, mathematics, reading and science reasoning. Although the scores in writing show dramatic improvement over past years, they also indicated that reading and writing at two of the three high schools need attention. The information from these tests was used to help establish School Improvement Plans.

Teachers in all disciplines in the school district indicated their concerns about reading and writing skills of many of the students. A recommendation was made for more time spent on developing student basic skills before more sophisticated topics are taught. A recommendation was also made for departments to relate their programs to careers and the real world so that students understand the connection between work in school and future careers.

#### National Context of the Problem

A language disability is defined as a severe difficulty in some aspect of listening, speaking, reading, writing, or spelling, while skills in other areas are age-appropriate (Lockerson, 1992). Students who exhibit language disabilities in the area speaking are greatly affected in their ability to function at school, at home, and in the community due to a lack of interactive conversational skills.



Halliday (1978) provided succinct description of the relationship between children's language experiences and their comfort level in school. He felt that certain ways of organizing experience through language and of participating and interacting with people are necessary to success in school. He states, the child who is unable to use this type of verbal exploration in this type of interpersonal context is not at home in the educational world.

Charlann S. Simon (1991) states in her writing that learning cannot be separated from language. Many students cannot comprehend texts or engage in discussions. She says in addition they cannot use language to talk about language (i.e. engage in meta linguistic conversations).

Through communication we establish interactions with others. Charlann S. Simon (1991) states it is predictable that many students with language deficits will experience social interactional problems. These communication deficits are manifested socially. As stated in Simon (1991), Donahue and Bryan (1984) state that one's level of communicative development is a key factor in promoting or inhibiting peer acceptance. Larson and McKinley (1987) observed the following nonverbal communication problems in adolescents with language disorders: a.) failure to correctly interpret facial expressions and gestures with a spoken message, b.) significantly less eye contact than others, and c.) inappropriate maintenance of distance during conversation. It becomes a question of how to help these adolescents with social interaction.

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#### CHAPTER 2

#### PROBLEM DOCUMENTATION

## Problem Evidence

During the past school year, various teachers at the targeted high school have made observations and comments to the speech and language therapist indicating concern for the language impaired students in their classes. These comments have been recorded in the therapist's daily journal. The teachers have indicated that without a grasp of language many students have no social life. It would seem that not having basic conversational skills, these students are so out of the norm that no other students want to interact with them in or out of the classroom. They are perceived as being strange or more disabled than they really are.

The teachers stated that the language impaired students are not successfully conversing with peers or adults in their environment. The students often do not interact with peers or teachers unless the contact is initiated by the other person.

Even at that time, they may not respond to the peer or teacher in appropriate manner.

The evidence of poor conversational skills among language impaired students is apparent from these informal teacher comments recorded in the therapists journal and also from formal data collection concentrating on the conversational skills of nine



language impaired students who are enrolled in the course, "Effective Communication," at the targeted high school. A teacher observation checklist, a conversation rubric form, and a parent survey form were developed by the researcher to collect data.

The teacher observation form was utilized to gain baseline knowledge of each student's basic social and conversational skills within the classroom. A summary of the categories and student behavior is presented in Table 1.

Table 1

Conversation Observation Checklist September 6, 1996 Pre-Intervention

Number of Students

Criteria	Frequency	Sometimes	Never	
Greets Teacher	2	3	4	
Greets Other Students	1	4	4	
Responds Verbally to others	0	9	0	
Initiates a Conversation	0	3	6	
Sustains a Conversation	0	0	9	

The social isolation of these students becomes apparent in looking at the collected data. Of the nine students observed, none of them were able to spontaneously sustain a conversation. All of the students sometimes responded to the verbal approaches of others, however none of them consistently do so. Sixty-six



percent of the students never initiated a conversation. Thirty-six percent never even greeted the teacher or other students.

Each student was also observed during an attempt at a spontaneous conversation. Their conversational skills were assessed through the use of a conversation rubric form.

Table 2

Conversation Rubric Form Sept. 6 -- Sept. 9 Pre-Intervention

Number of Students

Criteria	Not Yet	Not Bad	Ah Ha!
Greeting	4	4	1
Eye Contact	4	5	0
Non-Verbal Communication	1	6	2
Participates in Conversation	1	7	1

As can be seen by the data, there is one student in the class who does not communicate in any way with others in the school environment. Three other students do not greet others, or use eye contact. However they will respond to a greeting, and answer questions when approached by others. Fifty-five percent of the students do exhibit some emerging conversational skills such as saying "Hi," using some eye contact, and a neutral facial expression.



To determine what the student's conversational skills were in a social context other than their school, a parent survey form was sent home. The results are as follows in Table 3.

Table 3

Parent Survey Form Sept. 6 -- Sept. 9 Pre-Intervention

1.) Child speaks to parents throughout the day. Communicative Constant Chatterbox A clam 4 4 1 2.) Child participates in family activities. No social Limits Closed bedroom Door Communicative 3 4 2 3.) Child initiates conversation. Sometimes **Always** Never 3 3 3 4.) Child responds to the social approaches of others. Never Sometimes Always

The parent survey form indicated that in the home environment some students do become more communicative, while others remain isolated. Of the students, 44% are judged by their parents to be "a Clam" at home and isolated behind their

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bedroom door. Thirty-three percent never initiate a conversation with their parents. However, 33% are judged to always initiate conversations and always respond to the social approaches of others. Fifty-five percent of the students speak to their parents throughout the day and participate in family activities.

#### **Probable Causes**

Due to the nature of the problem of language impairments the causes of poor conversational skills are not site based, but appear to be based in the student's actual disability. The literature states that the language impaired child seems to always struggle. There is always a social situation to be handled, in school, at home, or in the community. Socially disabled youths face a world of loneliness and isolation (Waldo & Mayo, 1986). In the past, professionals have viewed the social interactive difficulties of children with language disabilities or impairments as products of either school failure or some intrinsic psychological deficit (Spafford & Grosser, 1993). Presently, other causal factors have been identified.

One causal factor of interactive differences of language impaired individuals appears to be misperception and faulty interpretation of social situations. These misperceptions may be based in actual physical or neural problems (Spafford & Grosser, 1993). Pathological involvement of neural processing of auditory and visual inputs may account for misreading social cues. These language impaired students tend to perceive social situation as less friendly and show less empathy to their peers. They tend to have difficulty making and maintaining friends. Spafford and Grosser (1993) state that Grisham and Resley (1986) reported that parents, teachers, and



peers perceived some children with language disabilities as socially deficient in interpersonal interactions.

A second causal factor which may result in poor interpersonal communication for the language impaired individual is a lack of linguistic sophistication (Spafford & Grosser, 1993). Language is a linguistic coding system. To be an effective communicator a person must have a reasonable command of the linguistic aspects of the communication code being utilized (phonological, morphological, syntactic, and semantic elements). Language impaired individuals can have deficits in any of these areas which may present as sentence form irregularities, problem with sentence function, or problem with style of discourse. This may greatly affect communication (Simon, 1991). This lack of linguistic sophistication as well as difficulty interpreting and sending non-verbal messages (facial expression, eye contact, etc.) greatly affects interpersonal contacts (Simon, 1991).

A third causal factor for interactive difficulties of language impaired individuals is a problem with the components of conversational skills (Simon, 1991). Individuals may have problems with attentional skills (eye contact), topic maintenance, ability to recognize or utilize clarity in a message, or adjusting to the different roles people have in a conversation (Simon, 1991). Also often problematic for the language disabled individual are difficulties with word meanings, off target responding, inaccurate word selection, word retrieval problems, inability to tie together the ideas in a sentence or discourse, and inadequate topic closure (Simon, 1991). Problems in the above mentioned areas have an effect on an individuals ability to interact socially with other



people.

A fourth causal factor for interactive difficulties of language impaired individuals is a lack of understanding of how things are done linguistically and communitively in the culture or context in which they find themselves (Gerber & Rees, 1992). More than an understanding of phonology and grammar is needed to understand the social rules for language use in a culture or context. Language impaired individuals may fail to understand the dimensions of speaker-listener relations or the speaking options in these relations. They may not correctly perceive the speaking options in these relations, or they may not correctly perceive the speaking options in a specific context. They may not know when to speak or not speak, when to change the topic of a conversation, or what word or phrase to choose in a specific context (talking to a friend as versus talking to an adult) as stated by Gerber and Rees (1992). Study findings support the hypothesis that difficulties in social interaction among the language impaired stem more from their poor understanding of social relations than from their structural linguistic skills (Gerber & Rees, 1992).

It becomes apparent that the following causes are the major reasons for language impaired students exhibiting poor conversational skills:

- 1. Misperception and faulty interpretation of social situations.
- 2. A lack of linguistic sophistication.
- 3. Problem with the components of conversational skills
- 4. A lack of understanding of how things are done linguistically and communitively in the culture or context in which the individual finds himself.



#### CHAPTER 3

## THE SOLUTION STRATEGY

## Literature Review

The growth in the understanding of communication processes has had effect on the related language intervention approaches to language impaired children. One therapeutic approach or solution to language impairment is a clinical approach as described by Koenigsknecht, Lee, and Mulhern (1975). In this approach, children are seen by a speech and language therapist in language groups in a clinic or school. Language is presented to them in a controlled developmental sequence, hopefully preserving the natural child-adult interaction. There is a constant shift for the child from speaker to listener in a very controlled story format. The hope is that the children will be led to formulate language, not merely to imitate (Koenigsknecht, Lee, & Mulhern, 1975).

A second approach to speech and language therapy for the school-age child is described by Adele Gerber and Diane Bryen (1981). In this approach, the speech and language therapist collaborates with the teacher to provide not only training for the language impaired child in a pull-out clinical method but also to help devise



compensatory procedures in the classroom to ease the processing load in the child's daily school life. Compensatory strategies and remedial training procedures are administered concurrently.

Vicki Lord Larson and Nancy McKinley (1987) recommend both direct therapy for language impaired students through language groups and collaboration with the teachers in a secondary school setting. They recommend group intervention unless the student's communication level is incompatible with existing groups or his basic communication behaviors are very poor. They recommend the group situation so that conversational skills and pragmatic communication behaviors can be practiced. However, this language group is pulled out of the natural context of the classroom and other students who are not language impaired.

In recent years, since the mid-1980's, professionals began to question the "medical model" or "pull-out model" as an approach to educational and language problems (Simon, 1991). An alternative method as stated by Coles in Simon (1991) is to focus on the dynamics of the interactional context. In particular, teaching individual language skills to language impaired adolescents does not give them the tools they need to interact in their everyday environment. The result is often that the students can communicate in the therapy setting but not outside the therapy room (Simon, 1991). Therapists should be oriented toward the context in which communication occurs.

Students do not know instinctively how to interact effectively with others (Johnson & Johnson, 1990). One means to achieve social communication and



conversation are cooperative learning groups within the classroom. Considering that conversation is a group activity between two or more people, it makes sense to look at the use of cooperative learning as a means of developing the student's interactive language and social skills. Cooperative learning is the use of small groups so that students work together to increase their own and other's learning. The research indicates that cooperative learning promotes greater productivity, more positive relationships, and greater psychological health than individualistic efforts (Johnson & Johnson, 1992). Structuring situations cooperatively results in interaction; structuring situations individualistically results in no interaction among students (Johnson & Johnson, 1992).

Further research has shown cooperative learning groups have a positive affect on language acquisition. A study was conducted at Cook Junior High School to learn teachers' attitudes concerning opportunities for students to respond in complete sentences or to ask questions. Research revealed that grouping and discussion led to an increase in oral communication activity (Bettis, 1995). Spencer Kagan (1995) in examining language acquisition and it's variables (input, output, and context) reveals that cooperative learning has a dramatic positive impact on almost all of the variables critical to language acquisition. There is a suggestion that cooperative learning would also facilitate learning of English as a Second Language.

Research has proven it to be true that cooperative groups have benefitted second language acquisition. Steven McGuire (1992) studied cooperative learning groups as a way to teach English as a Foreign language in Japanese universities.



Results of a study conducted at a university show cooperative learning groups out performed individual learners. Cooperative groups worked equally as well in teaching limited English speaking students (language impaired) and English as a Second Language Students. Pierre Wigglesworth (1992) in his article about teaching sixth grade social studies in Glendale, California illustrates through case studies the effectiveness of using cooperative learning with limited English proficient students.

Cooperative learning groups have not only proven to be effective in the above cases but also with students with disabilities. Erin Dugan and Others (1995) used cooperative learning to integrate two students with autism into a fourth grade social studies class. Benefits were noted for the targeted students and their peers for academic outcomes as well as social interactions. Malka Marglit (1995) studied the effects of small-group discussions, transfer to real-life conflicts, and teacher-guided work with 73 students (ages 11 to 15) with mild intellectual disabilities. Interactive social competence gains were made.

According to Daniel Holt (1992), cooperative learning is a valuable strategy for secondary students, especially useful for students with linguistic differences.

Cooperative learning offers a method for managing diversity in a low-risk environment and increases opportunities for social development.

Cooperative learning is a teaching strategy that promotes the positive interaction of children in small groups. As such it is also beginning to be used by speech and language therapists. Therapist Terry L. Perry (1990), states that cooperative learning lends itself beautifully to the public school clinician and is an



effective tool for therapy. She utilizes it to help students develop new friendships, responsibility, and cooperation. Therapist Elise Hazel (1990), also urges speech and language Therapists to use cooperative learning. She has found it very effective in promoting carryover of learned language skills to everyday speech and language.

## Project Objectives and Processes

As a result of social skill training in cooperative learning groups, during the period of September 1996 to january 1997, the targeted language impaired secondary school students will improve their conversational skills as measured by teacher observation, teacher assessment, and self-assessment

In order to accomplish the project objective, the following processes are necessary:

- 1. Speech and language therapist will collaborate with the teacher in the classroom of the targeted students.
- Students will be put in base groups attempting to balance groups in terms of physical and intellectual impairments.
- 3. Social skill units targeting conversational skills will be developed for use with base groups. (solution)
- 4. Role-playing activities to utilize these social skills will be developed. (solution)
- 5. Natural conversational activities for students to engage in and which will be assessed, will be developed. (solution)

## Project Action Plan

This action plan is presented in outline form by process statement. The plan covers the time from September 1966 to January 1997. The action plan follows:



## A. Delivery model

- Speech and language therapist collaborates in the classroom within the special education curriculum.
- 2. Collaboration will be for 50 minutes; twice a week.
- Carryover by the classroom teacher will be emphasized the remaining three periods a week.

## B. Base groups

- 1. Base groups will be balanced by physical and mental abilities.
- 2. Size of group is two to four students.
- 3. Formal instruction and large group interaction with the speech and language therapist will be for 15 minutes, two times a week.
- 4. Base group cooperative learning activities for thirty minutes, two times a week.

## C. Social skills taught for conversational skills.

- Basic skills are eye contact, non-verbal cues, turn-taking (ask a question, answer, make a comment), stay on topic, and signal transitions.
- Distribute rules of conversation (Gajewski & Mayo, see
   Appendix A).
- Quick review of basic skills during each 15 minute teaching session two times a week.
- 4. Two student pair practices of a conversation during 15 minute



- teaching session.
- 5. Student assessment rubric (see Appendix B) filled out when appropriate by student and teacher.
- D. Cooperative learning activities for base groups. The activity will be introduced during a weekly 30 minute cooperative learning group. It may take several 30 minutes times for the groups to complete and assess the activity. Two 30 minute times are available weekly.
  - 1. Eye contact (Gajewski & Mayo, p. 32, see Appendix C)
  - 2. Volume (Gajewski & Mayo, p. 42, see Appendix D)
  - 3. Stay on topic and switching topic (Gajewski & Mayo, p. 64, 65, see Appendix E)
  - 4. Listening (Gajewski & Mayo, see Appendix F)
  - 5. Starting, maintaining and ending a conversation (Gajewski & Mayo, 78, 79, 83, see Appendix G)
  - 6. Assessment of the above cooperative learning group activities will be completed through teacher observation and grading of work sheets completed in the base group.
- E. Role playing activities utilizing targeted conversational skills to be planned in the 30 minute cooperative learning group time and presented to the whole group in the last 10 minutes of group time.
  - Eye contact Role play two short examples of proper and improper eye contact.



Home situation - You borrowed your siblings walk-man and broke it. Tell him or her.

School - Your friend received an A on the test, you received a D. Congratulate the friend.

Community - Complete a job interview.

## 2. Volume

Home - Your shy sister talks in a whisper. Help her.

School - Tell your teacher five facts about yourself the first day of school.

Community - Ask a store clerk where to find an item.

## 3. Staying on topic

Home - Talk to parents about too many chores at home.

School - Act as a tour guide to a new student in your school.

## 4. Listening

Home - Talk to a younger brother about a problem he is having.

Listen to him tell you the problem.

School - Hold a conversation with a friend at lunch.

Community - Listen to the interviewer at a job interview.

## 5. Starting and ending a conversation.

Home - Ask permission from your parent to spend an evening with a friend.

School - Ask the school secretary for a box of staples for your



teacher.

Community - Ask for an item you ordered at a store.

6. Assessment of role playing will be through the Conversation Rubric to be completed by the teacher and by the student.

## F. Natural conversational activities to be engaged in by the student.

## 1. Home

Ask your parents for permission to go somewhere.

Talk to a sibling about a television show.

Have a conversation with a parent about what happened that day.

Take part in a dinner table conversation.

#### 2. School

Visit a school secretary on an errand.

See your counselor about registration, schedules, etc.

Ask a teacher about an assignment.

Tell a classmate what you did over the weekend.

have a conversation with a friend at lunch.

## 3. Community

Ask a clerk in a store for help.

Ask directions.

Order food in a restaurant.

Socialize with friends in the mall.

4. Assessment - the students will fill out self assessment tools such



#### as the conversation rubric.

## Methods of Assessment

In order to assess the effects of the intervention a journal will be kept by the speech and language therapist throughout the intervention. A post-intervention parent survey (see Appendix I) will be sent and a teacher observation checklist will be filled out each month. In addition, a conversation rubric will be completed by the teacher and student for role played conversations and by the student as a self assessment of natural conversation.



#### CHAPTER 4

## PROJECT RESULTS

Historical Description of the Intervention

The objective of this project was to improve the conversational skills of language impaired students. A cooperative learning structure was utilized to teach conversational skills and effect the desired changes.

Cooperative learning was implemented to reinforce conversational skills taught during total class lessons. Base groups were then used to complete projects as well as to produce and practice assigned conversational role plays. These base groups were formed and lessons were taught in a special education high school class titled, "Effective Communication." The speech and language therapist collaborated in this class with two classroom teachers. The nine students enrolled were all special education students with varying mental and physical disabilities. Each of these students when evaluated by the speech and language therapist were found to be language impaired.

The speech and language therapist taught two 50 minute classes every week as described in the original action plan. The lessons originally were to be divided into



15 minutes of formal large group instruction and 30 minutes of base group cooperative learning activities. The schedule of two classes a week was adhered to, however it became apparent during the first week that the goal of 15 minutes of total class interaction and 30 minutes of cooperative group activities was not realistic. On the days that the class was dealing with written materials, longer total class discussion was needed to discuss the papers distributed and the targeted goal. On these days the cooperative group activities were abbreviated in time to 20 minutes and the total class interaction lengthened to 25 minutes, with five minutes at the end of class to come together and process the activity as a large group. Classes which required no paperwork in the cooperative group devoted 15 minutes to complete class interaction, 25 minutes to cooperative group activities, and 10 minutes of processing time at the end of class as one large group. The base groups consisted of four students in one group and five students in the other. An attempt was made to balance the groups according to physical and mental abilities.

The basic skills targeted to be taught were the use of eye-contact, turn-taking (ask a question, answer, make a comment), appropriate voice, staying on topic with signals for transitions, and appropriate non-verbal cues. Written lessons devoted to these skills can be found in the appendix of this paper.

The first two classes taught by the speech and language therapist were devoted to introducing the subject of communication and the important of conversation in everyday life. All the students were asked to look at each other and greet one another by name. The Rules of Conversation sheet (see appendix A) was distributed to each



student. The total class read it and discussed it. The class broke into base groups for discussion about the importance of conversation.

The next two lessons began with 25 minutes of total group discussion practicing greetings, reviewing the rules of conversation, and introducing the written lessons on the use of eye contact (see Appendix C). Twenty minutes were then spent in cooperative base groups discussing and completing the papers. The last five minutes of class were spent as a total class with the cooperative group reporters reporting what the groups decided to write on the papers.

The next two lessons were devoted to the review of previous knowledge and the introduction of papers to be completed about voice volume (see Appendix D). The format continued the same as the previous two classes, with the last five minutes of class utilized to showcase two model conversations prepared by the cooperative base groups.

The next two lessons were again begun with 25 minutes of greeting and review of the rules of conversation. The lesson and papers on topic maintenance (see Appendix E) were introduced. Base groups again were used for 20 minutes to discuss the papers and cooperatively complete them. The last five minutes of class were used to develop model conversations using good eye contact, volume and topic maintenance.

The next class was spent introducing the concept of changing topics and maintaining a conversation. Because of the difficulty of the subject and the inability of some of the students to understand the concepts introduced, the entire 50 minutes



were spent in total class instruction and interaction.

During the following class the pattern of 25 minutes of review and 20 minutes of work within the base group was again used. The lesson on starting, maintaining, and concluding a conversation was completed in the cooperative groups. The last five minutes of class were devoted to model conversations developed by the groups.

The next two class sessions were devoted to listening skills following the same format as listed above. The last five minutes of class were spent discussing the need for listening to others.

The following eleven classes were spent in a slightly different pattern. They began with 15 minutes of total class discussion and review each week. During this time the students were given three role play topics to be developed in their base groups. The cooperative groups then met for 20 minutes to develop these three role plays. The last 10 minutes of class were used to show the role plays to the class and evaluate how the rules of conversation were used by the students.

The role plays used were those listed in the action plan. Two weeks were spent on developing the same role plays.

Weeks one and two emphasized eye contact using three situations: the first to tell a sibling the student had broken his walkman, the second to congratulate a friend on receiving an A on his test, and the third to prepare a job interview.

Weeks three and four emphasized voice volume using three situations: the first to help a sibling who talks too softly, the second to tell a teacher five facts about the student, and the third to ask a store clerk where to find a specific item.



Weeks five and six explored staying on topic using three situations: the first to talk to a parent about too many chores at home, the second to tell a new friend a few things about yourself, and the third to act as a tour guide to new students in school.

Weeks seven and eight emphasized listening using three situations: the first to listen to a problem your brother has, the second to have a conversation with a friend at lunch, and third to complete a job interview.

Weeks nine and ten explored starting and ending a conversation utilizing three situations: the first to ask permission of a parent to spend the night at a friend's house, the second to ask a school secretary for a box of staples for the teacher, and the third to ask a store clerk for a certain item in a particular size and color.

Week eleven was spent as a total class reviewing what had been learned. The students were encourage to talk to each other and to participate in conversations.

The assessment of the role plays was completed by the teacher and student using the Conversation Rubric (see Appendix H). Final assessments for each student were completed each month by the speech and language therapist. The therapist also completed a Teacher Observation Checklist monthly after observing the students' spontaneous interactions.

The one aspect of the action plan not implemented due to a lack of time during the research period was the last segment of evaluating natural conversations using the Conversation Rubric.



## Presentation and Analysis of Results

In order to assess the effects of cooperative learning structures used to deliver lesson on conversational skills, several evaluative methods were utilized. The first was a journal kept by the speech and language therapist. Comments made by the two teachers of the students at the beginning of the school year and recorded in the journal indicated that without language the students had no social life. Without the ability to have conversations and connect on a verbal level, the students acted silly or used inappropriate physical contact. The teachers also noted that not having basic conversational skills inhibited the students from developing relationships. The comments made by the two teachers of the class were very different by the completion of the intervention. The comments then indicated there was less silliness and physical contact between the students, that the students knew how to interact better, and the students were greeting peers and adults as well as sustaining conversations longer with their familiar peers. These comments illustrated a very positive trend among the students to use language to interact with each other as well as with the teachers.

The second evaluative method was the Teacher Observation Sheet. This was completed monthly by the speech and language therapist. Table 4 presents the data for observation of the students' communication pre-intervention in September and post-intervention in December.



Table 4

Conversation Observation Checklist Pre- and Post-Intervention

Number of Students

Criteria	Frequently		Sometimes		Never	
	Sept.	Dec.	Sept.	Dec.	Sept.	Dec.
Greets Teacher	(2)	7	(3)	2	(4)	0
Greets Students	(1)	3	(4)	6	(4)	0
Responds verbally to others	(0)	6	(9)	3	(0)	0
Initiates conversation	(0)	1	(3)	6	(6)	2
Sustains a conversation	(0)	0	(0)	6	(9)	3

The intervention appears to have had a positive affect on the students' frequency of communication to peers and adults in the classroom as well as their ability to initiate and sustain a conversation.

Pre-intervention data indicated that the nine students observed were quite socially isolated, while post-intervention data indicates a dramatic increase in verbal contact. Pre-intervention none of the students were able to sustain a conversation. Post-intervention, 66% were observed to sustain a conversation at varying times and only 33% were seen to never sustain a conversation. Pre-intervention 66% of the students never initiated a conversation while post-intervention only 22% never initiated



a conversation. Pre-intervention none of the students frequently responded verbally to others, however post-intervention 66% of the students frequently responded verbally to others. There was also a dramatic rise in the number of students greeting their peers and the teacher as seen in Table 4.

The third evaluative method was the Conversation Rubric Form. This was completed monthly by the speech and language therapist after a student was involved in a role play or model conversation. Table 5 presents the data comparing the first evaluation of model conversations in September and the final role play conversation in December.

Table 5

<u>Conversation Rubric Form Pre- and Post-Intervention</u>

Number of Students

Criteria	Not Yet		Not Bad		Aha!	
	Sept.	Dec.	Sept.	Dec.	Sept.	Dec.
Greeting	(4)	0	(4)	3	(1)	6
Eye Contact	(4)	0	(5)	6	(0)	3
Non-verbal Communication	(1)	0	(6)	5	(2)	4
Participates in Conversations	(1)	0	(7)	8	(1)	1

The intervention appears to have had a positive effect on the students' abilities to participate in a verbal exchange with others. Pre-intervention there was one



student in the class who did not communicate in any way with others in the school environment. Post-intervention that student was using a greeting to familiar peers, some eye-contact, and attempting to participate in role plays. Pre-intervention there were three students who did not greet others or use eye-contact, while post-intervention, every student was capable of greeting others and using some eye-contact. Post-intervention 88% of the students were capable of participating in a conversation to some degree. One student was capable of independently initiating, sustaining, and concluding a conversation.

The fourth evaluative method was a Parent Survey intended to determine what the students' conversational skills were in a social context other than school. This was completed pre-intervention in September and post-intervention in December.



Table 6

Parent Survey Form Pre- and Post-Intervention

Child speaks to parents throughout the day. 1.) A clam Communicative Constant Chatterbox **(4) 0** (4) 7 (1) 2 Child participates in family activities. 2.) Communicative No social Limits Closed bedroom Door (2) 4 (4) 0 (3) 5 Child Initiates Conversation. 3.) **Always** Never Sometimes **(3) 0** (3) 4 **(3) 5** 4.) Child Responds to the Social approaches of others. Sometimes Always Never (1) 0 (5) **5** (3) 4

Pre-intervention data - ()

Post-intervention data - in bold

Again the data appears to show a positive trend in the students' desire and ability to communicate. Pre-intervention 44% of the students were judged by their parents to be "a clam" and isolated. Post-intervention none of the students were reported to be so isolated. Post-intervention all the students were judged by their



parents to initiate a conversation at least sometimes. Pre-intervention 33% were reported by their parents to always initiate a conversation and always respond to the social approaches of others while post-intervention 54% were judged to always do so. Post-intervention 100% of the students were judged to participate in family activities.

#### Conclusions and Recommendations

Based on the presentation and analysis of the data on the students' conversational skills, the students showed marked improvement in the frequency and quality of their interactions with peers and adults in the school and home environment. The skills learned and practiced during cooperative group lessons, appear to have been transferred to interpersonal interactions in class and at home. The students consistently began to greet their peers and teachers. They were seen to begin to develop relationships with each other that involved conversation. Friendships were observed to be formed. At home the students' parents reported greater sociability.

It would appear that the class material taught within the cooperative nature of the learning tasks was very beneficial to these nine language impaired students. The cooperative nature of the tasks required the students to be active participants of oral discussions. For the base group to be successful, each student had to contribute to the group interaction.

The use of cooperative learning structures to teach and encourage conversational skills among language impaired students can be highly recommended. However, it must be remembered that the intervention may proceed more slowly than anticipated as this one did, because of the students' disabilities. A longer time frame



may be needed with a project of this nature. However, the success of this project makes it apparent that implementing the use of cooperative learning to improve the conversational skills of language impaired students is a viable and desirable intervention.



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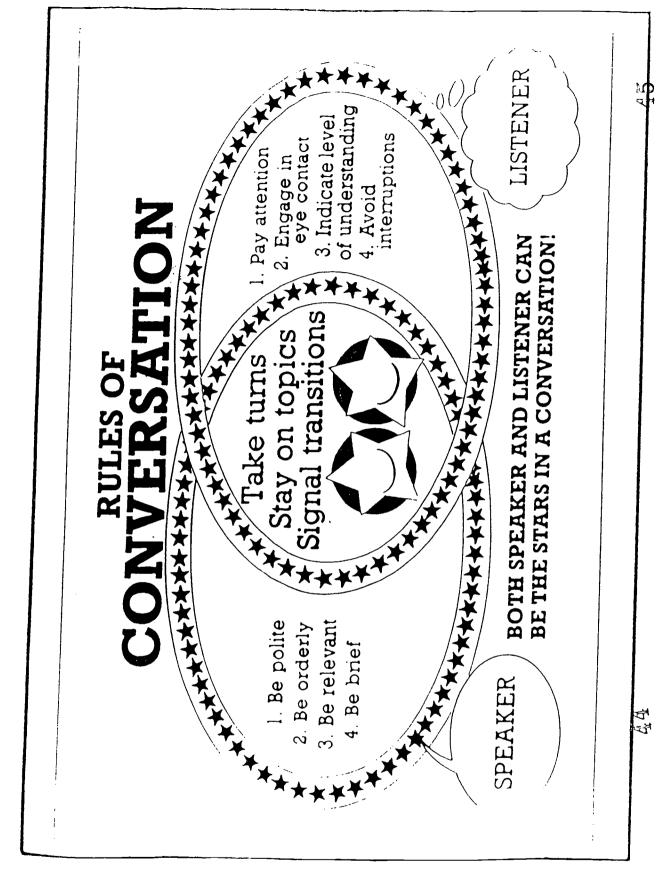


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APPENDICES





Appendix A Fules of Conversation

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# Appendix B Conversation Rubric

Name	Date			
Criterion	1 Not yet	2 Not bad	3 Ah ha!	Score
Greeting	No greeting	-says hi! -doesn't use names of other students	-says hi! -uses names of other students	
Eye Contact	No eye contact -looked everywhere but at other students	-some eye- contact -some eye drifting	-good eye- contact	
Non-verbal Communications	-unpleasant facial expressions	-no expression	-smiles	
Participation	None	-answers questions	-answers questions -asks questions -makes comments	



### Appendix C Eye-Contact

### EYE CONTACT

Having good eye contact means looking at the person you are talking with It is not necessary to stare at the person, but you should look at their face most of the time. People who have good eye contact give the impression that they are confident.





**DIRECTIONS:** Answer the questions.

- 1. Why is it important to have good eye contact?
- 2. Tell five instances when you could be talking with someone and you would want to have good eye contact (e.g., when I am asking my teacher about a homework assignment).

a	
b.	
c	
d	
e	

3 Tell two situations when you would not be able to have good eye contact with someone (e.g., when you're driving a car and talking to someone)



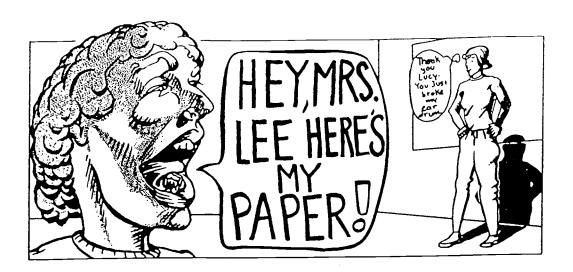
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### Appendix D Volume

Volume B

Name

### VOLUME



Do either of these two people sound familiar to you? You know, the kid who's always yelling or the person who never speaks up in class. These types of people can really get on your nerves. They do not know how to use the correct volume (loudness) when they are talking. We need to use the correct volume when we talk to people. Why do you think it's important to use good volume? Discuss your answer with others in your group or write it on the back of this page.





# Appendix E Staying On Topic and Switching Topics - B

Staying On Topic And Switching Topics B

Name

About Topics . . .

A good rule to add to your "list" of social communication skills is this: Stick to the topic when you are having a conversation with someone.

A **topic** is the main idea or subject of what you are talking about. If you and a friend are talking about an upcoming school dance, you want to make certain that your comments deal with the topic of the school dance.

Below is a script between Jack and his friend Gary. Unfortunately, Jack has not learned the social communication rule of staying on topic.

### Jack, The Topic Jumper

Situation: Jack is downtown picking up a part for his bike. He runs into Gary, one of his friends from school.

Jack: Hi, Gary!

Gary: Hey, Jack! How's it going? What are you doing down here?

Jack: Oh, I have to get a new part for my bike. Did I tell you what happened to it?

Gary: No, what?

Jack: Well, I was riding my bike down this big hill when I saw Jennifer. She's a new girl who moved into our neighborhood. Did I tell you about Jennifer? She's in our grade, and is she ever cute! She moved here from Clintonville. My grandma lives in Clintonville. We go there to visit her every Thanksgiving. Only we didn't go last year because I got my appendix taken out. Did I ever show you my stitches?

Gary: (Looking confused because Jack keeps switching topics) No, I don't think you have.

Jack: I had to stay in the hospital for three days. I was gone from home longer than that once, when I went to Boy Scout camp. That camp was great! We went fishing and hiking. The hiking wasn't quite as difficult as the hike I took with my dad last summer. We went on that hike right after my sister came home from college and was she ever mad at Dad for leaving right away. I better get going or the bike store might close. I'll see you later, Gary.

Gary: Bye, Jack.

(Jack leaves. All Gary can do is shake his head and laugh at Jack for the way he jumps from one topic to the next, without warning his listener)

Tell how you would feel if you had a friend like Jack, the topic jumper.



### Appendix E Staying On Topic and Switching Topics C

More About the Tome Kule

When you have a nice long talk with your friend on the phone at would get pretty boring if you talked about the same topic the entire time.

The social communication rule about staying on topic should have something added to it. The rule should go like this: Stick to the topic, unless you give your listener advance warning that you are going to change it.

Here is a list of things you could say, to go smoothly from one topic to the next.

2 "This is changing the topic, but"	
3. "Speaking of that"	
4. "Oh, that reminds me"	
5. "This is off the topic, but"	
All the comments in the list above have something in commwarning that the topic is about to be changed.	non. They all give the listene
<b>DIRECTIONS:</b> Read each of the situations below. If the a good way, write good. If the person so write bad.	ne person switched topics in witched topics in a bad way,
1. Eva and Luke are talking about last night's says, "I thought the game was great. I lov some, I'm starving."	s girls' basketball game. Eva e Tony's pizza. Let's go get
2. Melinda and Molly are trying to come up w project. Melinda says, "This is off the topic, l what our math assignment is for tomorro	Molly, but do you remember
3. Nancy and Lou are discussing possible the Nancy says, "This has absolutely nothing I need to ask if you've met that new guy	to do with the dance, but
4. Wayne and Lisa are trying to decide which get at the store. Lisa says, "Steve said he to go for a nice long run this weekend. I	saw a good movie. I need
5. Judy and Abby are arguing about who is a tonight. Abby says, "I know It's your turn becathem last night. Oh, and that reminds me, the bathroom. I suggest you do it soon, beca	ause I can remember doing it's also your turn to clean



1 "By the way . . . "

### Appendix F Listening Strategies

# Listening Strategies

# GOOD STRATEGIES

### (TO LET SOMEONE KNOW YOU ARE LISTENING)

- Give the speaker good eye contact.
- Lean forward slightly to show interest in what is being said.
- Nod your head and give the speaker feedback (e.g., say things like, "Oh yeah?" or "uh huh!").
- Ask questions that deal with the speaker's topic.
- S Give the speaker your full attention. (Try not to do two things at once.)
- 6 Let the speaker finish before you talk. (Don't interrupt.)

**DIRECTIONS**: Add three more examples to this list of times when you would want to be a good listener.

- 1 When your teacher is giving directions
- 2 When your friend is upset

4

5

3

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### Appendix G Getting Started #1

### Getting Started #1

Whenever you begin a conversation with a person, it is important to start with a greeting and a name. Saying "Hello, Mr. Welch" or "Hi, Pete" is a small thing, but it can make a big difference to the success of a conversation.

Below is an illustration of what could happen if a conversation is not started in the correct way. Notice the student does not greet the teacher.





Now, look at the difference in this situation, when the student remembers to say "Hello."





When you begin a conversation over the phone, you still need to greet and name the person you are calling, but you should also introduce yourself. (Even if you know someone very well, do not assume they will recognize you from your voice)

Below is an illustration of what could happen if you begin a telephone conversation, and forget to introduce yourself.











### Appendix G Getting Started #2

Starting Months and Avid Ludnor A Courses and Consession

### Getting Started #2

Remember of a very important to start a conversation with a ore clinic a form of cavist thellor or third and a name

Pretend that two teens. Melissa and Carol, are interviewing for the same habysiting job. Based on what you read below, who do you think started the conversation in a better way.— Melissa or Carol?

Melissa	1	Carol	
Melissa:	Are you the people who listed the babysitting job in the school paper?	Carol:	Hello, Mrs. Simon My name is Carol Theune. I read in the school newspaper that you are taking applications for a
Parent:	Yes, we are. My name is Mrs. Simon.		babysitter. I would like to apply.
Melissa:	Yes, I know. The office gave me your name.	Parent:	Hello, Carol. Why don't you come in and you can tell me about your babysitting
Parent:	Oh!		experience.

Carol did a better job of beginning the conversation, because she included a greeting and a name (e.g., "Hello, Mrs. Simon.").

**DIRECTIONS:** Write down the first words you would say to start the conversations listed below.

- 1. You come home from school and see your brother Ben. What would you say to start a conversation with him?
- 2 You call Marge, one of the other students in your science class, because you forgot when the project is due. Marge answers the phone and says, "Hello?" What would you say to start the conversation?
- 3 You go to the auto shop with your dad to get his car repaired. You see your teacher, Mr. Furst, is there also. You want to ask him what is wrong with his car. What would you say to begin the conversation?
- 4 You call your mother's office to see if you can talk to her. Her secretary. Ms Johnston, answers the phone. What would you say to begin the conversation?



#### Appendix G How Does It All End?

### How Does It All End?

Not only does a smooth conversation need a good starr, but it also needs a good ending. Conversations should be ended with a farewell (e.g., "Good bye, Ms. Smithson. Have a nice day," or "Bye, Luke. See ya around.")

Closing a conversation can be more difficult than getting one started, especially if the other person is interested in continuing to talk. Here is a strategy you can try

Strategy Before you say good-bye, make a comment that gives your listener a clue that you need to end the conversation

Examples: "Well. I better get going here."

"Well, it's been nice talking to you!"

"The bell is just about ready to ring. We'd better go!"

"Oh, I almost forgot! I have to go . . . "

"I'll talk to you more later, I have to . . . "

DIRECTIONS: Write down what you could say to end the following conversations.

- 1. You are talking to your best friend between classes. You have to go up three floors for your next class.
- 2. Your mom is talking with you about the fishing trip your family is taking this weekend. You have to leave to go to basketball practice
- 3. A boy/girl from school, who likes you, calls you on the phone. He/she won't quit talking, and you have to do some homework.
- 4. You are visiting your grandmother in the nursing home. She is very happy to have the company. You need to go home before it gets dark outside.



# Appendix H Teacher Observation Checklist

Teacher: Date:

Frequently: + sometimes: ✓ Not Yet: O

Student Names:	Greets the Teacher	Greets other Students	Responds Verbally to others appropriately	Initiates a conversation	Sustains a conversation
			·		
-					
				ļ	



### Appendix I Parental Release

Dear Parent:

As part of my graduate work at Saint Xavier University, I am starting a project to improve student conversational skills. As part of this work, I am asking parents to fill out a survey of their child's conversational skills at home. Surveys will be confidential and have no effect on your child's grades. Please fill out the attached survey, and return it to Donna Joseph at Maine East High School. Thank you for your help.

Sincerely,

Donna Joseph



### Parent Observation Rubric

ks to the paren	nt throughout the day.		
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ipates in family	v activities.		
room Door	Communicative 2	No Social Limits!	_ (
es conversation	ns.		
	Sometimes 2	Always	3
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