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Speech on Location: A Narrative Play Technique to Teach Expressive Language and Communication to Children with PDD/Autism/Language Delay

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Abstract. *Narrative Play is an intervention technique to teach young children with autism the sequential steps of interactive symbolic play and joint attention with peers in natural play settings. The technique is described through three case studies of 4 year olds who have been diagnosed with autism. Joint attention disturbances in children with autism are linked to the social-cognitive process. One way to gain a child's joint attention in play is to introduce the concept of story and create play around a theme. This article has implications for all children with language delays and presents evidence that children with autism can learn the social-cognitive skills necessary in social situations in natural settings on location.*

Introduction

Most children develop flexibility in their play by age 4. They create narratives about characters, expand their stories, and use language to interact with peers. They watch and follow each other, point to objects, share ideas, and negotiate with language and emotion while using sequential actions in play. These children change their direction and expand their story about their characters while they listen and react automatically to each other, making comments, gestures,

and changes in their voice intonation patterns. They travel through the playground and develop complex stories, using language to communicate and role-play through symbolic characters. A well-known teacher and writer about children's play, Vivian Paley, writes, "Amazingly, children are born knowing how to put feeling into story form. It is play, of course, but it is also story in action, just as storytelling is play put into narrative form" (Paley, 1990, p. 162). It is in this context of play and storytelling that children interact with each other.

In all interactions, whether between a baby and a mother or between two siblings or peers, participants relate and use communication in a "game." The game of language happens when one uses a gesture, a gaze shift, a word or a phrase in an act directed to the other. For typical children, this interaction comes intuitively, whereas with language-disordered children, the communication skills need to be taught.

Relevant Research and Theory

Sociolinguistic traditions suggest that children learn from their experiences and acquire patterns, rules and words that express emotions from an interaction in real life situations with another participant. Two participants engage in a back and forth exchange of words, gestures, and voice patterns almost as if they are in a Ping-Pong game. Wittgenstein (1953), a language philosopher, coined the term "language game." He explained that an interaction consists of the reciprocity between the speaker and the listener and that each participant learns the rules of this game by playing it (Wittgenstein, 1953, p. 5e). This theory implies that it might be important for children with language delay to engage in interactions with peers in natural contexts because a child learns the game of language use by playing it. Since language is a "means of problem-solving and of interaction with the world, then it is perilous to study it in isolated environments or in the traditional 'controlled experiment' "(Bakhtin, 1990, p. 211). The belief that language is learned and studied best in the natural context of an interaction underlies my work with children with language delays.

Traditional methods of teaching children with language delay involve a one-to-one (therapist-child) dyad that meet in a small office

away from the classroom and from other children. Speech and language therapists have followed the theory that a child with disabilities needs a controlled, quiet environment. My first job as a speech and language clinician for Santa Monica Schools in the 1960s involved taking the child out of the classroom. It took several minutes to walk to the speech office, which had no windows and was the size of a broom closet. I remember asking the child to match objects to color photo cards and to respond to my questions with single word answers. The most interactive conversation we had was on the walk to the office and back. Many speech and language pathologists rely on this method today and never work in a natural environment.

Speech and language clinicians are beginning to recognize the value of teaching children in small groups in the classroom, but most still use traditional methods of teaching children to match, look at pictures, respond to questions, and perform cognitive tasks. This type of dynamic sets up a clinician-student relationship in which the child is expected to perform and answer all the questions rather than be involved in a natural conversation. The child is in a position similar to a testing situation. Some children respond to this type of traditional therapy and learn social skills in this way. Other children, particularly children with good expressive language but with significant social delays because of Pervasive Developmental Disorder (PDD)/Autism Spectrum Disorder, benefit from learning language skills in a more natural environment with at least one peer with age-level language. This partner communication situation places the child in an interactive, playful environment similar to a context such as a family conversation or talk on a playground.

Extensive ethnographic research is yet to be done in the area of child language to study how children learn the skills of symbolic play, narrative and language in a natural context. Children need to be able to use the skills of symbolic play while playing a game of tag with siblings or while running on the playground with peers. As they run, children tell stories with objects that represent actions. In a natural context, a child learns to use objects that relate to a story with a purpose and to negotiate with others. If children with autism use objects without representational meaning in interactive play, they will be left out of the playground interactive game.

Often parents of children with autism complain that the child clings to them, gestures, and takes them to an object but then just looks at it. One particular parent explains, "He wants me to play with him, but he just can't get the whole idea of playing. He brings me a Thomas train engine and then drops it at my feet and screams at me. I feel so sad when he can't use words to tell me how he feels." This mother says that she picks up the toy and gives it to the child and attempts to get him to move the train on the track. When she places the train in his hand, she squeezes his hand shut around the wheels. He doesn't notice when the train just rolls out of his hand onto the floor. A child without play skills either drops the toy and cries or twirls the object and watches it spin or turn.

Between the ages of 2 and 3, typical toddlers play and collect objects. They often put them in a box or container and then dump them in and out, delighted with their accomplishment. These children want others to join them in the dumping theme. A child with autism may exhibit these beginning play sequences in a stereotypical way or line every toy object in a long row. They often throw toys from the play set or just scream and push all peers and adults away from their play area. I met with a $2^1/_2$-year-old with a diagnosis of autism who initially sat on the floor clutching his train cars, isolated in a corner in my office. He refused to allow anyone near him. His mother said, "Oh, he plays like this for hours and screams if anyone comes near him. His sister doesn't like it. She feels so rejected." There are many children like this one whose parents love the child but just don't know what to do. These children are left to line up objects, play in the corners, and pace the perimeter of a playground alone.

Some children with autism have not made a connection between the action of the object and the reason for this action, making it more difficult to understand what the object's action represents in the overall story theme. "Children with autism do not understand the meaning or importance of any of these (symbolic play) skills" (Hogan, 1997, p. 15). The skills involved in making a symbolic representation include an understanding of what the action means to the character in the story or the object and what the sequence of action means in the overall narrative theme. The skills also include the ability to vary voice intonation patterns, gesture and action of objects to create meaningful verbal and nonverbal language in play.

This relationship of language with gesture and action has been an area of research interest to speech pathologists and developmental psychologists for many years. The first scholars found that all symbols of language have their origin in the actions carried out with objects (Piaget, 1962; Werner & Kaplan, 1963). The original hypothesis was that "language and symbolic play rely on single underlying symbolic processes, a process that unfolds gradually throughout the relevant stages of development" (Thal & Bates, 1988, p. 115). Later researchers found that certain aspects of symbolic play corresponded to specific aspects of language (Bates, Benigni, Bretherton, Camaioni, & Volterra, 1979). These studies predicted that specific patterns of impairment or delay in symbolic play may predict specific patterns of impairment in early language.

Some research on symbolic play and language is contradictory. One study found that children with language impairment are better at symbolic play than are normal children (Roth & Clark, 1987). Another study found that sequencing abilities in a symbolic theme developed in late-talkers' early gesture system. These children were using symbolism by sequencing in a gestural theme without verbal language. "The sequencing abilities may develop 'underground.' . . . If these sequencing abilities are first manifested in a gesture, a rapid 'catch-up' in language may soon follow" (Thal & Bates, 1988, p. 121). Symbolic play is a precursor to the development of intentional use of language (Bates et. al., 1979; Harding & Golinkoff, 1979). Research in the 1990s found that there was an association between a child's language development, cognition, and representational symbolic play (Bruner, 1990; Tager-Flusberg, 1993; Wetherby & Prizant, 1993). Despite some contradictory findings, researchers agree that the underlying symbolic function is critical to the development of appropriate gesture symbols and play skills with language.

According to research, one of the most natural contexts for children to learn symbolic play, gesture and language is the family social unit. Sociolinguistic and ethnographic researchers found that children learn how to play and interact within the context of the family (Schiefflin, Ochs, & Schieffelin, 1984; Heath, 1983; Snow & Dickinson, 1990; Blum-Kulka, 1990; Snow & Blum-Kulka, 1992). Learning to talk with peers and siblings in ordinary conversational discourse is a "powerful socializing medium" (Densmore, 1997, p. 116). Children

learn the sociolinguistic rules of language with their caregivers within in these family interactions. Scollon and Scollan (1982) studied the Athabaskan Indians, and Shirley Brice Heath (1982) wrote about the rural Appalachian Blacks and Whites; both investigations found that there were particular patterns of interactions in families in which narrative and literacy skills were taught. "Through these routine interactions, children learned to talk, to share stories, to answer questions, and to participate in family games. Discourse strategies developed and children were influenced by the ways parents interpreted and responded to them in each language situation" (Densmore, 1997, p. 117).

This research is important to the specific clinician-child interaction in speech-language therapy sessions because it identifies the specific relationship of the child's narrative to the child's culture. For example, in the African-American culture children are taught to use the sounds and the images of the event to tell a story. It doesn't matter whether the events are reported sequentially. The whole purpose of a narrative or storytelling in this culture is to engage the listener with gesture, language and sounds (Wolfson, 1979). In contrast, other research on narrative and language show that European-American families teach children to use a sequence of events with a beginning, middle and an end to the story. The child is taught to bring the narrative to a high dramatic point in the story and end with a resolution (McCabe & Peterson, 1991).

Despite the variations among cultures, recent theory and research show that children need to develop symbolic play and language along with stories about daily life. Children represent these events and talk about them, particularly in the family context. By the age of 4 or 5, when children develop a sense of narrative, they use representational play actions in a story theme. Children of this developmental age use sticks, paper, or objects to represent meaning in their world of play."The transition to pretend play is one of the most important leaps your child will make" (Greenspan & Weider, 1998, p. 192). Teaching symbolic play within a story context is the first step in teaching a child to use language.

Research in the area of early intervention and early social communication with young children with autism is complex. Past researchers

promoted the immediate development of appropriate social communication skills, particularly joint attention skills. Joint attention is considered a pivotal skill for a child's social connection to others. The development of language abilities in these children is based not only on research on typical children but also on children with PDD/autism. "The process of engaging in joint attention with others may contribute to the development of symbolic abilities in children (Hobson, 1993; Mundy, Sigman, & Kasari, 1993; Werner & Kaplan, 1963), the development of language abilities in children (Baldwin, 1995; Bates et. al, 1979; Bruner, 1975; Tomasello, 1988), and the development of general social-cognitive processes in children (Baron-Cohen, 1995; Burner, 1975; Mundy, 1995; Tomasello, 1995). In order to find ways to motivate children with autism to relate to others in a social world, researchers are investigating the development of symbolic play and joint attention in social interactions.

The goal of this article is to introduce some strategies for teaching the sequential steps of symbolic play with a narrative in a natural context through an additional intervention method that works well with some young children with autism. When successful, this method teaches children with autism to leave the corner of the room for more interesting play and to join their families and peers and finally leave behind a more isolated world.

Narrative Play Therapy

Narrative Play Therapy is based on the theory that a child learns language more easily in a sociolinguistic context. In this approach, the play therapist introduces small hierarchical steps to the child about how to develop a story through symbolic play, how to create good circles of communication, and how to develop this communication outside in a natural setting. The child first learns to use language in a story context and to share objects and events in the context of an interactive play situation with another peer to begin the process of developing joint attention (see Appendix A). Joint attention disturbances in children with autism are linked to the social-cognitive process. Therefore, the child must learn how to join a peer in order to understand the underlying linguistic structure of language and the

subtle cues involved in an interaction. This skill is essential to interactive play.

Children also need to relate meaningful emotional experiences to others in order to be a full participant in an interaction. Without these skills, a child might become isolated, lonely, unmotivated and even aggressive. Families, peers and classmates, not aware of how lonely children with autism feel, complain about not knowing how to relate to them or how to include them. They need help with this situation, and children with autism need direct, on location speech and language intervention to help them relate to those who deeply care about them.

Comparison of Narrative Play, Floor Time and Social Stories

Dr. Stanley Greenspan, M.D., child psychiatrist, and Dr. Serena Wieder, child psychologist, developed a method of play therapy called "Floor Time" that is similar in several ways to Narrative Play Therapy. Floor Time is a part of a comprehensive developmental model (Greenspan, 1992; Greenspan & Wieder, 1998, 1999). Dr. Greenspan's specific model of intervention with children with autism, "Developmental, Individual Difference, Relationship-based-approach (DIR)," respects the child's individual differences in motor, auditory, visual-spatial, processing capacities and encourages the child-caregiver relationship. The Narrative Play Therapy approach also works on developing a strong relationship with a child, respecting the developmental level and the individual needs of the child. The goals of both methods, Floor Time and Narrative Play, are to help the child communicate in any way possible and to connect emotionally to the other participant about what they are doing. Like many play therapy methods used by child psychiatrists, Floor Time is a method to build increasingly greater circles of interactions between the child and the therapist. The method of Floor Time is this: "all you need to do is hang out with your child, listen to your child, empathize with him, march to his drummer" (Greenspan, 1993, p. 86). Dr. Greenspan recommends that parents spend several minutes per day doing Floor Time activity on the floor at home with their child. When Floor Time is well-established, the child is taught to problem-solve. The parents set aside 15 minutes a day to problem solve with their child in this play context. The parents learn to identify and empathize with their child's point of view.

In the Narrative Play Therapy approach, the therapist begins with the same methods as the Floor Time approach but changes direction at the point when Floor Time skills are established. Once the therapist and the child have successfully created the "circle of communication" (Greenspan, 1992), in Floor Time the therapist presents the child with problems to solve in the play whereas in Narrative Play the therapist presents a story theme that provides a way to teach specific language goals. At this point, the Narrative Play therapist introduces a narrative or a specific story that may be of high interest to the child. Sometimes, the child generates the story. As the narrative develops, the therapist takes the child out on location to a familiar park, a playground, or a pond.

The heart of Narrative Play Therapy is that the child learns to interact through the association of the visual environment to the emotional and reciprocal relationship with the therapist. As the child experiences more of the back-and-forth exchanges of communication in words, gesture, and the emotional feelings of relating, he sees language and communication as a part of the whole interaction. The parents are asked to take their child out on location for a short time to a playground or a park every day for at least the first weeks. Eventually, a peer or a sibling is recruited to be a part of the play interaction. Narrative Play Therapy extends and expands the Floor Time approach and adds on a new dimension by encouraging children with autism to communicate in natural settings.

In contrast to Carol Gray's Social Stories (Gray, 1994), Narrative Play is different in several ways. In Gray's Social Stories method, the clinician writes a social story about a specific problem that occurs after observing the child at school or in a routine. Unlike Narrative Play, the parents are usually not with the clinician and the child during the therapy. The Social Stories' clinician observes the student in a particular situation and then listens to the student's perspective to write three basic sentences: descriptive, perspective, and directive. The Social Stories' therapist defines the situation, who is involved, and what they are doing and why in this descriptive phase. Then,

they describe the particular reactions and emotions in the situation. The Social Stories' clinician writes specific sentences about what the student thinks about the problem and his perspective. Then, the clinician writes a story about different ways to resolve the problem. This method works well with children who have already mastered the back-and-forth exchange of ideas as a skill in conversation.

All three methods, Floor Time, Social Stories and Narrative Play, are good interventions that are helpful and provide some method for parents, teachers and specialists and clinicians who are working with the complex nature of a child with autism. All three approaches respect the rights of the individual child and the developmental profile of the child with very special needs.

Teaching Narrative Play

During the first levels (Appendix A, Levels 1–6) of teaching Narrative Play, the play therapist prompts the child to make comments about what his/her characters are doing, usually in a quiet office setting. For example, in a familiar narrative about a farm event, a therapist says, "Look! The farmer is putting the hay in the barn. He's in a hurry! Help me! A storm is coming! He has to get all the animals in the barn. He needs the family to help him get all the animals and the hay in the barn before the storm!"

The therapist helps the child create the narrative in a clear sequence by walking the figures toward the barn and gesturing to the child to move the tractor in the barn. As the child starts to move the tractor toward the barn, the therapist could join him or her by moving the figure of the farmer toward the rope that hoists up the hay into the barn. As the child moves the farmer to drive the tractor into the barn, the therapist could use this opportunity to model the gesture and the voice intonation pattern that is appropriate for the actions. At the same time, the therapist narrates her own actions with the figures. The child learns to share the objects by talking about the actions in the story as a part of a larger narrative theme. This type of interaction between the child and the therapist creates a joint attention or a mutual sharing of an event, an object and a story. In this process of creating a story with characters, children learn to

imitate and practice voice intonation changes, body language, and gesture. They learn to share, limit others and express their emotions about the characters in a story.

After the child uses sustained joint attention with a partner, the clinician transitions the child into the second stage (Levels 7–10). With a peer, the therapist teaches both children how to sustain a story theme, expand the story description, and describe the details of the sequential action of the characters. This phase of teaching Narrative Play may take several months.

During the third stage of Narrative Play (Levels 11–12), the therapist and the child and a peer go out on location to an environment that is familiar to the child such as a playground or a park, where the play therapist works with the two children and encourages them to use the same narrative. Children with autism learn to create a story while following a friend on the playground. They struggle to maintain some joint attention and to imitate a whole story theme. A good place to start is in a small section of the playground where a child can pretend. For example, the typical child can be prompted to say, "Oh, let's take our dinosaurs up a river!" The child with autism can be taught to move the dinosaur behind the other child and to make comments that are relevant to the story such as, "I'm coming with you! Here comes my dinosaur! Watch out" as the child pushes the dinosaur up the pretend sandy stream.

The play therapist may use verbal cues combined with a gesture point and/or a visual script or symbol/picture to prompt the child to make comments about the story. These supports give the child with autism a framework for connecting and interacting with another participant. The verbal cues may gradually be faded out to a simple gesture by the therapist or an expectant look to the child to move the object and make a comment. The most important cue is the emotional response by the Narrative Play therapist to the story content and to the child. The therapist is consistently working toward joint attention and reciprocal play interactions. At this stage, children attain the ability to use a unique back-and-forth quality to the interaction. They exchange reciprocal eye gazes, frequent imitation of gesture, body language, giggles, and sounds. They develop a give and take of ideas about their story and negotiate for their characters in the narrative theme.

When speech therapy is limited only to a small office setting, the child with autism may not be able to transfer these interactive skills on their own to an outside location. With the Narrative Play technique, the skills are first taught in the quiet setting of an office and then in the natural context outside at the farm or on a playground. The skills are automatically practiced in the outside situation where the child naturally plays every day. The following case studies are about teaching these Narrative Play skills to preschool children in natural environments.

Case Study One

The Mud Story

This story illustrates how to assist a child, Julie, a 4 year old with PDD, in joining a group and sustaining pretend play outside on the playground. Julie has good expressive language but doesn't understand how to keep a conversation going about one idea during play. She doesn't maintain eye contact with peers, watch them play, notice them gesture, or listen to their voice intonations. She looks as though she wants to play but then runs up to a group, screams and pushes. She clearly wants to join them but doesn't know how. The following is a description of my first day at a preschool in Cambridge, Massachusetts, where I had my first language session with Julie on location outside on the playground. The teacher has read *Stone Soup*, a book about making soup with rocks and many vegetables. After they listened to the story, the class made real stone soup in the classroom.

Today the class is outside around a big large wooden tub filled with mud. They are making "pretend" stone soup. Julie smacks her hand on the side of the tub near a peer who is stirring the spoon in the mud. Julie runs away and screams. She now stands near the fence alone watching the leaves fall as they twirl in the wind. She moves her hands in a wavelike motion to follow the flow of the leaves as they float in the wind downward toward the frozen snow on the ground. She is singing to herself and is not aware of her classmates.

Teachers stand near groups of children as they recount their morning. I stand in the playfield on patches of ice next to a large

wooden tub filled with gooey brown mud about 2 feet deep and 5 feet in diameter. Despite the wind chill of about −20 degrees, the children are giggling and playing. The yard is filled with beautiful wooden play structures and colorful twisting fiberglass slides. Even with this impressive playground equipment, these children love to create their own play objects out of wood, leaves, and sticks. A small group of six children hang their arms over the "soup bowl." The dark mud fills the tub. One child holds a long wooden stick as the others watch. The scene is set for a pretend story about "poison soup."

Julie smiles when she sees me and hands me her long wooden stick, whimpering, "I don't like them! They don't want me!"

I pat her shoulder and take her hand. "Let's try. I'll help. Okay?" I say. She nods her head up and down to say yes.

Sean, a 4-year-old classmate with a big smile and floppy brown hair, says, "Here's my stick. Maybe that will help!" he giggles again and hands it to me, pushing it through the soup. I take his sturdy twig and try to brush the mud off my parka. My strategy doesn't work. I keep stirring and talking to Julie's classmates, particularly to Stephanie, who stands next to Julie. I point to my stick and then to the soup and look up at them. I gesture to Julie to watch and to listen to her peers, who yell back and forth: "It's your turn, now. Oops, watch out! It's the mud! Oh! I can see it! Look at it twirl! Oh! Glop, glob!"

The soup making goes on for several minutes. I notice that Julie finally takes the big spoon in her hand and stirs it carefully in a circle, the mud twirling in whirlpool design, one circle after another moving out from the spoon center. Stephanie leans toward her and yells in her ear, "Look at this mud!" Julie covers her ears. She looks up at me and starts to cry. I say, "I know. All of the screaming is loud! Covering your ears was the right thing to do." Julie looks relieved. Children with PDD/autism often have a hypersensitivity to loud noise and even moderate environmental noise levels (hypercousis), so any loud sound can distract them from their focus both on play and on other voices.

Then she notices the swirling circles in the mud around the spoon and begins to stare at the mud. Children with PDD/autism may fixate

on certain agendas within the context of learning symbolic play actions. Children with these difficulties may perseverate on watching the light reflections on the wall from a moving leaf or a stream of sunlight in the room or swirling mud in the playground. They are almost derailed and cannot see that they are in a narrative with their classmates and that the story of making pretend soup creates a cohesive theme to the group's play. I see Julie following the circles of twirling mud with her eyes and her whole body. She hums to herself.

Some children with autism have difficulty engaging in sustained and flexible symbolic play around a story theme with peers. They use stereotypical actions, performing the same short actions with an object over and over again. When they are fixated on a certain play scenario, they can go into a "trance-like" state just as Julie is as she watches the swirling mud.

Julie continues to watch the circle of mud.

I try again. "Look, Julie!" I gesture with my finger moving it from her chin toward Julie's face. She looks up to follow my finger. Stephanie smiles at her.

The next time I prompt Julie to notice a peer. I ask her to make a comment by using a verbal and gesture prompt: "Julie, look, he is stirring the soup!" I move my hand from Julie to the other peer. The first goal is to get her to notice her classmates. The objective is to get her to comment and use an eye-gaze shift. When a child glances from the object, to the mud, back to the peer and then back again to the mud, he or she is using an eye-gaze shift. This is a sign that the child is making a critical attempt to form a relationship with a peer.

Michael, another classmate and soup maker, takes over the stirring and moves the huge bucket of brown mud. He says, "Let's get some more stuff! Julie, get some leaves and sticks." I tap her shoulder and ask, "Julie?"

Julie isn't intending to ignore her peer's requests; she is only fixated on the reflections on the ice and is preoccupied with the visual images of her immediate surroundings. These images are powerful for Julie and cause her to forget her previous mission to get the seasoning. Julie returns to her soup makers with a bucket of sticks and leaves. I chuckle as the children look back and forth at each other, giggling. Julie follows them and giggles and looks up at them around the soup pot.

Michael and Sean raise their sticks and say, "We'll be the cookers. You can be the servers." Julie stops stirring. She looks up at me.

"Ann, what are they doing now?" she asks. I explain the story sequence. "First, we make the soup and then we eat the soup." Julie is still stuck on her own agenda of stirring. The concept of the narrative about the soup is lost.

"Julie, your classmates want you to pretend that they are in a restaurant. We are going to be the servers. Okay?" I say.

Julie says, "No, I want to stir. I want to watch the bubbles in the poison soup!"

Sean says, "Nope. You have to take the soup and give it to the other people."

Julie begins to cry, "I want to stir. I want to stir. I want to stir. I want to stir."

Children with autism sometimes have a "persistent repetition of a speech pattern that consists of a word or a phrase or combination of utterances that are produced in a cyclical, recurring manner" without any expectation of a response from the partner (Prizant & Rydell, 1993). Once Julie begins the repetitive statement, she is unable to hear outside requests by others, even her teacher.

Julie's teacher, Susan, calls the class in for snack. Julie keeps her eyes on the spoon and the mud, stirring and whispering in a low volume, "I want to stir."

"Line up. Get ready to take off your boots," I say as I motion to Julie. Julie drops her muddy spoon and walks slowly toward the group.

"Let's go." I say.

Though whimpering in protest, she stands up and follows her class.

Analysis

Over the course of the mud soup game, Julie gets overwhelmed by twirling leaves, mud circles, and ice patches, loud shouting by a peer, and her desire to keep her own agenda of making soup. She takes the role in the narrative as the "stir person" and insists on keeping

that role. Through this work outside, Julie becomes more focused on what her peers are doing and more flexible about changing direction during play.

During the process of teaching Julie to make a comment about a play action with an object, I model an appropriate eye-gaze shift. At first, the prompting and responses by Julie are at an imitative level; however, with practice, she learns to use comments with eye-gaze shifts spontaneously. During this first level of teaching Narrative Play, I use both verbal and gestural cues to model for the child during the commenting phase. The child listens, imitates, and practices each comment and tries to combine it with an eye-gaze shift.

Some children may need some visual scripts in addition to verbal and gestural prompts. Eventually, the prompting fades into a simple gesture cue and an expectant look. Julie responds now to an expectant look by her teachers and participates in the group on her own, making pretend soup and using reciprocal exchanges in the interactions. She is more interested in her peers and the narrative about soup making than in the twirling mud and the spinning leaves around them.

Case Study Two

The Dinosaur Story

This story illustrates how to assist a child who has PDD and good expressive language. Andrew, a 4 year old, has some social skills and knows how to join peers but lacks the skill in staying connected to the group. The speech therapy session with Andrew takes place on another preschool playground when a small group of three 4 year olds decides to move their dinosaurs to another play structure. My job is to assist Andrew in using language to follow them. I have been working with Andrew for over a year on language skills. Today we are outside working on social skills with peers. Andrew is sitting in sand near a sandbox on his school playground. He holds a large plastic green dinosaur in his hand. The other two boys clutch a large plastic green dinosaur in both of their hands. They are knee-deep in the wet sand, leaning their dinos over the pretend river.

Tommy, one peer, holds up his dinosaur and says, "Hey, let's pretend that we are going down the river (gestures toward the sand and the water) to get food. Okay." Andrew looks at him, at his own big green plastic animal and back to Tommy. Tommy smiles. I notice this eye-gaze shift.

Tommy says, "Andrew, you get the hose." Andrew gets up, reaches for the hose and points it toward the sand.

Tommy says, "No, you have to turn on the water, first!" The other boy, Greg, gets up and turns on the hose. The boys create a river of water through the sandy area. Andrew gets fixated on the water running through the sand. He runs the wet sand through his fingers. He squeezes it, drops it, and moves his dinosaur through the mud. Andrew doesn't notice that the other boys are building a fort near the river. I tap Andrew on the shoulder and point toward the other two boys. He looks at them. I point to his dinosaur. He looks at his dino and moves over near the boys. He begins to move his dinosaur next to the other two.

He makes a spontaneous comment, "I'm first!"

Tommy says, "No, you're not. I am first. Then Greg and then you!" Andrew begins to cry.

I say, "It's okay Andrew. You can follow them. It is fun!" Andrew moves his dinosaur to the end of the line, tears streaming down his face. I ask him if he is disappointed about being third in line.

He says, "Yep. I want to be first."

I say, "Maybe next time you can be first. Right, Tommy?"

Tommy answers, "Sure. Let's go!"

They play for a few minutes and then Tommy jumps up and yells, "Let's take them over there!" He points toward the slide. Andrew doesn't notice that Tommy is pointing toward the slide. The two boys are gone in a second. They carry their dinosaurs with them and run toward the slide and gesture to Andrew to follow. He doesn't see their gesture. He is moving his dinosaur back and forth, down the groove in the sand that he made with the dinosaur's feet. He watches the water fill in the footprints in the sand. He moves the dinosaur's feet again and watches again.

He finally looks up. "They're gone. They don't like me!" he screams.

I say, "Come on. Follow me. They like you, but they just want to change the game." I point, looking back at Andrew. I gesture with my arm and smile as I run slowly toward the slide.

I say again, "Come on, Andrew! They do like you! Hurry!" Andrews runs toward me, clutching his dinosaur with one hand and brushing the tears off his face with the other.

"Wait for me!" I say.

Andrew motions to me and yells, "Wait for me."

For the first time, Andrew puts together the communication skills of talking, gesturing, running, and staying on the topic of the play scheme.

Analysis

Andrew feels rejected as his classmates run off to move their narrative to another place on the playground. He has good symbolic play skills and knows how to be in the game of a narrative around a play theme, but he gets fixated on the water and the sand and doesn't join the boys in creating the sequence of actions. He needs help learning how to use language to negotiate with others and doesn't understand why his dinosaur can't be first in line. Unlike Julie, Andrew notices his peers without prompting and uses appropriate eye-gaze shifts and spontaneous, relevant comments. The objective for Andrew is to keep track of the story and to make the transitions with his peers as they change places on the playground and use language. When Andrew returns to the classroom after each session, I ask him to retell the entire dinosaur story. After narrating the story, Andrew smiles at me and remarks, "They did waited for me! They like me! They do like me!"

Case Study Three

The Chicken Story

This story illustrates ways of teaching another 4 year old, Jacques, to express his own feelings within a real life story context with language.

As a resident of France, he was diagnosed with PDD/Autism Spectrum Disorder by a child psychiatrist in Berlin, Germany. At the age of 3, Jacques used tantrum behavior, gestures, and screaming to request or to protest. He had frequent "meltdowns" and refused to tolerate any change in routine. He twirled his hands, stared at the lights in the window, and ignored anyone who called his name. Since that time, Jacques has had intensive play therapy with a team in New England consisting of a child psychologist, a developmental pediatrician, an occupational therapist, a physical therapist and a speech pathologist. I was the speech therapist who began the first play therapy with Jacques. He understood three languages—French, English and German—but his communication consisted of single words and sometimes two-word phrases that were a combination of French and English and words that were unintelligible.

When Jacques was angry or frustrated during the first few weeks of therapy, he cried and screamed. When he wanted to express himself, he became cognitively confused and had severe tantrums. One day, early in his therapy, Jacques's special alligator, made out of spongy material, broke into two pieces. He wanted to say that he was disappointed and that he needed a new alligator, but instead he had a "meltdown" that lasted for several hours. In between sobs, he spoke words that were related to some video or television character. He hit himself on the head, banged his legs on the floor and ran around in circles. He was devastated at the loss of his toy and couldn't verbally express his feelings.

After one year of intensive therapy, Jacques is learning to use language in full sentences. He is beginning to use language to express feelings and shifts routinely from French to English, depending on his listener. He speaks French to his mother and father and English to his therapists in the States. Some of Jacques's language delay may have been due to this bilingual complication rather than autism, or it may be a combination of both. With all children, language delay is a very complex diagnosis. It is impossible to know which specific element caused Jacques to be so delayed at 3 and 4 years of age.

The following discourse excerpt is taken from a play therapy session with Jacques at Drumlin Farm in Lincoln, Massachusetts. Drumlin Farm allows children to play with animals and to interact with animal trainers who teach them how these animals live. This session

is a cotreatment with Dr. Karen Levine, a child psychologist who works directly in the play sessions with me and with Jacques. We are in the "Chicken House" at the Farm. Jacques is learning to attach language to his own emotions and to "replay" his feelings. He learns to work through a problem, to play it over and over again, and to talk about his feelings within a play context. Karen provides the techniques of "Replays" (Levine, 2000) and I provide the language intervention from the approach of Narrative Play:

Episode One

Ann: Oh, look, Jacques, the chickens have been laying eggs. (*Ann points to an egg underneath a chicken and lifts it up.*)

Jacques: Oh, the chicken! Egg! I want an egg!
(*Jacques runs toward two chickens that are sitting on their eggs in the chicken bin. He pats the water wheel where they drink water.* He turns around to look at them and says *in French),* Want some water, chicken?
(*He gazes at Ann. She smiles back at him. He reaches over to pat the back of the chicken. He pulls his hand back.*) Soft! Feathers! Oh. Cluck, cluck!

Ann: Yes, the chicken is soft. I don't think she wants water. Do you want to see an egg?

Jacques: Yes! I want an egg!

Ann: It is under the chicken. It's okay if you borrow it. Reach in and take it.

Jacques: (*He reaches under the chicken and tries to pull out an egg. The chicken makes a loud screeching sound and pecks slightly on the back of his hand. Jacques screams and yells and slaps himself. He cries. He sobs. His mother takes him out of the chicken house. He continues to scream for 20 minutes.)*

Episode Two

Next day:

Ann: (*During Floor Time play therapy with Ann and Karen and his mom*)

Let's pretend this is the same chicken that pecked you yesterday. (*Ann holds a small plastic chicken.*) This chicken is pretend. It can't really hurt you. (*Ann places the chicken in Jacques's hand. He holds the chicken gently, looking at it. He says nothing.*)
Oh, how awful. That chicken! He pecked me! I hurt! Ow! Ow! (*Karen takes the role of Jacques getting pecked by the real chicken.)*

Jacques: (*He looks at Karen, then at the plastic chicken and then at Ann.*)

Ann: Oh, how awful! Did he peck you, Jacques?

Karen: Did he peck you? Did it hurt?

Ann: Ow! That chicken pecked me. I don't like that chicken! He hurt me! (*Providing language scripts for Jacques.*)

Mom: Oh, Jacques, the chicken pecked you. That hurt! Ow! ow!

Jacques: (*He watches Ann and Mom and then squeezes the plastic chicken.)*

Karen: Ow! That chicken pecked me! That awful chicken! I don't like him!

Ann: Yes, he hurt you! Tell me how he hurt you!

Mom: Use your words, Jacques. Tell us how he hurt you!

Jacques: The chicken has an egg, under here. (*He points under the plastic chicken.*) I wanted to take the egg. I didn't get it. The chicken pecked me here! (*He points to his hand.*) Ow!

Ann: Ow! That hurt. But, he has feelings, too. He wants to keep his egg.

Jacques: But, he pecked me. That hurt! Ow! Ow! Ow!

Ann: Ow!

Jacques: (*He cries and sobs.*)

Ann: Were you scared?

Jacques: I am scared!
(*Jacques slaps the plastic chicken as he yells "I am scared."*)

Episode Three

(*One week later at Drumlin Farm in the chicken house for the second time*)

Jacques: (*He pulls the wire gate open, and walks straight toward the chickens in the bins.*)

Drumlin Farm Guard:
Hi. Do you want to feel this egg? It is warm.

Jacques: Yes! (*He reaches up for the egg and cradles it in his hand.*)
(*He looks at the chicken in the bin.*)
Don't you peck me, chicken! You hurt me! Ow!!! I'm mad at you!
When I get the egg, don't you peck me! I am bringing it back!
(*He starts to pull out the egg from underneath the chicken.*)

Chicken: (squacks . . . schreeches)

Jacques: Don't yell at me, chicken. I'm mad at you! I am mad! Don't you hurt me! (*He grabs the egg and hands it to the guard. He jumps up and down smiling and runs to the chicken to pat her on her back feathers.*)
Okay, chicken, here's your egg back.
(*He carefully takes the egg from the guard, places it underneath the chicken and smiles as he calmly walks out of the chicken house.*)

Analysis

By replaying the event the next day with objects in a pretend play therapy session, the child learns to attach language to his own feelings, to name his emotions, and to assert himself in order to protect his feelings when the event or situation happens again. The location of the therapy sessions moves from symbolic play to a replay of the whole scary event with a plastic chicken and then back to the farm situation with real animals. In the second event, he is able to name how he feels, and he learns to see the perspective of the chicken. Jacques learns that the chicken is angry with him for wanting her egg. This narrative creates a problem-solving situation for Jacques and encourages him to talk with the play therapist and the child psychologist. After the first session in the chicken house, Jacques talks this through with his mother. The discussions engage the child in the logical thinking process of following a sequence and solving a problem.

Jacques solves an unplanned, disappointing problem in play that happens naturally on location. He identifies the emotion of "disappointment" over the chicken pecking his finger and talks about his fear. I suggest some language scripts, "Oh, that hurt! Remember that she has feelings, too. She wants to keep her egg!" This statement introduces the whole perspective of looking at the feelings of another person, in this case the chicken. Jacques finally states his feelings, "I am scared!" Even though he knows that the chicken has feelings too, he asserts himself and says, "Don't yell at me chicken! I'm mad!" He takes control of a situation that was originally scary to him and resolves the story with language that ends the controversy, "Okay, chicken, here's your egg!"

Conclusion

In this game of communication, Julie, Andrew, and Jacques, all 4-year-olds diagnosed with autism, develop the skills of joint attention and also learn to see the perspectives of others. As Julie stirs her pretend poison soup, she watches her peers, notices the play of others, and makes comments. She learns to be in the same proximity as her classmates. She follows them, and listens to their talk and avoids her distractions. Julie becomes more flexible in her play and learns the skills involved in joint attention.

By engaging in a narrative play theme about dinosaurs, Andrew listens to his peers as they make transitions in play, follows them, and makes comments about the story. When he realizes that his friends want him to be with them, he runs after them and becomes connected to the continuing story about dinosaurs on the playground. As he joins them, he feels more a part of the whole group. He is happier and less likely to be rejected by his classmates.

Jacques makes the connections between emotion and language by replaying his feelings and using language to express his emotions. Rather than having tantrums, he organizes his thoughts, states his angry feelings, and then resolves the whole narrative by giving the egg back in a calm manner. Jacques learns to control a communication problem. He learns how to see the chicken's perspective.

If children such as Julie, Andrew and Jacques learn the skills of interactive play with peers in a narrative form, they become less isolated and less aggressive. These skills transfer to interactions with

family, peers and classmates. Julie has recently joined her family talk about what she does on the playground at school with mud and sticks. After six months of playground speech therapy once a week, Julie's classmates make close emotional connections with her as she plays in other narrative themes at school. Andrew talks to his brothers at home about his dinosaur river gang of friends. His mother reports that he uses gesture, voice intonation and descriptive language that brings the whole family in to listen to his stories about school. Jacques loves to visit farms and pet the animals and talk to them as if they were peers. He even narrates what they are saying to his parents while he is playing at the farm. His preschool teacher in France reports that his French is much better and that he even received the "friendship" award at the end of the school year. Narration about play has become a natural way of talking for these three children previously diagnosed with autism.

When Julie leaves the twirling mud circle to make comments to a peer, she gives parents, teachers, and clinicians and researchers hope that children with perseverative actions can change behaviors. When Andrew runs after his classmates, carrying his dinosaur in one hand and commenting, "Wait for me!" he confirms the whole concept that a child with autism doesn't want to be left out and wants to make friends. When Jacques yells at the chicken that he is mad and then in the same moment hears that the chicken wants her egg back, he provides evidence that children with autism can use language to express emotions and can see the perspective of others. In a later session with Jacques, he says, "I want to be a farmer and have a chicken house." Holding onto the old plastic chicken, he looks at me with sustained eye contact and says that he wants his chickens to keep their eggs unless they really want to give them up.

Appendix A
Teaching Narrative Play Therapy

The following levels of teaching approaches are arranged in a general format. Further information on the details of each level with case examples will be in a second article. This is a general reference for this paper to describe the basic sequence of teaching a child to use narrative in play interactions. One child is diagnosed with autism and the other child, a peer, has no diagnosis and very good expressive and receptive language. In this description, the word "partner" refers to a child without any language disorder or autism and the words "the child" refers to the child with autism and language delay. At Levels I-VIII the two children are playing with a plastic sphere that expands and contracts and glows in the dark. At Level IX, they are playing with dinosaurs in a sandy stream created in the preschool playground.

The Communication and Symbolic Behavior Scales—Normed Edition (Wetherby & Prizant,1992) and the *Assessment of Social and Communication Skills for Children with Autism* (Quill, Bracken, & Fair, 2000, pp. 53–70) should be used for a baseline analysis of the status of the child with autism. Both assessment tools should be used as the child makes progress and new intervention goals and objectives need to be established in the play therapy. In this description both children are age 4 and in the same preschool.

•Goal A : To develop joint attention in interactive play

LEVEL I:

Teach the partner to comment to the child with a verbal cue , a finger-point gesture and a visual cue, if appropriate for this particular situation. Show the partner how you tap the child on the shoulder and say, "Look at me!" Have the partner wait until the child gives eye contact and then ask the partner to show the particular object (e.g., a sphere that glows in the dark and opens up and closes). Praise both children for this simple interaction of joint attention around one object.

LEVEL II:

Teach the partner to look around at the child who commented. Suggest that they both look at the object and make comments such as "Wow!" or "That's awesome!" Provide some visual scripts (if both children read) to cue them with several comments. Repeat this phase of commenting for several weeks.

LEVEL III:

Ask one of the partners to hold the object up and ask, "Want to try it?" Support the partner in asking the question and the child in answering the question. This is the first level of teaching the child to listen to the partner, look at the partner, and acknowledge the question. If the child is not at this developmental level, simply continue the commenting level II.

LEVEL IV:

Suggest that they each play with the object, handing it back and forth. For example, if the object is a space "sphere " that glows in the dark, dim the lights and prompt them to each make a comment about the sphere. Make comments about what they are doing. Exaggerate your tone of voice and vary your pitch patterns. Encourage them to make their own comments. Use strong emotional responses to the partner as well as the child. The therapist's emotional tone is important.

LEVEL V:

Leave them alone for a few minutes to observe them in parallel play. Observe and take notes on how they play and whether they make any action intentional to join the partner by moving the sphere closer, looking at the partner, and looking up from play actions. Reinforce any of these small actions with praise. Keep a checklist on the development of their commenting, eye-gaze shifts, and a simple language sample.

LEVEL VI:

Ask the partner to move the object toward the language-delayed child. See whether either child makes a comment. Use verbal

prompts and gesture to get them to watch the object together. Increase the amount of time they comment by asking them questions about the object. Each play session should increase the comments and joint attention.

•***Goal B: To develop a sense of story between the partners with one object (sphere, a car,) and an agent (a figure-character) moving in one sequential action in a simple narrative with a beginning, middle and an end for 5–10 minutes.***

LEVEL VII:

To create a story about the object, ask the partner without language disabilities to show the language-delayed child the object and say, "Oh, look the sphere is moving in space! Where does it go?" Suggest that they both move with the object around the room. Encourage the partner to watch the child and comment. Suggest that the partner follow the child.

LEVEL VIII:

Use simple language. Rephrase their comments. Bring in a small figure to ride in the sphere as they move it. Ask one child to name the figure. Encourage the child to create a short story (e.g., Jacques is riding on the sphere in space. Look, he is going to land on the moon. Oh, now he is coming back home.)

LEVEL IX:

Write the narrative on the computer. Take photographs of the partners using the objects in the story. Put the photos and scripts of the story in a small book. Give a copy to each child to practice. Make this narrative short and include a beginning, middle, and an end. Practice the story with the pictures.

LEVEL X:

Videotape the partners in play and suggest that they create a story about what they are doing together. Help them figure out the story. Show them the tape as soon as possible. Give the tape to their parents to watch. Ask parents to assist the child with a partner and practice play every day for at least 30–40 minutes.

LEVEL XI:

At this point the play therapist can use several methods to intervene in the location context. The child with language delay is playing with another peer, usually in parallel play only. The play therapist joins the two children by becoming a part of the physical proximity or space around the two children. The therapist takes an object nearby and begins to narrate an action about the object in the environment. A child with autism loves to visualize actions with objects. When the story setting is established (e.g., Two children are playing with large dinosaurs in a sandy wet area of the playground), the therapist makes a suggestion for the beginning of the narrative. After suggestions such as, "Oh, let's have the dinosaurs go down the sandy river. Let's get more water. Look, my dinosaur is walking through the river," the two children may or may not imitate the specific action of walking dinosaurs. With a verbal and gesture point to a dinosaur and say, "My dinosaur is walking!" Ideally, the child will imitate the walking behavior. Continue on this walk, making comments to both children.

LEVEL XII:

Keep narrating the actions of the dinosaurs. When a child with language delay imitates an action or a word or a comment, rephrase the verbalization. Use gestures and expectant looks to cue both children to look at each other and the object. Ask for joint attention between the two children who are walking dinosaurs. Narrate a comment. Then, suggest that the dinosaurs jump into a tree and eat berries in a pretend play sequence. Continue suggesting some simple ending to the story such as, "dinosaurs go home to eat dinner and then they go to sleep." Try to keep both children on the one topic of dinosaurs and to keep them using a sequence of actions that complete a narrative. As the two children begin to relate to each other, make spontaneous comments, and use eye-gaze shifts frequently; they are using joint attention. As they continue to play in natural settings, relate to them as another participant in the whole story. Use the interactions between the two peers to teach the more subtle cues of social communication.

References

Applebee, A.N. (1978). *The child's concept of story.* Chicago: Univ. of Chicago Press.

Baldwin, D. (1995). Understanding the link between joint attention and language. In C. Moore & P. Dunhan (Eds.), *Joint attention: Its origins and role in development* (pp. 131–158). Hillsdale, NJ: Lawrence Erlbaum.

Baron-Cohen, S. (1995). The eye detection detector and the shared attention mechanism: Two cases for evolutionary psychology. In C. Moore & P. Dunham (Eds.), *Joint attention: Its origins and role in development* (pp. 41–60). Hillsdale, NJ: Lawrence Erlbaum.

Bates, E., Benigni, L., Bretherton, I., Camaioni, L., & Volterra, V. (1979). *The emergency of symbols: Cognition and communication in infancy.* New York: Academic Press.

Blum-Kulka, S., & Snow, C. (1991). Developing autonomy for tellers, tales and telling family-narrative events. Paper for *Narrative and Life History.*

Bruner, J. (1975). From communication to language: A psychological perspective. *Cognition, 3,* 255–287.

Bruner, J. (1990a). *Acts of meaning.* Cambridge: Harvard University Press.

Bruner, J. (1990b). Culture and human development: A new look. *Human Development, 33,* 344–355.

Densmore, A. (1997). *A different language game.* Doctoral dissertation. Clark University.

Feagans, L. & Applebaum, M. (1986). Validation of language subtypes in learning disabled children. *Journal of Educational Psychology, 78*(5), 358–364.

Gee, J. (1991). A linguistic approach to narrative. *Journal of Narrative and Life History, 1*(1), 16–39.

Gee, J. (1992). *The social mind.* New York: Bergin & Garvey.

Gee, J., Michaels, S., & O'Connor, M. C. (1992). Discourse analysis. *The Handbook of Qualitative Research in Education.* Academic Press, Inc.

Gray, C. (1994a). *The original social stories book.* Jenison Public Schools. Future Horizons, Inc.

Gray, C. (1994b) *The new social stories book.* Jension Public Schools. Future Horizons Inc.

Greenspan, S. I. (1993). *Playground politics.* Addison-Wesley Publishing Company.

Greenspan, S. I., & Wieder, S. (1998). *The child with special needs.* Mass: Addison-Wesley.

Greenspan, S. I., & Wieder, S. (2000). Overview and recommendations. *Clinical Practice Guidelines.* ICDL Press.

Heath, S. (1983). *Ways with words: Language, life, and work in communities and classrooms.* Cambridge: Cambridge University Press.

Hobson, P. (1993). *Autism and the development of mind.* Hillsdale, NJ: Erlbaum.

Kagan, J. (1998). *Galen's prophecy.* Westview Press, a subsidiary of Persus Press. LLC.

Kozlin, A. (1989). *Thought and language.* Cambridge: MIT Press.

Levine, K. (2000). "Replays" in review.
Levine, R. (1991). Lecture at Harvard Graduate School of Education, Harvard University in a course called "Family and Culture."
McCabe, A., & Peterson, C. (1991). *Developing narrative structure.* Lawrence Erlbaum.
Michaels, S. (1990). The dismantling of narrative. A. McCabe & C. Peterson (Eds.), *Developing Narrative Structure.* Hillsdale, NJ, Lawrence Erlbaum.
Miller, P., & Moore, B. B. (1989). Narrative conjunctions of caregiver and child: A comparative perspective on socialization through stories. *Ethos, 17*(4),428–449.
Mundy, P. (1995). Joint attention, social-emotional approach in children with autism. *Development and Psychopathology, 7,* 63–82.
Mundy, P., Sigman, M., & Kasari, C. (1993). The theory of mind and joint attention deficits in autism. In S. Baron-Cohen, H. Tager-Flusberg, & D. J. Cohen (Eds.), *Understanding other minds: Perspectives from autism* (pp. 181–203). Oxford, U.K.: Oxford University Press.
Ochs, E., & Schieffelin, B. B. (1984). Language acquisition and socialization: Three developmental stories. In R. Schweder & R. Levine (Eds.), *Culture theory: Essays on mind, self, and emotion.* New York: Cambridge Univer. Press.
Ochs, E., Smith, R., & Taylor, C. (1989). Detective stories at dinnertime: Problem-solving through co-narration. *Cultural Dynamics, 2,* 238–257.
Paley, V. G. (1990). *The boy who would be a helicopter.* Cambridge: Harvard University Press.
Piaget, J. (1962). *Play, dreams, and imitation in childhood.* New York: W.W. Norton.
Prizant, B. M., & Meyer, E. C. (1993). Socioemotional aspects of language and socio-communication disorders in young children and their families. *Journal of Clinical Practice, 2,*(3), 56–71.
Quill, K. (1995). *Teaching autistic children.* New York: Delmar Publishers.
Quill, K., Bracken, K. N., & Fair, M. E. (2000). Assessment of social and communication skills for children with autism. In K. Quill *Do-watch-listen-say, social and communication intervention for children with autism* (Ed.), (pp. 53–70). London: Paul Brookes Publishing Co.
Rice, M., Sell, M., & Hadley, P. (1991). Social interactions of speech-and-language-impaired children. *Journal of Speech and Hearing Research, 34,* 1299–1307.
Rogoff, B. (1990). *Apprenticeship in thinking.* Oxford: Oxford University Press.
Roth, F., & Clark, D. (1987). Symbolic play and social participation abilities of language-impaired and normally developing children. *Journal of Speech and Hearing Disorders, 52,* 17–29.
Snow, C., & Dickinson, D. (1990). Social sources of narrative skills at home and at school. *First Language, 10,* 87–103.
Tager-Flusberg, H. (1993). What language reveals about the understanding of minds in children with autism. In S. Baron-Cohen, H. Tager-Flusberg, & D. J. Cohen (Eds.), *Understanding other minds: Perspectives in autism* (pp. 138–157). Oxford, U.K.: Oxford University Press.
Thal, D., & Bates, E. (1988). Language and gesture in late talkers. *Journal of Speech and Hearing Research, 31,*(3), 115–123.

Tomasello, M. (1995). Joint attention as social cognition. In C. Moore & P. Dunhan (Eds.), *Joint attention: Its origins and role in development* (pp. 103–130).
Vygotsky, L. S. (1987). *Thinking and speech.* Ed. and translated Hillsdale NJ: Lawrence Erlbaum. N. Minick. New York: Plenum. Translation of Vygotsky, *Collected works,* Vol. 2: Moscow.
Vygotsky, L.S. (1989). *Thought and language.* Translated by Alex Kozulin. Cambridge: MIT Press.
Werner, L., & Kaplan, B. (1963). *Symbol formation: An organismic-developmental approach to language and expression of thought.* New York: Wiley.
Wertsch, J. V. (1991). *Vygotsky and the social formation of mind.* Cambridge: Harvard University Press.
Wertsch, J. V. (1993). Lecture at Clark University, October, 1993.
Wetherby, A. M., & Prizant, B. M. (1992). *Communication and symbolic behavior scales—Normed Edition.* Applied Symbolix Inc.
Wetherby, A., & Prizant, B. (1993). Profiling communication and symbolic abilities in young children. *Journal of Speech and Hearing Research, 27,* 367–377.
Wittgenstein, L. (1953). *Philosophical investigations.* Translated by G. E. M. Anscombe. I The English Test of the Third Edition. New York: Macmillan.
Wolf, D. (1985). Ways of telling: Text repertoires in elementary school children. *Journal of Education, 167,*(1), 71–87.
Wolfberg, P. (1995). Enhancing children's play. In Kathleen Quill (Ed.), *Teaching children with autism* (pp. 193–218). New York: Delmar Publishers..
Wolf, D., & Pusch, J. (1985). The origins of autonomous texts in play boundaries. In L. Galda & A. Pelligrini (Eds.), *Play, language and stories: The development of children's literate behavior.* N.J.: Ablex Publishing.
Wolfson, N. (1976). A feature of performed narrative: The conversational historical present. *Language in Society, 7* 215–237.

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