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Teacher Perception of Social/Emotional Skills of Preschool Children and the Relationship to Common Core Standards

by

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A project submitted in partial fulfillment of the requirements for the degree of

MASTER OF EDUCATION

In

Communicative Disorders and Deaf Education

Approved:

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Introduction

Sampson is a 4-year-old preschooler. It is difficult for him to make friends, understand simple social settings, and interact with peers. He struggles to interpret incoming contextual information (such as talking to a peer about the blocks they are playing with), has difficulty comprehending non-literal/figurative expressions (such as jokes and irony), and implicit messages (such as when a child does not want to play with him). Sampson's difficulties increase his risk of social isolation and lower self-esteem.

This vignette offers a glimpse into the challenges faced by children with low social/emotional skills. The social use of language, often referred to as pragmatics, is a skill learned early in life by typically developing children (Geurts, & Embrechts, 2010). To become a competent language user, children must learn to appropriately play the role of speaker and listener and understand how they interact (Toe, Beattie & Barr, 2007).

Children are social beings, and as such, need to learn the skills necessary to build relationships in a social world. The appropriate use of social language is complicated (Kostelnik, Whiren, Soderman & Gregory, 2006). Even with the most basic social exchange, such as conversational turn taking, proper engagement using social skills is required (Common Core State Standards Initiative, 2013). To interact effectively, one must understand various communication contexts and when to use them appropriately. Many judgments must be made in a short amount of time, such as what is polite or impolite based on the relationship with the person, the time, the place, the culture norms, the person's current status as well as one's own status (Kostelnik, et al., 2006). For example, the way to greet the school principal is different than the way to greet a best

friend. Social/emotional skills may seem intuitive to adults, but children are still in the experimental phase, the trial and error of learning and perfecting social skills (Kostelnik, et al., 2006). It is indeed necessary that children be provided with the tools to appropriately use these skills. In fact, Hartup (1992) contends that, “The single best childhood predictor of adult adaptation is not school grades, and not classroom behavior, but rather, the adequacy with which the child gets along with other children. Children who are generally disliked, who are aggressive and disruptive, who are unable to sustain close relationships with other children, and who cannot establish a place for themselves in the peer culture are seriously at risk". (p. 1) Therefore, social/emotional skills should be evaluated and documented to provide at risk children the instruments for social competence.

Social/Emotional Skills Categories

Social/emotional communications are commonly organized into categories, thus providing a means to objectively evaluate and document functional social performances across environments. According to commonly-used social/emotional (pragmatic) evaluations checklists (see Table 1), categories of performance evaluations typically include:

1. States Needs: the child makes his/her needs known, usually demonstrated by starting sentences with “I want”.
2. Gives Commands: the child directs others in some manner, with a “do as I tell you” intent.
3. Personal: the child talks about how they feel, or “expresses feelings” in some way.

4. Social Interactional: the child uses appropriate social rules and engages in conversation appropriately, a “Me and you” interaction.
5. Wants Explanations: the child asks questions in an attempt to gain information, “Tell me why”.
6. Shares Knowledge and Imaginations: the child role-plays, describes situations with main events, tells jokes, or even tells a lie; with the intent of “I have something to tell you”.
7. Self-Concept/Self-Esteem: the child shows persistence in trying, pride and confidence in accomplishments, and uses words/sign/cue to state basic needs.
8. Nonverbal Communication Skills: the child uses appropriate eye contact, understands other’s use of body language, uses appropriate body language, and understands and uses appropriate physical space boundaries.
9. General Conversation Skills: the child interrupts appropriately, gives effective directions to others, revises misunderstood messages, maintains topic appropriately, and gives appropriate explanations for actions.

Social/Emotional Evaluations

Social/emotional skill evaluations are typically obtained using two primary methods of assessment: 1) checklists and 2) standardized assessments.

Unlike many objective skills measured in educational settings (such as performance on a math test, spelling skills, or grammar evaluation), social/emotional behaviors are difficult to quantify and typically involve subjective teacher and parent evaluations using standardized checklists across environments and social situations.

Checklists allow performance to be documented across settings and from different perspectives. Examples of checklists frequently used in educational settings are listed in Table 1.

Social/emotional skills can also be quantified using standardized assessments specifically developed to evaluate pragmatic skills or in language assessments that contain a subcomponent for pragmatic evaluations. Examples of standardized assessments are shown in Table 2.

Common Core Standards

The Common Core Standards Initiative arose from the awareness of conversations and debates among education leaders about a lack of agreement between what standards-based education is intended to be and what it actually is (Watt, 2011). The Common Core's goal is to provide teachers and parents with a common understanding of what students are expected to learn. With consistent standards, benchmarks will be provided for all students, regardless of where they live. These standards give a definition of the knowledge and skills students should gain in every school year of learning (NAEYC, 2012). The Common Core State Standards (CCSS) Initiative is state-led, and coordinated by the National Governors Association Center for Best Practices (NGA Center) and the Council of Chief State School Officers (CCSSO) in a partnership with Achieve (NAEYC, 2012). The Common Core is being implemented in schools across the country, and as many as 45 states have adopted this curriculum as best practice education in early childhood as of Fall 2012 (NAEYC, 2012).

The Common Core Standards are used for students from kindergarten to12th grade; Early Childhood Core Standards (Pre-K) are under the jurisdiction of each individual state. The purpose of the Early Childhood Core Standards in Utah is to help public preschools make informed decisions regarding curriculum in order to prepare children for successful transitions into kindergarten and the beginning of the Common Core (K-12). The Utah Early Childhood Core Standards are the result of a collaborative effort among the Utah State Office of Education, the Utah Office of Child Care, Head Start, the Bureau of Child Development, Higher Education, Utah PTA, United Way, public schools, Special Education, Title I, Voices for Utah Children, and Child Care Resource and Referral (Utah Early Childhood Core Standards, 2013). The Standards are designed to be inclusive of all children and should be implemented by providing experiences that build upon the child's current strengths, knowledge and skills (Utah Early Childhood Core Standards). The intended learning outcomes reflect the belief that in early childhood, education should address the intellectual, social, emotional, and physical development of children. Through the implementation of these early childhood standards, children will be taught to become socially and civically competent and be able to express themselves effectively (Utah Early Childhood Core Standards, 2013).

Utah's Early Childhood Core Standards describe 'typical development' and where a child should be developmentally in each of the three sections: Preschool Foundational Standards, Kindergarten Readiness Standards (End of Preschool), and Utah's Core Kindergarten Standards (End of Kindergarten). Utah's Early Childhood Core Standards have six categories including: English Language Arts, Mathematics, Approaches to Learning and Science, Social/Emotional and Social Studies, Creative Arts,

Physical/Health and Safety.

Social/Emotional and Social Studies (SE&SS) is the section in the Utah's Early Childhood Core Standards where social/emotional skill development is targeted. The SE&SS category has two standards. The first standard focuses on the development of self-awareness and positive self esteem of the child. The objectives in this category include sections designed to aid the child in knowing personal information, awareness of abilities and preferences, growing a capacity for independence, and expressing self in different roles and mediums. The second standard is focused on the child's social ability to promote positive interactions with others. The objectives in this category include sections designed to promote positive interactions such as developing self-control, developing skills to interact cooperatively with others, respecting others and their belongings, as well as developing skills to solve conflicts. Through experience of positive relationships developed with peers and adults in the classroom, children carry over the same knowledge and skills as adults in understanding social norms in society and can become active participants (Common Core State Standards Initiative, 2013).

Children who are DHH

In 1990, implementation of the Individuals with Disabilities Education Act (IDEA) specified that children with disabilities should be educated in mainstream settings to the fullest possible extent, also known as the least restrictive environment (LRE). The less opportunity a student has to interact and learn with peers who are 'typically developing', the more the placement is considered to be restrictive. Through IDEA, children with disabilities have access to the general education curriculum, and schools are

required to provide a free appropriate public education (FAPE) (IDEA.gov).

Prior to IDEA, the educational needs of millions of children with disabilities were not being fully met and often included segregation in the educational settings. For example, many children with hearing loss were educated separate from their hearing peers in residential schools for the deaf. Although residential schools continue to serve children and families throughout the country, many children who are deaf of hard of hearing (DHH) use advanced hearing technology to develop and use listening and spoken language (LSL) as their sole or primary mode of communication. A primary goal of a LSL approach is for children who are DHH to successfully enter mainstream educational settings and to participate fully with their hearing peers and in their neighborhood schools (Dolman, 2010; Estes, 2010; Lenihan, 2010).

Central to development of LSL in children who are DHH is early identification of hearing loss, early intervention services, and use of advanced hearing technology to provide access to sound.

Early Identification and Early Intervention

Approximately 3 per 1,000 newborns in the United States are born with some degree of hearing loss (White, 2004). Research suggests that the most intensive period of speech and language development is during the first three years of life, when a child's brain is still developing and maturing (NIDCD). According to the National Center for Hearing Assessment and Management (NCHAM) (2013), 97% of newborns are screened for hearing loss prior to discharge from the hospital, resulting in an average age of identification of hearing loss at 2-3 months of age. Prior to newborn hearing screening

programs, hearing loss was usually not detected until the child was 2 ½ to 3 years old (Harrison & Roush, 1996; White, Forsman, Eichwald, & Munoz, 2010).

Because of advanced technology and newborn hearing screenings, children who are DHH who are identified at an early age, and families have the option of participating in specialized listening and spoken language early intervention programs. With the growing technological advances, younger children are being fit with listening devices and are gaining access to sound. Fitting a child with a listening device, and giving the child early intervention greatly increases the child's prognosis for learning speech and language. Research indicates that children with hearing loss achieve language abilities similar to hearing peers if comprehensive intervention services are provided by 6 months of age (Moeller, 2000). Maximizing the critical period of language learning, infants who are DHH are now exposed to language closer to their typical hearing peers and are at a greater advantage to learning language closer to appropriate developmental milestones (Goberis, Beams, Dalpes, Abrisch, Baca & Yoshinaga-Itano, 2012).

Technology and Access to Sound

In the late 1980s digital signal-processing chips were introduced to make the first practical hearing aid devices (Mills, 2011). Today, hearing aids are small, lightweight, and technology is growing better everyday. Through hearings aids, children are gaining an amplified access to sound at an early age.

Cochlear implants give access to sound to patients who have previously not had the opportunity to gain access through traditional hearing aids. A cochlear implant is a surgically implanted device that is equipped with electrodes that stimulate the auditory

nerve. Cochlear implants have been used in adult patients since 1980 and in child patients since 1990 (Rekkedal, 2012).

Technology will continue to improve and new hearing models are being introduced every few years. “Technology is transforming innovation at its core, allowing companies to test new ideas at speeds and prices that were unimaginable even a decade ago” (Brynjolfsson & Schrage, 2009).

Virtually every aspect of oral communication and language learning is dependent on early access to the phonology of speech (Niparko & Blankenhorn, 2003). From an early age, children learn from the competent language models around them. The first years of life are critical for language development, and because of this, children can be fit with hearing aids within the first few weeks of life, and with cochlear implants at 12 months of age.

Listening and Spoken Language Programs

Listening and spoken language is an intensive approach to teaching children who are DHH how to listen and communicate through spoken language. The aim of the approach is to help the child follow typical developmental milestones as closely to their age-matched peers as possible, and be integrated into inclusive mainstream settings as early as possible. “With early identification and the use of advanced hearing technology, children with even the most severe or profound hearing losses can access audition and follow an intervention approach focused on achieving typical developmental milestones in listening, speech, language, cognition, and conversational competence” (ASHA, 2012).

OPTION schools, Inc. was established in 1981, to bring Listening and Spoken Language schools together to share resources and overcome challenges. They are

committed to ensuring children who are DHH and their families have access to listening and spoken language education choices. Together there are forty-one OPTION schools across the country, with goals of providing an intense listening and spoken language approach to teaching children who are DHH.

Social/Emotional Skills & Children who are DHH

A growing body of research suggests children who are DHH have delays or difficulty in the social use of language compared to their typical hearing peers (Antia, Jones, Luckner, Kreimeyer & Reed, 2011; Bat-Chava, Martin & Kosciw, 2005; Goberis, et al., 2012; Johnson, 2011; Le Maner-Indrissi, Dardier, Pajon, Tan-Bescond, David, Deleau & Godey, 2010; Nicholas, 2000; Peterson, 2009; Tasker, Nowakowski & Schmidt, 2010; Thagard, Hilsmier & Easterbrooks, 2011; Toe, et al., 2007). These delays may cause children to have difficulty in social situations, increasing the child's potential risk of isolation and lower self-esteem (Toe, et al., 2007). In recent years, the availability of better hearing technology has allowed children who are DHH to obtain much greater access to spoken language and develop improved oral communication, as well as be placed into mainstream educational environments (Bat-Chava, et al., 2005; Toe, et al., 2007). Children's social relationships have been found to improve as a result of hearing technology, as the hearing device helps these children develop improved communication skills, resulting in more satisfying and successful interactions with peers (Bat-Chava, et al., 2005; Thagard, et al., 2011).

Research suggests that many children who are DHH, and learning spoken

language, follow the developmental milestones of typical hearing children (Nicholas, 2000; Goberis, et al., 2012). For example, Nicholas (2000) investigated whether children who are DHH and who are learning spoken language communicate similarly to typically developing children at younger ages. The study included 43 children who are DHH and 96 children with normal hearing between the ages 12 and 54 months. Data were collected from videotaped communication samples of each child and their parent in a loosely structured 30-minute play session. A transcriber then transcribed the sessions; a "verifier" reviewed each of the tapes and the transcriptions to check for errors possibly made by the transcriber. The verifier was an experienced teacher of the deaf and was familiar with the speech of young children who are DHH. Findings from this study suggest that the use of language for social purposes is clearly tied to the achievement of traditional language milestones.

Previous research has documented the importance of early identification and early intervention for minimizing communication, language, and literacy delays frequently observed in children with hearing loss (Moeller, 2000; Yoshinga-Itano, et al 1998). However, there is limited research on the effect of early identification and early intervention on the social/emotional skills learned by children who are DHH (Goberis, et al., 2012). Goberis, et al. (2012), evaluated this gap in the research of children who are DHH, early identified and who received early intervention to better understand their social language development compared to typical hearing peers. They found that there is a large gap between children who are DHH and those with normal hearing in regards to social/emotional development. They created a parent checklist adapted from work done by Simon in 1984, with six pragmatic objectives (states needs, gives commands,

personal, interactional, wants explanations, shares knowledge and imaginations). The checklist had 96 total items; 7 demographic questions, 45 pragmatic checklist items, and 43 situation comprehension survey items. Parents were asked to describe the child's performance on each of these questions by marking one of the answers: Not Present, Uses No Words Preverbal, Uses 1-3 Words, More Complex Language. One hundred and nine children were in the group of children with normal hearing, with ages ranging from two to seven years. There were 126 participants who were DHH between the ages of three to seven years. Children with normal hearing mastered 44% (20 of 45) of the items using complex language by three years of age. By four years of age, they mastered 95.5% (43 of 45) of the items. By five years of age they mastered 98% of the items. By six years, they mastered 100% of the items with complex language. In contrast, children who were DHH mastered only 6.6% (3 of 45) of the items with complex language by six years of age. They mastered 69% (31 of 45) of the items with complex language by seven years of age. This study highlights the gap between children who are DHH and their normal hearing peers in the area of social/emotional communication.

However, the participants in this study varied greatly on the languages used in the home. Of the normal hearing group 93.6% used English only as compared with 31.7% of the DHH group. 57.9% of the DHH group indicated that they used English and Sign Language and 5.6% indicated that they were bilingual spoken language and Sign Language homes. Social/Emotional skill attempts were only evaluated through oral language, thus providing a disadvantage for children who are DHH and communicate through English and Sign Language. It is also important to note that social/emotional skills are by definition dependent on the context of the interaction. Parents, teachers, and

clinicians each see the child in different contexts. This only gave us a glimpse into the parent's perception.

Recent advances in hearing technology have generally outpaced implementation of effective strategies for children who are DHH in the classroom. Most existing research has focused on speech, language, and academic performance of DHH children using spoken language for communication. Although important, the social/emotional development of children with hearing loss in the classroom can have a significant impact on the overall quality of the educational experience. Previous research on social/emotional development has focused largely on child data (e.g. standardized testing, direct observations) and parent's perception; although, little has been done to capture the teachers' perspective.

LSL & The Early Childhood Common Core

The aims and goals of the Early Childhood Common Core program, dictated by each individual state, is to prepare young children ages three to five for the Common Core Standards that begin in Kindergarten. LSL programs are designed to teach children who are DHH spoken language in hopes to smoothly transition the children into a mainstream setting as soon as possible. In attempts to mainstream children who are DHH into neighborhood schools by kindergarten, LSL programs focus in early intervention and appropriate fitting of assistive technology for each individual child. The purpose of this study is to get an overview of teachers' perceptions of the social/emotional skills of children who are DHH in LSL programs compared to perceptions of teachers of typically-developing preschool-age children. The study will also identify the intervention recommendations that teachers believe have contributed to social/emotional skill

development of preschool-age children. Utah's Early Childhood Core Standards will be used to assess the social/emotional skills of these two sets of children.

Method

Survey Questionnaire

This study used a cross-sectional survey design. An electronic survey questionnaire (Patten, 2011) was developed to evaluate teacher perceptions of social-emotional development of preschool-age children who are deaf or hard of hearing compared with typically developing peers. Institutional review board approval was obtained prior to data collection.

Distribution of the survey began in October 2013 and remained open for approximately 6 weeks. Reminder emails were sent two weeks after the initial distribution and again at 4 weeks after the initial distribution.

Participants

Participants for this study were 1) preschool teachers of children who are DHH in programs that specialize in helping children to develop listening and spoken language skills, and 2) preschool teachers of children with normal hearing in typical preschool classrooms.

The survey was electronically distributed to potential participants across multiple geographic regions of the United States, categorized as West coast, Midwest, Northeast, Southwest, and Southeast. Potential participants were identified by developing a list of Option LSL preschool programs in the United States (Option, 2013b), along with general education preschool programs in school districts located in similar regions. The list of

general education programs was compiled from a randomized web search of schools to encompass a broad geographic representation.

Survey Instrument

The survey contained 12 questions to query social/emotional development as aligned with Preschool Foundations in Utah's Early Childhood Common Core Standards for Social/Emotional Development. Teachers of children who are DHH were asked to provide feedback on the student with the highest level of social-emotional development and the student with the lowest level of social-emotional development. Teachers of children with normal hearing in typical preschool classrooms provided feedback on one student in their class whom the teacher believed has social/emotional skills typical of most children in their class. These responses served as a control to explore the degree to which the responses would align with expectations of the core standards. Teachers rated each skill as 'yes' (the child displays the skill consistently), 'emerging' (the child is beginning to display the skill but is not consistent), or 'no' (the child does not display the skill).

The survey also included two open-ended questions to identify teacher intervention recommendations that contribute to the social/emotional skill development of preschool-age children. Content analysis was used to quantify and describe this qualitative segment of the survey.

Results

Survey Demographics

The total number of email links distributed to specialized LSL deaf education programs was 41. Of those, 23 surveys were returned, resulting in a 56% response rate. The total number of email links distributed to general education preschool programs was 377. Of those, 26 surveys were returned, resulting in a 15% response rate. Because the teachers of children who are DHH completed survey questions concerning two children in their class, the number of survey respondents (n=49) is not equal to the number of children represented in the survey (n=72).

Regional representation of survey's received is shown in Table 2. The highest number of surveys were received from the Southeast region of the U.S. and the fewest were received from the Southwest region. Representation of urban and rural responders and gender of children were evenly split between the two groups (shown in Table 3). The majority of children used English as their primary language. A high percentage of respondents from general education classes (77%) taught in schools that received Title I funds, compared with few LSL programs (13%) that received Title I funds. The potential implications of this disparity are addressed in the discussion section.

Social/Emotional Core Standards

Survey participants responded to 12 questions concerning the social/emotional development of children in their class as aligned with preschool foundational standards in Utah's Early Childhood Core Standards. As shown in Table 4, social/emotional skill

development was either present or emerging in nearly every category, with very few children rated as not displaying one of the early childhood common core skills.

Teachers' Recommendations

Utilizing an open-ended response format, the survey queried intervention recommendations that respondents believe have contributed to social/emotional skill development of preschool-age children. Content analysis was used to examine the comments written on the surveys. Content analysis is a research technique for making inferences through objective and systematic analysis of a communication or consumer message (Hsieh & Shannon, 2005; Stemler, 2001). In the first step of the analysis, all comments to this open-ended question were compiled and analysis of the comments revealed commonalities across primary categories. Of the 62 open-ended comments written on the survey, 11 (18%) comments expressed the importance of having a structured environment with positive behavioral supports, and 11 (18%) also reported the need for teachers to facilitate social/emotional skill development through peer interaction and play activities. 10 (16%) comments reported that social skills be taught explicitly in the curriculum through direct instruction. There were three categories that had 8 (13%) comments in each category set. The comments in these categories specifically mention the following intervention types: role playing and adult modeling in the classroom; teacher collaboration with other teachers and parents; and having the teacher pre-teach the language needed for expressing feelings and problem solving in the classroom. Lastly, 6 (9%) of the comments stated that intervention through literary sources, such as

social stories, contributed to social/emotional skill development. Examples of verbatim responses in each of the above categories are found in Table 6.

Discussion

The social/emotional skill development of preschool-age children can have a considerable impact on successful transition into mainstream kindergarten settings. The transition into kindergarten can be challenging for many children, both with and without disabilities. The number of children in a preschool classroom is typically much smaller than the number of children in a kindergarten setting. Oftentimes the kindergarten classroom is physically larger than the preschool classroom, with a higher level of noise and activity. Children embark on the task of getting to know children with whom they have never met and must navigate a complex social network of sharing, playing, and problem solving. The skills listed in the Common Core Standards provide a reference for social/emotional development targets that indicate age-appropriate behaviors.

Although the social/emotional development of children who are DHH was the primary focus of this investigation, data were collected on typically developing children to provide a snapshot of their performance aligned with the expectations of the core standards. Of the twelve questions addressed in this study, teachers scored all typically developing preschool child as either displaying the skill consistently or the skill was emerging. No typically developing children represented in this study were judged as not displaying a skill.

There is variability in skill acquisition patterns across all early childhood developmental domains. Of primary interest in this study was the documentation of the potential for children who are DHH to develop social/emotional skills comparable or better than typically developing children in mainstream preschool classrooms. The LSL participants indicated that 90% of highest performing DHH children demonstrated skill acquisition in eight of the twelve common core standards for social/emotional development. Fewer than 5% of the top performing DHH children in any category were viewed as not having developed the social/emotional skill to some degree.

Although the lowest performing DHH children showed development that was considerably lower than typically-developing peers, these findings were not surprising given variability in child development patterns. Social/emotional development is particularly tenuous in the preschool years and a range in child performance is expected within any classroom of preschool children. However, these study findings suggest that even the lowest performing children still showed either presence or emerging development of skills across most common core areas of expectation.

Limitations

A limitation of this study, as to many survey studies, is the response rate. We would have liked a greater response rate from both groups of teachers. With the greater response rate, we would have liked a greater representation from all regions surveyed.

Conclusion

This cross-sectional study explored the social/emotional skills of preschool children who are DHH in LSL programs according to teachers' perceptions. Utah's Early

Childhood Core Standards, and typical developing children in similar regions were used as a comparison to make observations in this study. The children in LSL programs were assessed by the teachers' perception of the performance of the highest and lowest performing child of the classroom on twelve questions based on Utah's Early Childhood Core Standards. The LSL participants indicated that 90% of highest performing DHH children demonstrated skill acquisition in eight of the twelve common core standards for social/emotional development. Open-ended questions allowed teachers' to give opinions of the types of interventions for best teaching preschoolers social/emotional skills. For teachers looking to improve the social/emotional skill development of the children in their preschool classrooms, the recommendations offered by the teachers who took this survey may be useful. It is important that service providers in preschool settings implement effective interventions to improve social/emotional development.

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Table 1. Social/Emotional Skills Checklists

Checklist Name	Reference
Goberis D Pragmatics Checklist	http://edu.wyoming.gov/sf-docs/special-programs/svi_wreic_2013_pragmatics_checklist.pdf
The Minnesota Social Skills Checklist for Students who are Deaf and Hard of Hearing	http://successforkidswithhearingloss.com/wp-content/uploads/2011/08/Minnesota-Social-Skills-Checklist-for-Students-who-are-Deaf-Hard-of-Hearing-Chap-3.pdf
The Pragmatics Profile	http://wwwedit.wmin.ac.uk/psychology/pp/documents/Pragmatics%20Profile%20Children.pdf
John Tracy Clinic Pragmatic Skills Checklist	http://www.jtc.org/uploads/docs/Pragmatic_Skills_Checklist.pdf
Orion's Pragmatic Language Skills Questionnaire	http://www.nesc.k12.mn.us/files/Orions%20Pragmatic%20Language%20Skills.pdf
Children's Communication Checklist, Second Edition (CCC-2)	http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=015-8440-48X

Table 2. Standardized Assessments with Social/Emotional skills (Pragmatics) as a Primary Component or Sub-Component.

Assessment Name	Reference
Vineland Adaptive Behavior Scales (Vineland-II)	http://psychcorp.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=Vineland-II
Test of Pragmatic Language, Second Edition (TOPL-2)	http://portal.wpspublish.com/portal/page?_pageid=53,218605&_dad=portal&_schema=PORTAL
Preschool Language Scales, Fifth Edition (PLS-5)	http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=PLS-5

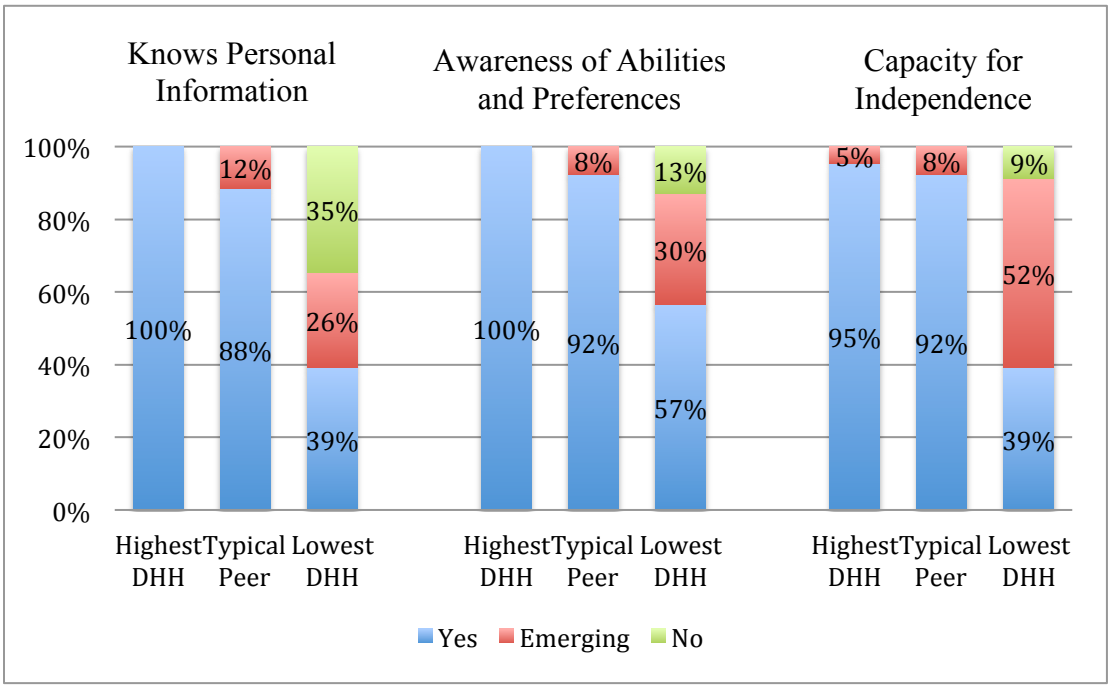
Table 3. Participant Demographics

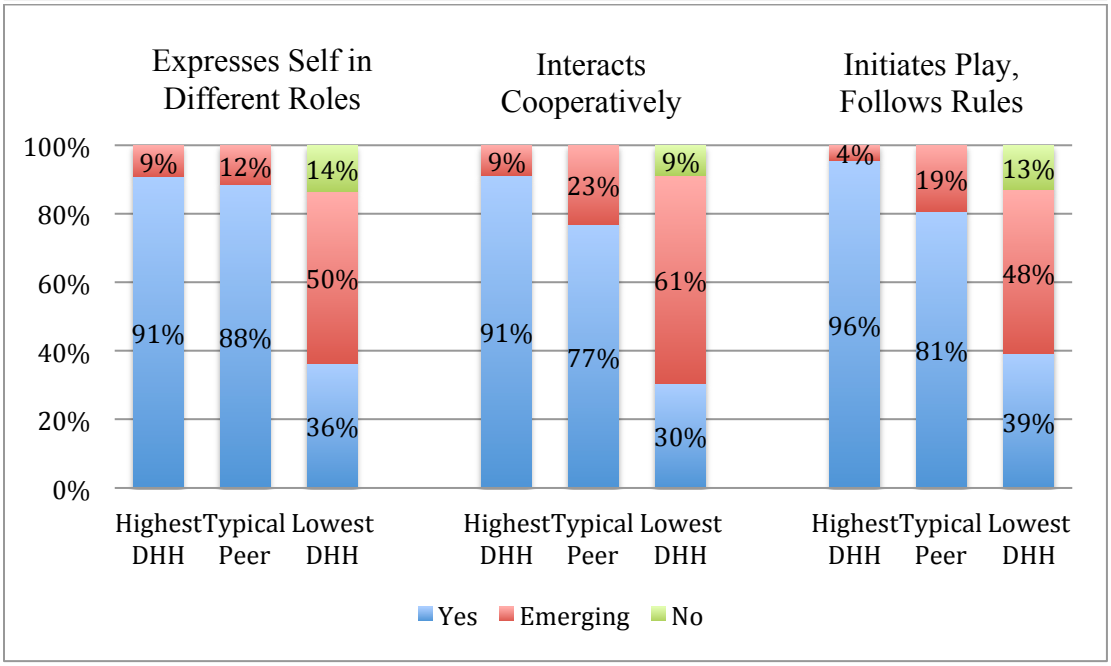
Participant Demographics (n=49)				
	DHH Teachers (n=23)		General Ed Teachers (n=26)	
Western Region	4	17%	3	11%
Midwest Region	6	26%	8	31%
Southwest Region	2	9%	2	8%
Northeast Region	5	22%	0	0%
Southeast Region	6	26%	13	50%
Urban	19	83%	22	85%
Rural	3	13%	4	15%
Not sure	1	4%	0	0%
Title I – Yes	3	13%	20	77%
Title I – No	13	57%	6	23%
Title I – Not sure	7	30%	0	0%

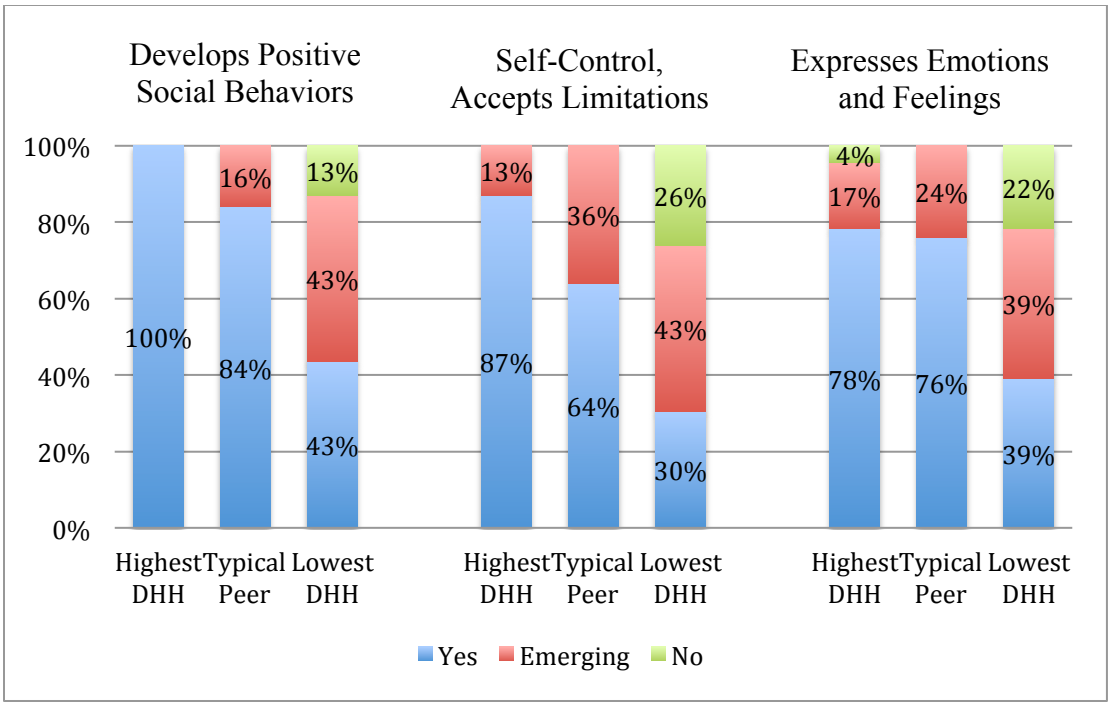
Table 4. Primary Language

Primary Language of Children Reported in Survey (n=72)						
	Highest DHH		Lowest DHH		Typical Peers	
English	18	78%	17	73%	20	77%
English Second Language	4	17%	1	5%	6	23%
American Sign Language	1	5%	4	17%	0	0%
Not sure	0	0%	1	5%	0	0%
Male	11	48%	13	57%	13	50%
Female	12	52%	10	43%	13	50%

Table 5. Social/Emotional Skills of Preschool Children






Develops Positive Social Behaviors
Self-Control, Accepts Limitations
Expresses Emotions and Feelings
100%
80%
60%
40%
20%
0%
100%
16%
84%
13%
43%
43%
13%
87%
36%
64%
26%
43%
30%
4%
17%
78%
24%
76%
22%
39%
39%
Highest DHH
Typical Peer
Lowest DHH
Yes
Emerging
No

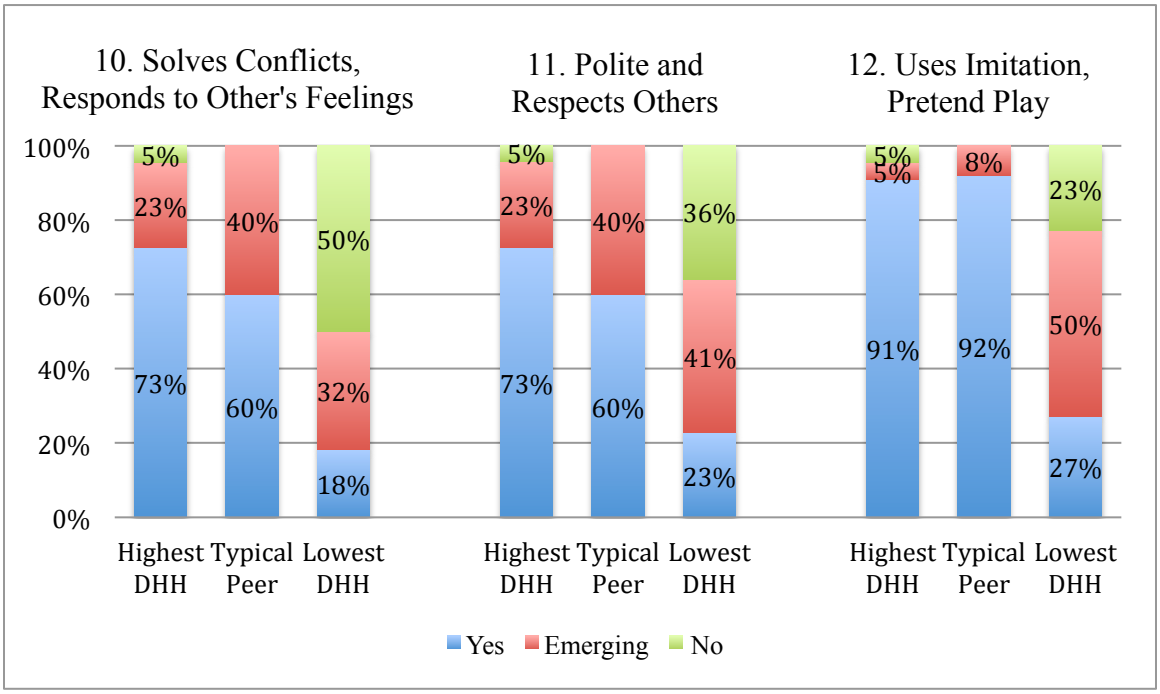

10. Solves Conflicts, Responds to Other's Feelings
11. Polite and Respects Others
12. Uses Imitation, Pretend Play
100%
80%
60%
40%
20%
0%
5%
23%
73%
40%
60%
50%
32%
18%
5%
23%
73%
40%
60%
36%
41%
23%
5%
5%
91%
8%
92%
23%
50%
27%
Highest DHH
Typical Peer
Lowest DHH
Yes
Emerging
No

Table 6. Participant Recommendations for Improving Social/Emotional Development

Please describe any intervention recommendations that you believe have contributed to Social/Emotional skill development of preschool-age children.		
n=62		
Categories	Examples of Verbatim Responses	# / %
Have a Structured Environment with Positive Behavior Management Strategies	• Teachers set up the environment and materials to ensure children have opportunities to practice asking for turns, making choices, sharing materials, etc. • Having a structured environment, feeling safe and loved, being around familiar people, enjoying school activities • I make it a point to recognize it and tell him/her that they communicated their feelings in the right way. • Interventions such as time out and taking away privileges when the child makes a 'bad choice.' Also praising when a child makes a 'good choice.'	11/18%
Facilitate through Peer Interaction/Play	• We provide multiple opportunities for children to practice their social/emotional skills while in the center-based playroom. • Free play time in centers such as a kitchen area with toy foods, table, etc. as well as a variety of toys that they can share and use to develop language with.	11/18%
Social Skills Curriculum / Direct Instruction	• We teach social/emotional skills directly to the students at our school. • I use direct instruction in structured lessons to explicitly teach social and emotional skills with lots of repetition. • We have a feelings unit specifically, and social skills are a daily conversation and learning experience.	10/16%
Role Play/Adult Modeling	• With a small adult to child ratio, we are able to have the adults model the desired behaviors and provide the targeted language to use in various situations. • Role Playing is effective with my students. • Acting out situations with the appropriate responses to problem issues • Sometimes my aid and I will pretend to do the wrong thing during circle time and the students have to tell us what we were supposed to do.	8/13%
Collaboration with other teachers and parents	• I think communicate with other teachers to use the same strategies or phrases that the students learned in the structured lesson to promote carry-over into other classrooms. • Weekly coaching sessions with parents • I believe Early Intervention starting before the age of 6 months on a weekly or bi-weekly basis with heavy	8/13%

	parent interaction have contributed positively to the Social/Emotional skill development of my preschool-age children.	
Pre-teach language for expressing feelings & problem solving	• Providing them with the words/language of problem solving and sharing feelings. • We teach them the language they can use to ask for what they need or want. • I have had child stop and express his feelings instead of crying out.	8/13%
Literacy Intervention/ Social Stories	• Using read alouds so children can identify with a character's feelings. I also use social stories with my preschool students • Using literature to address issues for group discussions • Twenty minutes daily of literacy intervention	6/9%

Appendix A

This child…

1. Knows personal information (e.g., calls self by name, uses "I" or "me"; awareness of self as separate from others; engages in behaviors that build relationships with adults; knows and uses friends' names).

2. Demonstrates awareness of abilities and preferences (e.g., selects activities based on preferences; participates in activities; asks others for help).

3. Develops growing capacity for independence (e.g., leaves parent/caregiver without undue anxiety; plays independently; engages in parallel play with other children; initiates interactions with adults and peers).

4. Expresses self in different roles and mediums (e.g., engages in pretend play and acts out roles; expresses emotions through facial expressions, sounds, gestures and words in a socially productive manner; shows pride in abilities).

5. Develops skills to interact cooperatively with others (e.g., participates in learning activities; interacts with another child; takes turns both verbally and nonverbally).

6. Participates in cooperative play (e.g., follows agree-upon rules (no hitting, etc); joins in ongoing activities, initiates play with others).

7. Employs positive social behaviors with peers and adults (e.g., recognizes and begins to respond to positive nonverbal gestures (e.g., smiling, nodding, and waving); uses culturally appropriate eye contact with peers and adults; forms positive relationships with adults; develops friendships with peers).

8. Develops self-control by regulating impulses and feelings (e.g., follows simple rules, routines and directions; understands and accepts limitations (being told 'no'); able to cope with stress and new situations).

9. Expresses emotions and feelings (e.g., identifies emotions and feelings; begins to show concern for others).

10. Develops skills to solve conflicts (child begins to recognize and respond to others' feelings and emotions; uses social skills to express feelings and needs; helps, shares, and cooperates in a group; resolves conflict with peers alone and/or with adult intervention).

11. Respects others and their belongings (e.g., uses polite language to interact; ability to wait for his/her turn to use materials; shares materials with peers; recognizes that others' needs are important).

12. Uses imitation or pretend play to learn new roles and relationships.

Open Ended Questions:

1. Please describe any intervention recommendations that you believe have contributed to social/emotional skill development of preschool-age children.

2. Please feel welcome to provide any additional thoughts, ideas, comments or suggestions.