

The F.I.L.T.E.R. Approach

Social Communication Skills for Students
with Autism Spectrum Disorders

Stephanie D. Sanders, MA, CCC-SLP



Contents

<i>Preface</i>	<i>vii</i>
SECTION I The F.I.L.T.E.R. Approach for Students/Clients	1
1 Introduction	3
2 F.—Facial Clues	27
3 I.—Inappropriate	51
4 L.—Listen	73
5 T.—Target	97
6 E.—End	121
7 R.—Repair	149
SECTION II Answer Key for Therapists	173
8 Answer Key: Introduction	175
9 Answer Key: F.—Facial Clues	201
10 Answer Key: I.—Inappropriate	225
11 Answer Key: L.—Listen	249
12 Answer Key: T.—Target	275
13 Answer Key: E.—End	301
14 Answer Key: R.—Repair	329
<i>Appendix A Which Filter Is It?</i>	<i>357</i>
<i>Appendix B Curriculum Review</i>	<i>359</i>
<i>Appendix C Homework Activities</i>	<i>361</i>
<i>Appendix D Data Collection</i>	<i>375</i>
<i>Appendix E Idioms and Expressions</i>	<i>377</i>

Preface

“That person has no filter” is now a commonly used expression when an individual speaks too bluntly and doesn’t consider whether or not those words will offend someone listening. I had great difficulty in therapy trying to verbally explain this expression and the notion of a “conversation filter” to students with High-Functioning Autism Spectrum Disorders (HFASDs). I overheard other therapists and teachers also making unsuccessful attempts at conveying the “filtering” message to our shared students, as the students continually insulted others. Studies have shown individuals with HFASD to be significantly impaired in abstract reasoning (Solomon, Bauminger, & Rogers, 2011; Minshew, Meyer, & Goldstein, 2002). These older elementary and middle school students had given little consideration to filters in their homes. Needless to say, making the reference to a “conversation filter” located in the brain made no sense to them at all. Having a younger brother diagnosed with Asperger Syndrome many years ago motivated me on a personal level to impact students with social communication needs. I was determined to exhaust every effort in helping these students comprehend and develop a “filter.”

Out of desperation, I searched online for images of everyday filters and even brought small household filters to introduce the *F.I.L.T.E.R.* concept with groups working on social skills. The Introduction to *The F.I.L.T.E.R. Approach* begins by pointing out some of our common filters that often work discreetly in household items. Students/clients are led through discussions regarding the importance of these filters, the benefits of them working smoothly, and the consequences of them working poorly or not at all. The abstract comparison is then made between household filters and a “conversation filter” in the brain. A few specific areas of the social brain, which have been at the center of neurological studies in autism are highlighted (Adolphs, 2009). These areas of the brain have been attributed to playing active roles in an individual’s performance in social situations. Collectively, parts of the brain are acting as a “conversation filter” to help identify cues and determine what we should or shouldn’t say during conversation.

Once the students were able to grasp the idea of a “conversation filter,” the next logical step was to provide a relevant approach for accomplishing this filtering process. *F.I.L.T.E.R.* is therefore explained as a crucial practice during everyday conversation, while it’s also used as an acronym to provide a distinct, memorable approach for improving social communication skills. Visual supports are part of everyone’s communication system; they help all students and make abstract concepts more concrete for a student with autism (Rao & Gagie, 2006). The concept is presented as a “checklist,” with each letter of *F.I.L.T.E.R.* representing a different word (social skill) to be addressed in the subsequent chapters. A systematic approach is taken to teach *F.I.L.T.E.R.* with a variety of activities within each letter of the curriculum. “*F.I.L.T.E.R.-cons*” are used in all chapters to provide simple, visual prompts in addition to the acronym.

Studies have shown individuals with high-functioning autism to have a subtle, but specific pattern of impairments in facial emotion perception (Kennedy & Adolphs, 2012). The *F.—Facial Clues* chapter of *F.I.L.T.E.R.* emphasizes the importance of gaining information regarding how someone feels about the conversation. Obtaining this emotional insight

may take “detective work” at times, but the only hope of acquiring it is by looking for it. Students/clients are led through activities focused on how to recognize *F.—Facial Clues* provided by the eyes, eyebrows, and mouth. Attention is also given in this chapter to the various positive, neutral, or negative feelings that could occur as a result of words spoken in conversation.

Inappropriate is a broad term that could reference behavior, comments, or topics in numerous settings. It can be challenging to truly define this term when it comes to conversational topics for preadolescents and adolescents in general, due to the outside influences of various cultures or family systems. Those with HFASD frequently struggle to keep damaging, inappropriate topics or comments to themselves during daily conversations. Conversational problems are reported in those with autism because they lack the appropriate judgment about how much or little to say (Lord & Schopler, 1989). The *I.—Inappropriate* chapter of *F.I.L.T.E.R.* uses a traffic light prompt on activities to establish clearly defined parameters within topic categories: Inappropriate (Red Light), Use Caution (Yellow Light), or Appropriate (Green Light). Additionally, Honest observations and Sensitive areas are highlighted, as they have potential to quickly become hurtful, Red Light topics/comments.

Conversation requires a back-and-forth process of listening and speaking between individuals. Research has shown that individuals with Autism Spectrum Disorder (ASD) have difficulty managing and reciprocating topics as well as engaging in reciprocal exchanges (Paul, Orlovski, & Marcinko, 2009). The *L.—Listen* chapter of *F.I.L.T.E.R.* provides activities that discriminate between good listening skills to use and poor listening skills to avoid in conversation. Additional nonverbal cues (nodding), verbal responses (related comment/question), and bridging words (cool, that’s interesting) are emphasized. Lessons also stress that in order to actively *L.—Listen*, there are essential skills to be implemented: Looking interested, Taking turns, Taking pauses, and Making appropriate (topic related) comments.

The *Fifth Edition of the Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) states that people with ASD tend to have communication deficits, such as responding inappropriately in conversations, misreading nonverbal interactions, or having difficulty building friendships appropriate to their age (APA, 2013). After briefly addressing the goal of commonly known games involving targets (darts, archery), activities in the *T.—Target* chapter of *F.I.L.T.E.R.* focus on the benefits of scoring points socially by hitting the *Target* (social rules) and potential consequences of missing it. We’re more likely to score social points in conversation if we’re striving to: *Be Kind and Courteous*, *Give Space*, *have Relaxed Responses*, and ask *Simple Questions*. Attention is given to common misses in conversation that can damage our relationships and reputations with others. Students/clients create a personalized *T.—Target*, writing social rules to “aim for” and ignored social rules that create a “miss.”

Children and adolescents with HFASD frequently demonstrate impairments in their ability to initiate, maintain, and end verbal exchanges (Sansosti, Powell-Smith, & Cowan, 2010). The *E.—End* chapter of *F.I.L.T.E.R.* first points out the importance of “start” and “end” times for daily activities. We need to consider the same for our conversations throughout the day and in various settings. Looking and Listening for: *Facial Clues*, *Body gestures*, and *Verbal comments* are crucial to Start and End conversations smoothly. Scenarios lead the students/clients in deciding, “Is it a good time to Start the conversation?” with suggested *Common Greetings* for practice. Once a conversation begins, attention must be placed

on more appropriate endings; otherwise, conversation partners are left feeling confused, awkward, or even trapped in the conversation. Social situations are then presented that ask, “Is it a good time to *End* the conversation?” with suggested *Common Closings* for practice.

Research has suggested that children with ASD recognize the need to *Repair*, but use inappropriate strategies to *Repair* (Volden, 2004). The *R.—Repair* chapter of *F.I.L.T.E.R.* prompts the student/client to identify errors in conversation, and then make an effort to fix the mistakes by using a *Repair* tool. These include: *Apology, Probably Sentences, Ask, and Admit*. As each letter of *F.I.L.T.E.R.* is addressed in prior chapters, the individual’s awareness increases through discussions, scenarios, and practice. Scenarios require application of *Repair* tools in situations with social missteps from the previous chapters. Although *Repair* attempts are best made immediately (in person), this chapter also suggests attempts through current modes of communication within our culture (e-mail, phone call, text).

The F.I.L.T.E.R. Approach is divided into two main sections. The first is intended for Students/Clients, while the second is intended for Therapists.

- Each individual chapter of the Student/Client section provides Previews/Reviews, introduction activities for each letter (social skill), numerous practice activities, scenarios, reflection pages, visual prompt pages, and *F.I.L.T.E.R.* Builders (skits).
- The Therapist’s section provides an introduction/explanation for each letter (social skill) with research/evidence-based support, answer keys, and Supplemental Materials in appendices.
- The Supplemental Materials provide a photo page of various household filters, homework activities, a data collection sheet, and *F.I.L.T.E.R.*- related idioms.

By consistently remembering to use *F.I.L.T.E.R.*, the students/clients make an effort to avoid damaged friendships, issues with family members, and problems with teachers. For individuals with autism, it is unrealistic to expect flawless conversations each and every day, but providing a plan of action is imperative. If we can develop these skills with our preadolescent and adolescent students/clients, then we facilitate more socially appropriate behaviors during the teen years and into adulthood.

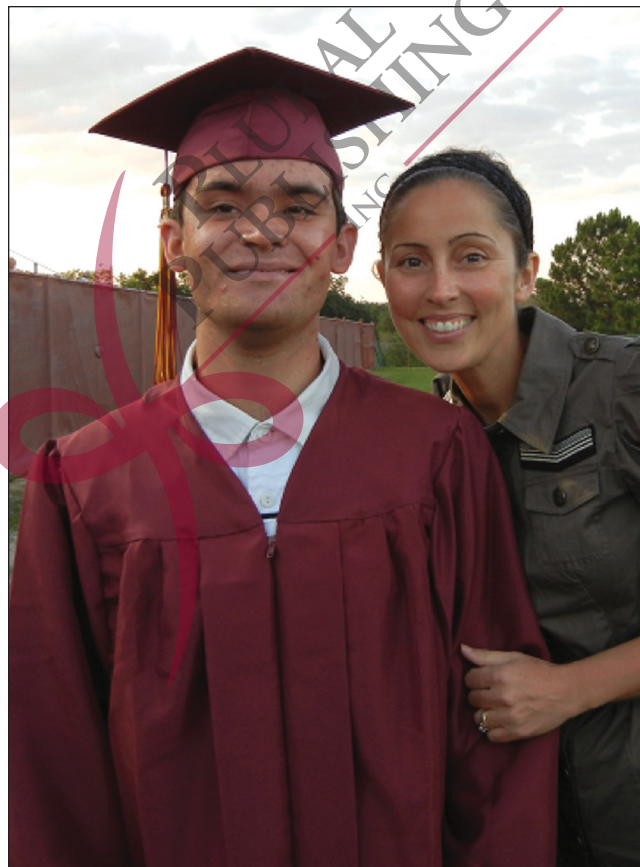
REFERENCES

- Adolphs, R. The social brain: Neural basis of social knowledge. (2009). *Annual Review of Psychology*, 60, 693–716.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.) Arlington, VA: Author.
- Kennedy, D. P., & Adolphs, R. (2012). Perception of emotions from facial expressions in high-functioning adults with autism. *Neuropsychologia*, 50(14), 3313–3319.
- Lord C., & Schopler E. (1989). The role of age at assessment, developmental level, and test in the stability of intelligence scores in young autistic children. *Journal of Autism Developmental Disorders*, 19(4), 483–499.

- Minschew, N. J., Meyer, J., & Goldstein, G. (2002). Abstract reasoning in autism: Dissociation between concept formation and concept identification. *Neuropsychology*, 16(3), 327–334.
- Paul, R., Orlovski, S., & Marcinko, H. (2009, January). Conversational behavior in youth with high-functioning ASD and Asperger Syndrome. *Journal of Autism and Developmental Disorders*, 39(1), 115.
- Rao, S., & Gagie, B. (2006). Learning through seeing and doing: Visual supports for students with autism. *TEACHING Exceptional Children*, 38(6), 26–33.
- Sansosti, F. J., Powell-Smith, K. A., & Cowan, R. J. (2010). *High functioning autism/Asperger Syndrome in schools: Assessment and intervention*. New York, NY: Guilford Press.
- Solomon, M., Bauminger, N., & Rogers, S. J. (2011, January). Abstract reasoning and friendship in high functioning preadolescents with autism spectrum disorders. *Journal of Autism and Developmental Disorders*, 41(1), 32–43.
- Volden, J. (2004). Conversational repair in speakers with autism spectrum disorder. *International Journal of Language and Communication Disorders*, 39(2), 171–189.



*To my little brother Zachary, the inspiration for this book
and my motivation for trying to make a difference.
Keep working hard toward your goals.
Continue proving the negative crowds wrong along the way.
Love you.*



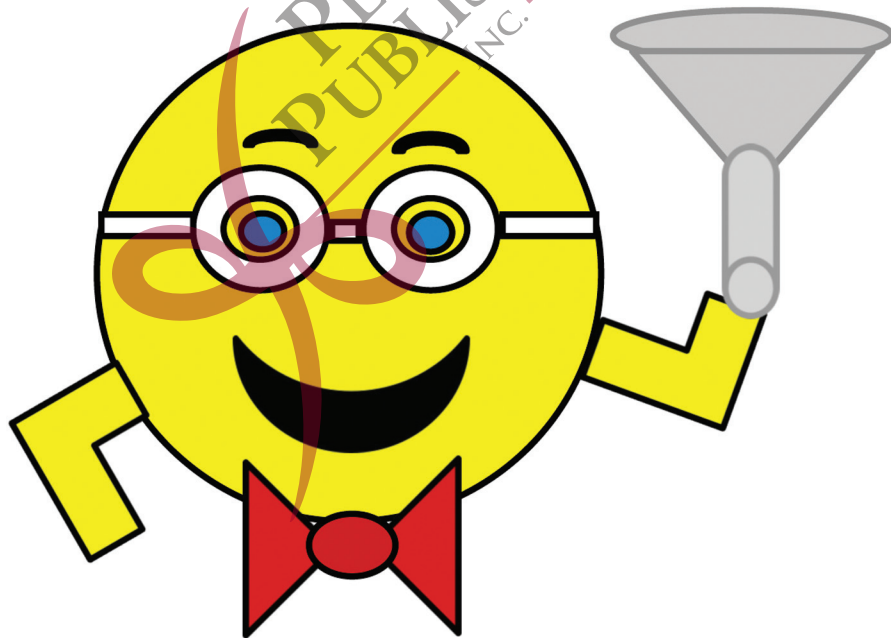
SECTION I

The F.I.L.T.E.R. Approach for Students/Clients



1

Introduction



F.I.L.T.E.R. PREVIEW

1. Name a common filter you've seen around your house.

2. Why do we need filters in certain household items?

3. What is a way we can keep our filters working well in household items?

4. Where are our thoughts and ideas first planned?

5. How do we share those thoughts and ideas with other people?

6. What could go wrong if we aren't carefully planning our thoughts and ideas in conversation?

7. Name one positive thing that could happen if a conversation goes well.

8. Name one negative thing that could happen if a conversation goes poorly.

9. What is a "conversation filter" and where is it located?

10. Explain this expression: "It's not always what you say, but how you say it." Why are both parts of this expression important?

WHAT IS A FILTER?

Choose the best meaning for the word “filter”:

- a. Something used to fill another object.
- b. Something used to remove unwanted or damaging particles.
- c. A person who tells you what you should or shouldn't do.

Word Bank

We use filters in various places each and every day. Some are even around our homes. Can you think of a few based on these clues?

Air conditioning (A/C) filter	Computer filter	Pool filter	Aquarium filter
Water filter	Dryer/lint filter	Coffee filter	Oil filter

1. Many adults need to use a new one of these to make a hot beverage in the morning.

2. If you want to keep cool air running through your home, be sure to check this regularly.

3. Most tanks of tropical and freshwater fish require purchasing one of these.

4. Our cars need to have these changed every 3,000 miles to continue running smoothly.

5. To save money on buying it bottled, you might keep one on your faucet or on the refrigerator door, or you might have a special pitcher.

6. After every load of laundry, it is important to clean this.

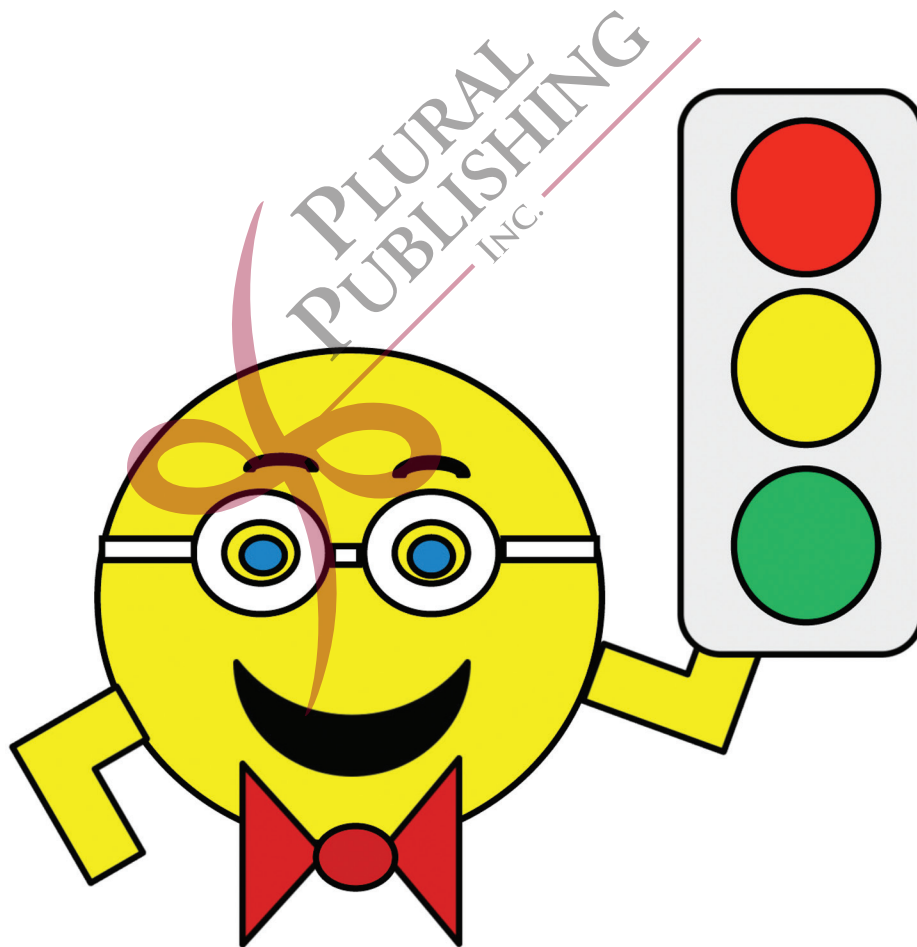
7. If you want to swim in clean water, this has to stay on all the time.

8. We should have one of these to prevent damaging viruses, or we could lose important saved information, files, and photos.



3

I.—Inappropriate



I.—INAPPROPRIATE PREVIEW

1. *TRUE* or *FALSE*: Many people have moments of saying inappropriate things from time to time during conversation.
2. *TRUE* or *FALSE*: Saying inappropriate things to teachers or classmates at school helps relationships and friendships.
3. What could someone be called who says mostly inappropriate things (Red Light) often in conversation?

4. What could someone be called who says mostly appropriate things (Green Light) often in conversation?

5. Give an example of a conversation topic that is appropriate (Green Light) in any social situation.

6. Give an example of a conversation topic that is inappropriate (Red Light) in any social situation.

7. Give an example of a conversation topic that might begin as an appropriate topic, but could become inappropriate (Yellow to Red Light)?

8. How could using appropriate conversation topics help us with our friendships?

9. How could using inappropriate conversation topics cause problems with friendships and relationships?

10. How could using inappropriate conversation topics cause problems in the classroom and with teachers?

TOPICS IN CONVERSATION: THREE CATEGORIES

We have to consider our topics in conversation. We're going to place them into one of three categories or groups:

1. INAPPROPRIATE
2. USE CAUTION
3. APPROPRIATE

We must use *caution* because there are also *appropriate* topics that could easily become *inappropriate*.

Think About It

As it relates to conversation topics:

Give your best definition for the word *appropriate*. _____

Give your best definition for the word *inappropriate*. _____

Give your best definition for the word *caution*. _____

Do most people say something *inappropriate* at one time or another?

YES, of course! We all have moments of saying something *inappropriate* to someone.

There is a **BIG** difference in being *inappropriate* most of the time and just having moments of *inappropriateness* in conversation from time to time.

What Could Happen?

Make a check beside possible results from these listed when using *inappropriate* topics *more* than *appropriate* topics in conversation.

- You receive the best behavior grades in your class.
- You are laughed at by classmates.
- You hurt someone's feelings.
- Your parents become frustrated with you.
- You are invited to birthday parties/celebrations for most classmates.
- You have to see the principal or assistant principal at school.

Our goal is to use *appropriate* topics *more* than *inappropriate* topics in conversation and use *caution* when choosing topics.

- When people use mostly *inappropriate* topics in conversation, they are usually considered: harsh, abrasive, rude, scary, mean, a know-it-all, and even obnoxious.
- When people use mostly *appropriate* topics in conversation, they are usually considered: nice, interesting, cool, funny, friendly, and even enjoyable to be around.

