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Critical Review:

Are social skill interventions an effective means of reducing social deficits in school aged children with fetal alcohol spectrum di

communication) OR (social stories) OR (pragmatics) OR (social skills intervention)).

The search was limited to English articles. No limitations were set on date of publication.

<u>Selection Criteria</u> Papers addressing social skill authors, CFT is an empirically validated program based on the social learning theory (Frankel, 2005 as cited in O\Connor et al., 2006). It has been successfully used as an intervention for children, aged 6-12,

children due to the fact they knew they were receiving treatment. The authors believed that because the children demonstrated a significant increase in their knowledge of appropriate social behaviours, changes can most likely be a result of treatment.

The authors commented on methodological issues HMBKTCHMF SGD DWBKTRHNM NE BGHKCODM VHSG UDOA@K 4<\R below 70. This precludes generalization of findings to a large number of children with prenatal alcohol exposure. They believed further modifications may be necessary to allow for children with a verbal IQ below 70 to participate in the program. The method of participant recruitment also merits discussion. Caregivers voluntarily approached the group affecting the likelihood of a representative sample. The CFT group mean remained significantly different from the normative mean on the SSRS-P. The authors reported that this is likely a function of the structural changes to the brain resulting from alcohol exposure. Although changes in social knowledge were significant, outcome measures may have been unable to account for all skills important to social competence. A most significant result was that teachers noted no change following treatment. These are individuals who interact with these children on a daily basis in a variety of social situations. The fact they did not notice a change following treatment in either group limits the applicability of the program. There was also no mention of minimum attendance requirements for weekly sessions or minimum instructor qualifications. It s unknown how many children attended all intervention sessions. Study findings are, at most, suggestive.

6DHKS; @KDX\$ 3Q@MJDK @MC:\ONMMNQ (2010) further examined the study group EQNL \$GD:\ONMMNQ DS @K. (2006) study and applied additional outcome measures. Again, the study design was a between groups nonrandomized clinical trial (level 1; highest level of evidence). Specifically, this group sought to examine if CFT would lead to decreased hostile attributions by children with documented prenatal alcohol exposure. Group entry and peer provocation scenarios were examined. As mentioned, this paper included the same participants

 $\begin{tabular}{ll} \underline{Variables\ Influencing\ Effectiveness\ of\ Treatment}\\ Participants\ EQNL\ SGD\ : \ONMMNQ\ DS\ @KN\ "(&&)\#\ study\ were further\ examined\ to\ determine\ if\ specific\ variables\ impacted\ response\ to\ tr \end{tabular}$

Conclusion

Social deficits are of primary concern for children with FASD. To date, evidence of intervention targeting such area is, at best, suggestive. As this is a relatively new topic of interest in the literature, these studies may provide a foundation for further research.

Clinical Implications
Pragmatics, in general, is an important area of concern for an SLP