

SSW Reports

Two Helpful Forms
– Characteristics of Young Children - Questionnaire
– EAA SSW Perseveration Finder (new)

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Characteristics of Young Children (CYC)

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The Buffalo Model Questionnaire-Revised (BMQ-R) is a powerful tool in understanding CAPD. It serves as an independent view of the individual by family, teachers and/or others. Therefore, it is ideal for comparing with our test data for validation and new insights. Of course, a questionnaire is subject to pitfalls (e.g., the person filling it out may not understand what is asked, may embellish or minimize issues, knowingly or not etc.). On the other hand they can view the person from the vantage point of those who have known the person well, over a period of time, and not subject to how the person is feeling on the day of the evaluation. Thus, BMQ-R and other case history materials serve as a vital part of an evaluation to help us to “get it right”.

I use the BMQ-R for every person I test, give therapy or counsel. It helps me not only when planning evaluations, but also when interpreting and reporting the results. It is useful when planning therapy and very useful after a round of therapy when determining how the therapy program has impacted the person at school etc.

The Characteristics of Young Children (CYC) Questionnaire

BMQ-R is so useful for all of the people with whom we work, but less so for young children because some of the most important questions involve academic performance for which a young child may have limited exposure or no exposure at all. The CYC was developed to fill that void, but does not replace the BMQ-R. It is a brief questionnaire and is relatively quick to fill out.

Soon after I began my private practice in 2004, there were a number of referrals for children 2½ up to 5 years of age for whom we lacked important information that could be useful to us before, during and after the evaluation. In time it became obvious that there were others for whom this information would be helpful. E.g., Today I reviewed 2 folders that were so much alike. Both were for 7 year olds and both children were held back in school before kindergarten in one case and first grade in the other. Consequently, there was sparse information for both youngsters, so we will have the families fill out the CYC form. The initial version had about 15 questions and now we have 20 that provide 25 signs of the 4 Buffalo Model Categories. It was just revised again (in 2015, see Figure 1).

Name _____ Age _____ Date _____

***Please put an 'X' in the box for each question that applies**

***If item has 2 parentheses (i.e., #s 2, 10 and 20) please circle those which apply**

- 1. APD or presumed APD in family yes no ? c
- 2. History of otitis media (ear fluid/infections?) (tubes?) yes no ? c
- 3. Allergies yes no ? c
- 4. Slow to learn to talk yes no ? d
- 5. Poor articulation yes no ? d
- 6. Limited vocabulary yes no ? d
- 7. 'Marches to a different drummer' yes no ? d+t
- 8. Poor language (receptive?) or (expressive?) yes no ? d/t
- 9. Not learn nursery rhymes yes no ? d+t
- 10. Difficulty with finger-play (e.g., itsy bitsy spider) yes no ? i+o
- 11. Bothered by noise yes no ? n
- 12. Makes own sounds (e.g., when ignition is turned on) yes no ? n
- 13. May be a noisy child when in noisy conditions yes no ? n
- 14. Hyperactive/wild when several children present yes no ? n
- 15. Easily distracted by noise yes no ? n
- 16. Forgetful yes no ? m
- 17. Does not remember simple directions yes no ? m
- 18. Messy, disorganized yes no ? o
- 19. Difficulty locating source of sounds yes no ? l
- 20. Has/had (sensory-integration?) or (speech?) therapy yes no ? i/d

Please expand or explain on any of these _____

What other characteristics or events concerned you about the child's AP abilities?

Completed by: _____ Relation to Child: _____

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D	N	M	T	TFM	I	O	C	L	Total

Figure 1 (above). CYC Form: Identification information, instructions, 20 items with their associated categories, comments, informant information and combined categorical results.

This questionnaire lists CAPD-related issues and relates them to the categories of the Buffalo Model. This instrument is so helpful because all of the concerns behaviors or situations can be observed in young children. In the CYC form 'C' refers to CAP in general, not primarily associated with one category (3 items). 'D' refers to auditory Decoding (7 items). The 'T' is a Tolerance Fading Memory (TFM) sign in general (3 items). 'N' refers Speech in Noise which is part of the TFM category (5 items). An 'M' stands for Memory that is part of the TFM category (2 items). The 'O' items represent the Organization category (2 items), and there are also 2 'I' items for the Integration category. Finally, there is the 'L' which refers to localization of sound. Of these categories and sub-categories localization is *probably* most closely related with Speech in Noise, but at this point stands alone until we understand it better and see how its functions relate to CAP. Of course, TFM represents the combined scores of the Tolerance Fading Memory category as shown by the dashes on the CYC form. The total number of category indicators is 25.

More About CYC

Some of the characteristics listed in the CYC form were a result of observations over the years of working with children who had CAPD. What was more difficult was to assign probable categories to them. For me it is not a question if these are characteristics of young children who have this problem, but more precisely what do these signs tell us (what category does it represent). Items 7 and 10 are the ones that I am least sure of.

"Marches to a different drummer" is usually a more extreme CAPD and from what I read may be kids who will find themselves alienated and breaking rules/laws (perhaps because initially they don't understand what is asked/expected.) Decoding is an important part of it, but poor memory and sequencing could be important factors. Of course, Integration would make everything worse so I debated on how to categorize it. Perhaps CAP in general would be better, but for now I feel comfortable with DEC+TFM. "Difficulty with finger-play (e.g., itsy bitsy spider)" involves multitasking/executive function, left and right coordination and I suspect ORG. Again it could involve other aspects. Like all other auditory related tasks involves DEC, but I did not include that because it is often spoken slowly and the child could even skip saying the words (or just mumble along) as long as they do the motor aspects (at least at first). My thinking regarding ORG is in large measure because motor planning (premotor area) sits within the reversal strip. I am sure that both items 7 and 10 are fairly common in some of the more severe cases. When I revise CYC again one or both of those items may become Cs.

Related Thoughts

You might have seen Jay Lucker's recent article, in [Audiology Today](#), to erase the false notion of not being able to test children for CAPD before 7 years of age. It is important to find the children as soon as possible and then provide, or get them, the help that they need. The younger the children are the more plastic their brains are to learn or change. It is harmful and unreasonable to have a child to wait because some think they can't be tested before 7. With information from the BMQ-R, CYC and the case history form I can usually make a working hypothesis with about 2 or older, so at least training can get started early.

Unfortunately, the SSW just goes down to 5 years. I have tried to develop tests for younger kids but for one reason or another never got to finish them. We do have a Phonemic Synthesis Picture (PS-P) test that is on the Central Test Battery-CD with the SSW. It goes down to preschool level. Unfortunately, I have not re-normed it because now kindergartens and even younger children are being introduced to phonics, so the present norms are not too sensitive. Norming it would be a nice project because it is a good test and provides information about both DEC and TFM problems.

Of course, many of you are familiar with Auditory Skills Assessment (ASA) that Donna Geffner and Ronald Goldman developed to test children from 3-6 years. Perhaps you know of other tests, but if not I am very sure that they will be coming along soon because of the great need for helping young children.

Those of you who use the Buffalo Model or at least the Buffalo Model Questionnaire (BMQ-R that I and Tom Zalewski developed); you know that it also concerns quite a few activities in which school children participate. Therefore, these questions are not as helpful for early school children and preschoolers or younger. I think you will find CYC most helpful.

The Educational Audiology Association Perseveration Finder

What a strange name for a form. I attended an EAA conference a number of years ago and an audiologist handed me a sheet and told me that I might find this helpful. When I looked at it I thought it was GREAT! She told me that she had such a hard time checking potential Perseverations on the SSW test that she made an alphabetical list of all the words on the test and in what items they appeared. In this way the response of a word that could be a Perseveration (a word or non-word that was given before) could be quickly checked.

Wow, what a labor saving system! How many times have we wondered if a response was a (P) or not and then had to go over at least the previous 20 items to see if it was given before. I asked for her name and she asked why. I said I wanted to give her credit for this great form when I share it in SSW Reports, but instead she said it was really 'nothing'. It was just a list of the words. I said it will be such a great help to so many of us and that she deserved the credit, but she refused to give me her name. I don't like taking credit for someone else's fine work so I named it after the wonderful organization whose conference we were attending.

It is interesting to note that Perseverations are among the most frequent Qualifiers on the SSW (and Phonemic Synthesis) test. Often those prone to (P) are noted to do so in everyday situations as well. In fact, a few months ago it was interesting that I made a (P).

Educational Audiology Association Perseveration Finder

SSW Word and Item Number			
Aid -18	Day -3,13,28,29,32	Lamp -29	shore-8
air-a,10	dog-14,38	land-12,20	side-2,8
ash-23	door-15,30	law-2	skin-38
	down-1	light-d,3,7,24,29	sky-36
Back -15	drug-33	line-36	snow-17
ball-9,17,35		lunch-3	soap-27
band-18	End -32		spread-6
base-9		Mail -10	stair-c
bat-26	First -18,28	man-37	stairs-1
beach-34	fish-36	meal-d,5	starch-27
bean-12,40	flakes-27	meat-9	stick-24
bed-6	flash-d,7	milk-35,37	store-33
bell-16,30	flood-7	mush-6	street-39
bird-19,31	fly-11		string-40
birth-28	foot-17	Nest -31	suit-25
black-4,10,19	for-37	net-21,36	sun-13
blue-19	fruit-22	night-24	sweet-20
board-4,10		north-c	
book-33	Gate -7	Oat -d,5	Time -3
boy-b,16,26	give-37	out-2,8	tin-23
bread-b,5	green-12,40		tooth-21
break-29	ground-15,26	Paint -a	town-1
brush-21		place-28	tray-23
bull-38	Hair -21	plane-a	tub-4
	hand-35	play-15,26	
Cage -31	home-12		Up -1
cake-22	horse-39	Race -39	
can-23	house-11,14,40	room-6	Walls -14
car-39			wash-4
case-25	Ice -20	Sauce -9	way-c
chain-25	in-2	saw-18	week-32
church-16		school-16	west-c
corn-5,27	Jay -19	sea-8	wet-a
cow-b,30	juice-22	shake-35	white-b,14,17
craft-34		sheep-38	wood-11,34
cream-20	Key -25	shelf-33	work-11,32,34
crow's-31	knob-30	shine-13	
cup-22		shoe-13	Yard -24

Rev. 2-15-15

If you think that a person repeated a correct or incorrect word from a previous item you can quickly locate the Perseveration (P) from this chart. A '(P)' is usually within the previous 5 or 10 items, but in some cases can be as many as 20 items (including the 4 training items). A nonsense word (e.g., 'cham' or 'ulk') could be anywhere on the test, even more than 20 items and considered a (P).

A Partial Disclosure: *I have a feeling that I have presented this information in SSW Reports in the last several years but cannot find it. If you have any question about Perseverations you might read this again.*

Perseveration is a Qualifier

What is a Qualifier? The SSW has numerous indicators that help to assure that you have made the right categorical diagnosis. These signs are called Qualifiers and they generally show how a person is compensating for their CAP deficit. So if the number of Qualifiers exceeds normal limits we have an indication of what the person is doing to assist with the listening problem. For example, a delayed response (when the item is correct) is designated by an X circled (X) and is associated with a Decoding problem. Therefore, given further time a person has a much better chance of figuring out the word and getting it right. If the person delays and then responds with the correct word it is counted as a delay. We then count the delays and if significant it suggests a Decoding-type problem. We can also explain a quick response, which is a sign of another category - a Tolerance-Fading Memory (TFM) problem. It is generally associated with a short-term memory problem and/or impulsivity.

What is a Perseveration?

One of the 13 Qualifiers of the SSW is Perseveration. When a person reuses a word from a previous item it is an SSW Perseveration. It is most impressive if it is a recent word especially from the previous the 5 or 10 items, but if the person says a strange or a nonsense word (e.g., 'nam/blah') and then again any time during the rest of the test, then that is a perseveration. It is not a Perseveration if it is within the same item (that is known as the 'available word' and is a result of something very different).

Using the EAA Perseveration Finder

On SSW items 3 and 4 if the person says 'day light lunch **time**' that is correct and then on the next item 'wash **time** black board' (i.e., saying *time* for *tub* or any other word), then it is easy to see that it was a Perseveration from the previous item. But what about on #23 the person says 'ash tray **saw** can' (*saw* for *tin*) was that possibly a Perseveration?? After the test is completed take out your EAA Perseveration Finder. Quickly look up the word 'saw' in the alphabetical listing and you will see that 'saw' was in item #18 (5 items earlier), so that would be a Perseveration. The kind EAA member who thought this up will save all of us who use the test a lot of time and accuracy. Thanks to her!

When Perseveration is significant for a person's age it is a Decoding indicator. It usually signifies that the person is reaching out for something they know, something easy that they have said before. Interestingly, it is different than a common perseveration that is noted with a patient with dementia or some with aphasia. In those cases the person does not pick up on what they said (or asked) before. That would be a memory laps that they repeat many times.

Do run off a new copy of the Perseveration Finder that is simpler to use than the previous one.