UNDERSTANDING YOUR DIAGNOSIS

Social Communication Disorder

Also called Social (Pragmatic) Communication Disorder

Your child has the words but struggles with how to use them with people, and those social skills can be taught.

HOW COMMON	OFTEN NOTICED	NOT AUTISM	TREATABLE
About 1 to 2 in 100 kids	From ages 4 to 5 onward	No repetitive behaviors	Yes - skills can be taught

What this is

- This means your child builds sentences fine but struggles with the social side of talking: greeting, sharing, and taking turns.
- The words and the grammar are usually fine. What is hard is knowing what to say, to whom, when, and how much of it.
- It is not rudeness and not attitude. Your child is not choosing to be blunt, off topic, or oddly formal with people.
- It is not the same as **autism**. Autism also brings repeated behaviors and narrow, intense interests. Here those are absent.

What it can look and feel like

- Greetings, small talk, and goodbyes get skipped. Your child dives straight into whatever they want with no lead in.
- Turn taking breaks down. Your child talks over the listener, jumps topic with no warning, or misses that you were still going.
- Talking is used to ask for things and to label things, but rarely to share a feeling or simply to connect with someone.
- The same voice and style get used with a teacher, a toddler, and a best friend. Your child does not shift for the audience.
- Jokes, sarcasm, hints, and sayings like it is raining cats and dogs get taken word for word, so mix-ups keep happening.
- Stories leave out what you need to follow them. Names go missing, he and she float around, and your child assumes you know.
- Friendships are hard to start and harder to keep. Your child may be teased or left out and have no idea what went wrong.

What is happening in your brain and body

- The brain areas that help us read other people, up front and along the sides, work less strongly here than in most children.
- Working out what another person knows or wants is a skill, not a choice. In your child that particular skill grows slowly.
- Holding on to context is hard, so your child takes the plain meaning of a sentence and misses what the speaker really meant.
- Planning and switching gears are stretched too, which makes it hard to hold back an off topic thought mid conversation.
- Social skill runs on a wide spread across all people. Your child sits at one end of a range that every one of us sits on.

What can make it more likely

- It runs in families. Relatives often have autism, a language disorder, or a quiet history of finding people hard work.
- Many genes each add a small amount. There is no single gene to test for, and no parenting choice of yours brought this on.
- Being born very early, alcohol exposure before birth, and some genetic syndromes all raise the chance of this showing up.
- A head injury or a stroke can cause the same trouble later in life, even when grammar and vocabulary stay perfectly intact.

What to expect

- Skills grow with teaching, but the social side stays harder than it is for others. Plan on support through the school years.
- Some children later meet the fuller picture of **autism** as social demands rise. Ask for a fresh look at least once a year.
- Things often get loudest in middle school, when friendship rules turn subtle and adults stop running the playground.
- Many adults do well by choosing work and friends that suit how they communicate, and by learning the rules out loud.

What helps

Treatment works. Most people get better.

Talking therapies

- **Speech-language therapy** is the main treatment. It works on turn taking, staying on topic, and fixing a misunderstanding.
- Rules that other children soak up without noticing get taught out loud here, then practiced until they run on their own.
- Video of your child talking, watched together afterward, shows what went sideways in a way that being told never does.
- **PEERS** is a **14 to 16 week** program for teens. You attend as well and coach the same skills at home between sessions.
- **Talk therapy** treats the worry and low mood that pile up, and treats social misses as skills to learn, not as a defect.

Medicines

- No medicine treats social communication itself. Direct teaching and real practice are what reach the core difficulty.
- If your child also has **ADHD**, stimulant medicine helps them pause and listen, so each social lesson lands much better.
- If fear of people blocks the practice, **antidepressants** plus therapy can help. Dosing is worked out with your prescriber.
- Get hearing and vision checked. Missing what people say is often mistaken for not understanding what people meant.
- Skip supplements and computer brain training sold for social skills. Real people in real settings are what teaches this.

Everyday things that help

- Ask the school in writing for an evaluation. Social communication goals can then go into an **IEP** or a **504 plan**.
- Insist those goals get practiced in the classroom and at lunch, not only in a quiet therapy room down the hall.
- Set up short, structured playdates built around one shared activity. Two children and a clear plan beat a crowded party.
- Coach before and talk it over after. Name one thing to try going in, then review what worked on the ride home.
- Look for lunch clubs, drama, scouts, or a group built on your child's interests. Repeat practice with the same kids sticks.

Get help right away if

- Your child talks about dying or hurting themselves. Call or text **988**, or go to the nearest emergency room.
- Bullying, refusing to go to school, or hopeless talk about having no friends. Call your care team this week.
- Your child loses language or social skills they clearly already had. Get a medical check right away.

Questions to ask your care team

- *Is this autism or not, and what exactly did you look at to tell them apart?*
- *Was my child's hearing tested, and were vocabulary and grammar tested too?*
- *Where will the therapy happen, and will it include real classmates?*
- *How often should we recheck whether this is still the right diagnosis?*

Where this information comes from

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National Institute on Deafness and Other Communication Disorders. (n.d.). *Autism spectrum disorder: Communication problems in children*. U.S. Department of Health and Human Services. https://www.nidcd.nih.gov/health/autism-spectrum-disorder-communication-problems-children

NOTE

Sources are listed in APA 7th edition style. This handout is general health information, not medical advice, and it does not replace talking with your own doctor, therapist, or prescriber. Medicine choices and doses are decided with your prescriber. If you are in danger or thinking about hurting yourself, call or text 988 in the United States, or go to your nearest emergency room.