

The impact of Attention Autism on early social communication skills

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Executive summary

It has been documented that within the field of autism education, there frequently exists a dearth of strategies pertaining specifically to the development of early social communication skills (Chang et al, 2016). This includes joint attention, gestures and play skills; areas which themselves present an intrinsically complex and challenging area of development for people with autism. Joint attention has been further identified as a key predictor for the trajectory of language attainment in later years (Murza et al, 2016); and therefore, is a priority for therapeutic input.

Attention Autism is a therapeutic intervention designed by Speech and Language Therapist Gina Davies, aimed at promoting fundamental social communication skills; starting at Stage 1 with joint attention. This case study will investigate the outcomes of Attention Autism groups (Stage 1) for one pupil and aim to identify ways in which this input can be best utilised across the organisation.

Introduction

This case study focuses on an early learner with significant sensory and communication needs. At the time of input, the pupil did not have a consistent or independent expressive communication method and found it challenging to follow simple instructions in context. He was in Key Stage 1 and working towards early developing communication skills such as responding to his name, learning to copy key Makaton signs for requesting and matching identical objects. He had variable success with these targets, often requiring extensions on the time needed to achieve these.

It was identified that the most significant barrier to his academic attainment was his attention; although the pupil had been observed to engage in joint attention at times, it was inconsistent and highly dependent on his own motivation.

Often he would be supported to attend to learning activities using partial physical prompting, such as his tutor guiding his hands to support him to complete tasks. In this way he was highly dependent on support from an adult to engage in his activities, which hindered both his independence and his progress.

Method

The pupil was included in a weekly Attention Autism Stage 1 group, which at the time took place within his classroom. This was not identified as an appropriate environment for the group due to a multitude of sensory distractions in this room, but was necessary owing to the lack of external space available for therapy at this time. In order to promote the most positive learning environment for students at this level, the group should ideally be held in a low stimulus environment. This denotes a room with natural or low light, minimal background noise and few visible items such as posters or displays.

Attention Autism Stage 1 involves a group of pupils sat on chairs or the floor. The leader of the group introduces the group with a hello song, and then moves on to 'bucket time'. This involves the leader bringing visually or aurally exciting toys from the bucket one by one, and playing with them in front of the pupils. The pupils are not permitted to touch the toys, and are expected to engage in the group solely by watching the leader play with the toys. The leader presents the toys as so stimulating that the pupils are motivated to watch without requiring external prompting or reinforcement. In this way, the leader is tasked with providing an 'irresistible invitation to learn'. The leader will bring out between 3-6 toys, depending on the motivation of the pupils. When bucket time has finished, the session is drawn to a close with a goodbye song. The entirety of the session is represented on a visual timetable and retains the same structure each time it is delivered, to aid continuity and predictability.

Results

Initially, the pupil would attend the group hosted in his classroom. Though his weekly attendance to the groups was consistent, his actual progress was impeded by various environmental distractions. He had difficulty engaging in the group when his attention had been prior recruited to sensory stimuli elsewhere. Examples of such were; stimming with items found on the floor, orienting to un-associated sounds in the classroom, and so on. This was documented in his case notes on most weeks.

During this period Occupational Therapy trialled ear defenders with Ashley, to great effect. It was evident on observation of

the pupil that these supported his sensory regulation, better enabling him to access the groups. At a similar time, his group moved from the busy classroom to a dedicated low stimulus environment. With external distractions minimised, he was far better able to access the content of the group.

Initially his attention to items was fleeting, and when motivated he would bolt from his seat and attempt to access the items. This is prohibited as it alters the balance of control from adult directed, to self-directed for the pupils. Gradually he learnt that he could not be in control of the toys, and began to attend more consistently to them as they were presented by the adult. Over the weeks that ensued his sustained attention to items built steadily, until he would engage for the entirety of group including the hello and goodbye songs. He also began to show physical indications that he was anticipating events in group. For example; when the leader would build anticipation with "Ready... Steady... Go!" he would lean forward in his seat while maintaining attention to the object, often accompanied with a smile. He became a model student within group, exemplifying to his peers the expectation of students in this session. He has now moved on to Attention Autism Stage 2, and is increasing the duration and quality of his sustained attention to adult directed activities.

Ashley's improved joint attention has better enabled his access to learning. He is working on developing his social communication skills further, both in structured games with adults and developing his play skills. His language skills have improved in terms of his receptive understanding and his expressive language (used currently only to request), as well as his access to activities throughout the day.

References

Chang, Y., Shire, S., Shih, W., Gelfand, C. and Kasari, C. (2016). Preschool Deployment of Evidence-Based Social Communication Intervention: JASPER in the Classroom. *Journal of Autism and Developmental Disorders*: 46 (6): 2211-2223.

Murza, K., Schwartz, J., Hahs-Vaughn, D. and Nye, C. (2016). Joint attention interventions for children with autism spectrum disorder: a systematic review and meta-analysis. *International Journal of Language & Communication Disorders*: 51 (3): 236-251.

Discussion

Attention Autism groups have supported the pupil's development of social communication skills which, as aforementioned, have been identified a pre-requisite for optimum communication attainment. However, it must be acknowledged that this would likely not have been feasible had his sensory needs not been met. The clearest precipitating factor in his improvement was the move from high to low stimulus environment, and the prescribed use of his ear defenders. Additional to this, his class team were concurrently dedicated in supporting him to improve his social communication through classroom activities.

If taking this case study as an example of best practice, for 'Attention Autism' to reap rewards for pupils it can be surmised that three core ideals must be adhered to:

1. the student must access the group at the appropriate level as denoted by their current social communication skills
2. the student must access group in an appropriate sensory environment. This indicates a low stimuli room and any additional accessories the student may require; chewies, ear defenders, wobble cushions, heat packs, and so on
3. the student must be supported by their class team to continue developing their social communication skills in a complementary manner outside of group