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Play is FUNdamental: The Importance of Play for Social Emotional Development

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- [Amy] And at this time, it is a pleasure to introduce Dr. Lisa Audet this afternoon, who is presenting part three of her Play is FUNdamental series. She'll be covering The Importance of Play for Social Emotional Development. Dr. Lisa Audet has been on faculty and Speech Pathology and Audiology at Kent State University since 2000. She specializes in early childhood language development and disorders, low incidence disorders, autism, augmentative communication, and assistive technology. So welcome back, Lisa. It's great to have you with us today. And you can go ahead and turn on your mic.

- [Lisa] Good afternoon, everybody. I am delighted to be here presenting this third part of this series. I'm hoping that many of you have been here for the first two parts, and today we're going to talk about the importance of play to increasing and enhancing the social emotional development of children, children with communication impairments, developmental delays, autism, and this is an aspect that is frequently overlooked in the work that we do, that when we are actively engaged in play and enhancing the play skills of those who have developmental delays and communication impairments, that we're doing much more than just working on our language goals, but that we're increasing their ability to be successful and to be emotionally healthy.

My disclosure is that I am receiving an honorarium for this presentation. I am the Director of the Autism Initiative for Research Education and Outreach at Kent State, and I own a private practice. But there are no relevant relationships, I am not making any money from the content that I am presenting and all cases use pseudonyms to protect the identity of the clients or the individual. And this is of course presented by SpeechPath.com. So what I hope that you'll learn today are three important social behaviors that children develop when they engage in play, three important cognitive behaviors that they develop during play, and three therapeutic behaviors that you can

incorporate to enhance learning, executive function, and self-regulatory mutual regulatory behaviors. So, and that's really the focus, is a kind of an attitude and a philosophy for all of you to begin to think about as you engage with individuals who have developmental disabilities, regardless of their age, or with young children who are on the autism spectrum, who are still in the developmental process. So we'll have a little introduction, and then talk about different skills needed for success, adopting this mindset, and I use something called Habits of the Mind, that I hope will be new for you, and give you a framework for thinking about the work you do, and how you integrate play, some strategies for you to adopt, some examples, and then I'll be taking questions. And this hour will certainly go by quickly.

So for my introduction, I'm gonna talk about a little five-year-old with autism, high functioning, so probably AUT ASD 1, using the new classification system Regina. So Regina had a lot of sensory defensiveness problems, she had problems with self regulation, so meltdowns, and managing her own emotional state, as well as the emotional state of others, like regulating herself as others would be happy or sad, how she would manage herself in those contexts.

But she wanted friends. And she was in a preschool classroom in our CDC program, which is a preschool on the Kent State campus. It's a general ed kind of preschool, and she was integrated with all of the children in that preschool program. And her teacher noticed that she was trying to engage with other children, but she was being unsuccessful and she would have meltdowns. So her teacher began to comment to the peers so that they would notice her attempts, and she also did a lot of pre-teaching with Regina to kind of, I guess, prime her on how to enter a play interaction. And she did a lot of scaffolding and when meltdowns would occur or breakdown in a play would occur, she would sit down with Regina and the one or two other children that she was playing with, and talk about what they could do differently next time and how people were feeling, and so she did a lot of that kind of social emotional work, not just

with Regina, but with her peers as well. So keeping in mind that Regina had the sensory difficulties, it was really striking that one day she was on the playground with some of her girlfriends, and the girls all wanted to play in the sandbox. And they started covering their legs with sand. Regina's relationship was... Relationships with her peers were such that, at this point in time, she could kind of override her sensory defensiveness, and she sat down in the sandbox with their peers and started to put sand on her legs. So the trust and safety that she felt with her peers, and the support that she gained, allowed her to not focus so much on the sensory aspects of the activity, but on the social aspects of the activity.

And that situation really spoke to me of the strength that comes when we help kids to process play, and we help them to process their social interactions. The teacher could have handled Regina's attempts for bids, with her peers by saying things like, "Just give it to her." To the peers. Which would have set up a very different dynamic. Or to step in and say, "Regina, that's not yours. Go do something else." But instead, this teacher kind of brought the kids together and said to the peers, "Look, Regina is sad because she wants that toy. "What could we do?" Or to say to Regina, "Look at your friends, they're asking you to come and play. "What can you do?" So, and all those kinds of conversations that really put the focus of the social interaction on the children versus just managing the situation.

So we'll talk more about that. So Costa and Kallich 2009 published "Habits of the Mind." And I've adapted these in my work with kids who have autism, and I feel that they're really, they create for me a philosophy for what I do and why I do, that's really grounded, has like other roots that come from social pragmatic theory, humanistic theory, and developmental theory. So Habits of the Mind are sets of skills that we can adopt that influence positive interactions. They originally developed this to support preschool children and becoming lifelong learners. So it wasn't originally written for children with communication impairments, individuals with developmental disabilities,

or anything like that, but the content really aligns with this fundamental skills we want to give to individuals with communication impairments, developmental disabilities, autism, so that they learn how to manage themselves, their own emotional state, and begin to develop executive functions. The research on executive functioning really points to the fact that many people with autism, have significant differences in their executive functioning ability, and we can just chalk that up to, oh, well they have autism, so they're gonna have executive functioning problems.

Or we can say, well, maybe I have a role here in supporting the development of executive functions. So what can I do as a therapist that not only increases social communication, receptive expressive language, but also supports the development of executive functioning in individuals who have different kinds of delays? So this is how it aligns with ASD. What we know is that kids with... People with ASD may have problems with active engagement with others. They might isolate or end up with conflicts as they try to engage or misinterpretations. They have problems with lifelong learning, developing hobbies that are productive, engaging in activities that are productive for them.

And not just being bored or focused on eating or restrictive repetitive behaviors, which goes along with the core features of autism. So I thought the Habits of the Mind really aligned with the core deficits of autism and could inform my thinking. And I wanna share that with you. So the Habits of the Mind, the first one, well, I'll list them and then we'll talk about them specifically, but they're learning and social skills, and one of them is persisting. The ability to stay with something until it's done, which correlates with managing impulsivity and not just giving up or reacting, which then falls into listening, paying attention, being a good observer, being able to process somebody else's emotional state. And then a critical one in the area of autism, thinking flexibly. Thinking of alternative ways for handling something or using a particular object. The four other Habits of the Mind include, thinking about our own thinking, which is really a

metacognitive metalinguistic task, and how do we learn that? How do we learn to think about our thinking? Well, we observe other people saying, "Well, let me think. "If I do it this way, I don't think it's gonna work. "So I'm gonna try this instead." We hear other people talking about what's going on in their minds. And that's important. Striving for accuracy and precision, goes along with persistence. It has to do with looking at what you've done and making corrections. And I'm sure many of you know individuals who may be high functioning ASD 1, who they get it done, and they turn it in, and they don't wanna go back and look at it again. And so this is an important skill for us to work with them on, and then questioning and posing problems.

My students laugh because when I'm working with my clients, they'll get stuck with something like trying to open a container, or make something fit into a hole, or accomplish any kind of task, and instead of jumping in, I'll just say, "It's a problem. "I don't know what we're gonna do, but this is a problem. "We got to think." So just that one line, is an important indication that I'm using Habits of the Mind and that I'm giving us a space in our clinical work to engage in that thinking about thinking, and to persist, and to use expressive language for a real reason, to solve a problem jointly. Then applying past knowledge to new situations, which is a very Piagetian idea of assimilation and accommodation.

Additional Habits of the Mind, thinking and communicating with clarity and precision, so as we work with individuals with their AAC systems or their expressive language, when we pause and say, "It's a problem, "I don't know what we're going to do," well, then, it gives them an opportunity to use their language, the language that they have, to engage to solve that problem. Gathering data through all of our senses. So paying attention to what we see, what we hear, what we feel, what we touch, being imaginative, and I have some examples of how we can really negate the imagination of people with autism, children with autism, and in doing so, we really squelch that idea of wonderment and awe of the sense of, this is cool, I'm having fun. I enjoy this. I like

playing with you. So these are some of the ideas that we wanna think about because they will allow that joy and all of that allows people to take reasonable risks and not be afraid, to laugh together, to work together interdependently, and then just to be engaged, that continuous learning. So that the tendency to go back into those restrictive repetitive acts is not likely to occur. So let's take those Habits of the Mind that I just went over, and think about them as they pertain to three different aspects of life. One is the personal realm, so having to do with me and how I feel, the other is the cognitive realm, having to do with how I think, and my internal process, and then the third is the social realm, how I engage with others. And so you see that there's an intersection between all of these, I've kind of artificially separated them so we can talk about them, but there is a great deal of overlap. Okay, so for the personal realm, a person's own identity and self esteem. We want in our, and again, I'm talking about your philosophy as you would engage with people who have autism, children with autism, people with developmental delays.

We want our clients to be able to challenge themselves. We want to set up situations that are going to be highly motivating, but are going to be scaffolding up just a bit, so that it's something novel and they're doing something that they haven't done before, where they have to create an idea, test it out, see it that it doesn't work, see that it works, and hear us narrating that, talking about that. And in that, they build confidence. Confidence that, I can do this. So that learned helplessness or that avoidant behavior begins to be diminished. An example, a quick example of this before we talk about the habits, would be a young child, a client I have who's about four years of age and he wasn't stacking blocks. And that was something that we were wanting to work on was, him being able to use two hands together to stack his blocks. And so we started out with larger blocks that could sit on top of each other, and we started out by his mom modeling three blocks up, and then she would knock them down, and then he, she would stack them up again, and he would then would wanna knock them down, and as he knocked them down, there was, like, oh, that was funny, and that's so cool, and

they fell, and lots of good language, and then she put one block out and she put another block out, and then the third block was just sitting there and he put it on top. So through that scaffolding, he began to see, get a schema, but then kind of test out his own idea of putting the block on, and there were times where we then moved to blocks that had the little nubs that you have to match them, and through his success with the flat blocks, he was able to really have his eyes work with his hands as he struggled to get the parts to fit together. Like the big duplo blocks are what he used. So he was doing that with a partner, and that partner was scaffolding up, and when the blocks were together or the blocks fell, it wasn't so much, good job.

It was, wow, this is tall. There was this sense of awe that was being communicated by the adult. Oh, oh, they fell. We gotta put them together again. Versus, good job, knock 'em over, good job, stack 'em up, good job, which is void of any sense of awe that children typically would have, and that sense of awe is what we rely on to feel good about ourselves, to have a good self esteem, to have a sense of accomplishment. So some of the habits that we can adopt as we're working with children that help them to develop a better self esteem, identity, concept of somebody who is competent to do something and doesn't have to just avoid, is encouraging our clients to persist.

So the mom scaffolded, she put two, he had the third, and he struggled to get the third on the top, but she didn't jump in to do it. She just said, "Oh, you're working hard. "Look, it's on top. Almost there. "You got it, you got it. It's on top." So there was a sense of persis... He persisted, he would become more accurate in what he was doing, and he would then, he created the sculpture. He created three blocks on top of each other, and in doing so, he was taking a, what I talked about last time as a child sized problem, he was engaged in a child sized problem and together, they found joy in what they were doing. So there's a lot of tasks that we end up doing in our therapy, or we see people engaging in therapeutic activities with children, that's really void of any humor, or awe or enjoyment. It's kind of like, get your 10 drills in, good job, here's a

gummy bear. That doesn't really do much to build up a sense of self-worth. I'll share a quick example here, a little boy back at that preschool, but he was in the toddler room. And they had a mat on the... Paper on the table and they had bingo markers. And this little boy was going to town with his bingo marker, making all kinds of marks on the paper. He had autism, everybody knew he has autism. All the other children were typically developing, so we thought, but he had a label, and when one of the student workers came by the table, he put up his bingo marker, and he looked at her with the biggest smile on his face. And her response to him was, "Put the marker down." Now, this little boy with autism was demonstrating three combined means in his play. So he was looking at her, he was smiling, and he was showing, showing the marker. He had joy. Her response really eliminated that joy. There were so many other ways that she could have engaged with him that could have built on his self esteem and his identity.

She could have said, "Yeah, bingo marker. "What are you doing? Show me. Wow." And gotten her own bingo marker and played together with him. Finding humor, she could have made a circle with the bingo markers and asked, and seek to see if he would imitate a circle with the bing... Making dots with a circle. There was so much that could have been done in that moment. But because of his diagnosis, it was about controlling his behavior. Because of his diagnosis, it became about controlling his behavior, and he ended up not having a partner to play with, there was no scaffolding up of skills to increase responsible risks, like making a circle with a bingo marker dots, and why would he care to persist? Like, it gets boring after a while, if you don't have someone to play with. So he's gonna leave that and go to something else. And then we have a decreased attention span. So we really do have a very big role to play in the attitude that we bring to the interaction. Okay, with regard to the cognitive realm. So this pertains to thinking and thinking symbolically, which we know for people with autism, developmental disabilities, they may have difficulties with symbolic thought. But as we think about Habits of the Mind and Habits of the Mind as it pertains to what children can develop in terms of executive functions, it really challenged the child to face what

they engage in play, what they encounter in play to solve a particular problem. So we think about the developmental stages of play that we talked about last time, we talked about the cognitive language stages of play, starting with sensory, sensory motor play, and then exploratory play, and then we have cause effect play, construction play, and some pretend play, so we have to think about that and bring that to the table, as we think about integrating the Habits of the Mind, and we have to remember that as children are engaged in these cognitive aspects of play, they're also working on developing their executive functioning skills. So it's not surprising, if we have a child who is stuck in a cause effect stage of play, that some of the executive functioning skills like interpreting another person's behavior or emotional state, a figure ground, their working memory may also be impaired.

We might see some kind of correlation between these. So what are we going to do about that? We can't just walk around saying, "Well, what do you want with his autism?" Maybe as we work in play, we can do things, adopting the Habits of the Mind, to support executive functioning level. And here I pull in Vygotsky. He was one of my favorite child psychiatrist and he talked about creating that just right challenge for our clients.

So scaffolding up. So if the child is doing cause effect play, let's say they're opening a busy box, and they hit a button and Mickey mouse jumps up, that we have like a little toy Mickey mouse or toy whatever, a little dog or whatever, and that dog goes and gives that Mickey mouse a kiss. We scaffold that up. We create a just right challenge. So some of the Habits of the Mind that we, when we do this, that we encourage, is managing impulsivity. Like, I don't know how to do this, I'm just moving on. So sometimes I like to tell my students that we milk an activity for all it's worth. Which means pausing, it means we're thinking creatively about the materials, and we're encouraging, in doing so we're encouraging our clients to stay with the activity longer. Let me give you an example of a child who is, might be young, minimal language

functioning, like at the illocutionary stage, and you'll remember perlocutionary, illocutionary, and locutionary, so illocutionary doesn't really have language, but it's using behaviors intentionally. And I may have lids and I'm spinning those lids and they're spinning around and the kid is highly engaged with that, and the kid, when the lid stops, he hands it over to me for me to take another turn, and then I take my turn, we do this a number of times, but then I hand the lid to him for him to do it. So instead of just walking away, he now is stretching how long he stays in that activity. Then as we do that, I'm thinking creatively about this activity, and I take the lid and instead of spinning it, I'm now rolling it. So we're looking at multiple ways of using an object, which is part of flexible thinking, looking at all the things we could do with the lid, but it's still kind of at that sensory motor stage that is important for the child. So I'm keeping him in that stage, but we're being flexible with what we do with things, and the child then tries to spin it, tries to roll it, and is taking that child sized problem and moving forward with that.

Another example that I would have, a young boy many, many years ago, was watching me do some water play in a little dish bin with another child, and we were doing this on the floor, and he sat and he watched us and watched us, he watched us for like 20 minutes, and then he stood up and he came over to the wash bin, to the little dish pan, and he sat in it. It took him that long as an observer to come in and decide to take that risk of sitting in the water. The next day, I had the water out to play with him, and we just engaged in some sensory motor play and splashing in the water together with our hands, without any objects, but then I had foam paint. And I put a little bit of foam paint on the top of the water, which then was a thinking flexibly. What else is gonna happen? What is a child sized problem to take responsible risks? And he went to touch it and then pulled back, and I gave him a paintbrush. And offered it to him, and he was like stirring the water with the paintbrush, and I put a little bit more painting, and then he touched the paint with the paintbrush. And after he did that a couple of times, and I put more paint in, he dropped the paintbrush, and he went and he took his finger to touch

it. So through all of that, he was building schema, he was learning how to stay with something, I was at his play level, at his language level, he was taking a risk and seeing that he could do it, he was seeing the different things that could happen in the water, that you could use a paintbrush or your hands, I took what he had done yesterday and built upon it on the next day, so there was this ongoing scaffolding, which is continual learning. So we wanna maximize those opportunities. It's not just keep the water in the pan, dump, and being highly directive. It's about engaging and being a play partner. Okay. So now the social realm. This is where children play with other children or people are playing with...

Adults are playing with other adults, are engaged with other adults. And when we think about it, it's an essential life goal. So when we work on social skills within a play event in our therapy, versus just doing a board game. Engaging in a person-generated idea. It is really essential for them to be able to occupy themselves, live with others, work with others, engage in recreational activities with others as they get older. Unfortunately, I've been in group homes where there are clients and they spend their days ripping up old telephone books. That's really sad to me. To think about this is how they're spending their day. It's not really productive. Are they're just watching? We run some Dory and or other Disney movies.

I would hope that for many of those clients, more was possible. If we would have adopted an interactive generative way of engaging with them in play when they were younger. So we need to really balance what we're, our activities that we come to, what we plan for our therapy session, with an orientation towards play, that end that we're building lifelong skills. So some of the habits, when we focus on social interaction in our play, is managing impulses. Like you just can't take that toy from somebody, but that, oh, we can trade first. We can trade. We don't take, we trade. Okay, that's managing impulses, it also correlates with what we talked about in the personal realm. When we encourage the typically developing peers to listen to the child who's on the

spectrum. When we encourage the child who's on the spectrum to listen to their typically developing peers. And this can happen in play, it can happen at snack time, a child asks for a cracker, and instead of us giving the cracker, we tell them, "Ask Joey. Joey's in charge of the crackers." And the child has to say "cracker" to Joey. Or the child with autism is in charge of the crackers. And the typically developing kids have to ask Charlie who has autism for the crackers. So we're fostering that social interaction. And I'm using a snack time, but that could also be in play. Where they're playing with cars and Charlie with autism is in charge of the cars, and he has to learn how to give one up to a friend. This is hard, Charlie, you're gonna miss it, but you picked green. That you were gonna give the green car away today. We can give the green car away, you're still left with four more cars. We'll play with our four cars and then trade the green for the blue.

So we wanna think about encouraging that peer to peer interactions. So in doing so, what I just described was conflict resolution. And I can sit with Charlie and say, "You don't wanna give your choice away. "It's hard to give our toys away. "You have five, you will still have four. "Let's think. You can live with just four." And I might write it down, "I can live with just four," and use their visual strengths, and then Charlie gives the green one away, and I'm like, wow, look at that. You're fine. You have four to play with. Let's play. And then that interdependent is, like we're playing together and we're having fun. And the humor just follows from it. Versus just regulating, we as therapists and teachers can really end up just regulating interactions that they become void of anything that's meaningful for the children. So here are some strategies for all of the Habits of the Mind. The first is persisting. And I love the idea, the phrase, and I share it with families, I share it with my students, allow our clients to have child sized problems. Sit there with them to solve their problems. Don't jump in to solve their problem. One great example is bubble blowing. My students wanna be so helpful that they'll unscrew the bubble jar. Well, why don't I let the kid have the problem that he can't open the jar, and he has to ask for help? Isn't that one of our goals that the child is going to ask for

help? And then the child is trying to get the bubble wand in and, into the jar and we wanna be helpful so we stabilize the jar for the bubble jar for him so he can get it in. Well, what about his second hand? This is a problem. It's not, you can't, it's not going in. It's a problem. This is a problem. You wanna blow bubbles. We use two hands. And I tap his other hand so that he can stabilize. I'm not gonna take his problems away from him. 'Cause when I take his problem away from him, I limit his ability to persist, I limit his ability to come up with other ideas, I limit his ability to have wonder and awe, and a sense of accomplishment, and those are important skills that we bring into the workplace. We, all of us bring that sense of, Oh, I gotta hang in there with this job. I know I can do it. Let me think.

How am I gonna get this problem solved? Wow, I feel so glad that I did it. So what do we do while they're having their problem? We watch. We engage in parallel talk. We say things like, "You're really thinking. "You came up with three ideas. "You're really thinking about that." I mean, the goal isn't that he blows bubbles 10 times. The goal might be, that he asks for help. The goal might be that he verbalizes what he's doing. So we can watch, we can engage in parallel talk, we can say, "You're really working hard. "Look at you. Look at you go." It's not necessarily just good blowing. That's really void of any sense of awe.

If we want kids to manage their impulses, we need to create a space in our therapy where there's a pause. So we can stop them and say, "Wait, let's think, let's think. "I bet you, I bet that if we opened this box, "we would see what's inside it instead of just hearing it. "I bet that would happen. What do you think?" Okay, so we're modeling that. So instead of them just, if you had a box with some surprises in it and they could hear it, instead of them just throwing it, we paused, which would be an impulse, we paused and we worked with them and talked about things that worked or didn't work. That we're just gonna keep going so you can see I was tied in with persisting. Listening with understanding and empathy. So when I have kids who are having problems, or they're

getting a little bit frustrated, I'll say, "This is hard. This is hard. You are working." So I just validate their persistence. Or I might draw their attention. I had a little boy once years ago, who, his sister was in therapy with him, she wasn't getting therapy, but she came to the sessions, and she got mad because she couldn't play with a particular toy because it was her brother's therapy session. So she left crying. Now we had a choice. We could continue with our activity with this little boy, but he looked, he noticed her leave, he noticed her leave with his mom, and it was an opportunity for us to work on listening with empathy and understanding. So we said, "Yeah, Charlotte's left. She was sad. "Charlotte's sad. Mommy's helping her." And then when Charlotte came in, we could say, "Charlotte, Joey was thinking about you. "Joey wants to know if you're okay." And we could scaffold that and model, and we modeled like patting her on the shoulder and the brother patted her on the shoulder, but it just created some kind of resolution and engagement around the empathy piece. How are kids with autism supposed to learn empathy if we don't maximize on these natural events?

And I think I've modeled that thinking flexibly, coming up with an idea and letting a kid try it as long as it's safe. So a child with duplo blocks might have the idea that he's gonna flip them over to the open piece and try to stack them that way upside down. That's a good idea. Wow. I never knew that would work. You did it upside down. Look, they're upside down. And there's vocabulary right there. Excuse me. All right, so more behaviors to adopt. If we want accuracy and precision, it also goes along with persistence. You're almost there, I think you're gonna do it. Look at that. You put them in. They're in. It's not void of working on our vocabulary, working on receptive or expressive or following directions. It's just all integrated into this philosophy. And then asking naturally occurring questions, recasting past events. Last time you did this and it made a mess, like if we're playing with sprinkles or whatever. Last time we did it, I wonder what could we do about these sprinkles? They get everywhere. Wow. You know what? I brought a baggie. I bet we could pour them in a baggie. And I've scissors. We can cut the end. And we model how we can do this so it doesn't make a

mess. Or we let them try a different idea. We're not gonna do it that way today. That was too yucky. We have to come up with another way. And we're, as you hear in my voice, actually engaging with the client. Thinking with clarity, okay, if I do a, then b will happen. I don't wanna hurt her feelings. What am I gonna do instead? So one of the things that's coming to my mind, as I talk about all of this with you, is giving ourselves time within the play event to work on this. And if you say, "Well, I don't have the time." I would ask you, "Why? "Why don't you have the time? What is the priority?" Because some of, we can have kids with meltdowns and we have to put time into that. Or we can work with them and decrease the meltdowns where we can put time into working on some of these executive functioning skills.

Like, oh, if I take her toy, she's gonna cry. I don't want her to cry. What else can I do? So there I'm also working on gathering census. I'm slowing it down, like, hmm, I'm gonna feel bad if she cries. Hmm, I think I could play with another toy, I could play with her, what can I do? And I don't know if you can sense all the wonderful modeling of language and pragmatic functions and vocabulary that's happening, versus just moving, us moving from point a to point b, to get our 10 data points. So with the creating, imagining and innovating, like, we can just share that sense of wow, like, I really like that. You used yellow bingo markers. I'm gonna use red ones. Let's see what red looks like with yellow.

Okay, there we have just, I'm engaging and your goal might be that the child will remain on task for seven minutes. Well, it's more than keep going, your time's not up. It's about having those seven minutes be meaningful. The finding humor, I think I've really illustrated, laughing with the children, reflecting, mirroring their emotional state, identifying when a client or if you're working in a group, when they have an idea. To say, "Oh, Scott thinks we should drop the coconut "to get it open. "What do you think?" "Oh, Michael agrees with Scott. "I guess that's a good idea. Let's try it." Okay, that's kind of that joining piece, and then, dropping the coconut, did it work? And

Michael's like, "No, it didn't work. "What are we gonna do? We gotta get this coconut open." So we really kind of sit with it and encourage them to be aware of that process. And then after they're done reflecting on like, wow, we tried three ways to get that coconut open. And two of them didn't work. But a hammer and a screwdriver, that one worked. I'm gonna remember next time to use a hammer and a screwdriver or whatever it might be. That learning continuously is that ability at the end, retaking a moment to reflect. So Johnny, you had five cars and you didn't think you could give one away, but look, you did. You gave one and your friend played with you during break time.

That is so nice. You guys are friends now. So that kind of talk really reflects our attitude of the person having value and the person having competence. Okay, so as we begin to wrap up, I see I have about 15 minutes left and I wanna leave time for questions. I'm gonna talk about Jordan, and Jordan is three years old with autism, beginning to develop words and sustained attention to fine motor task, but whenever Jordan was in a new place, Jordan would have meltdowns. So the therapist worked with her mom to engage in some mutual regulation activities, using some singing of familiar songs, some deep pressure touch, like rocking her, and then as Jordan calmed, the therapist pointed this out to the mom, like, look, she's focused again, why don't we kind of introduce something new? So scaffolding up, and giving the child the next level of play, some squishy balls, that she could play with on her own.

So now she was working on some self regulation. And then seeing that as, she's continuing to calm, self-regulation, so she didn't have to persist, this was a child sized problem, the child then, the parent was encouraged to present some blocks and to start stacking them, and then Jordan just scaffolded and started playing with the blocks. And then pointed to get more blocks because now she was organized. So instead of viewing that meltdown as something bad, working with it and scaffolding up, engaging with the child, sharing that aspect of state, as we talked about, helping the

child to persist in this new environment, and then gradually moving to the place where the child was solving problems on her own. The second example is Isaiah who rejects most toys. Is three, nonverbal, lots of meltdowns. Okay, I'm sure many of you know kids like Isaiah, and all he wants to do is play with a Rubik's Cube and keep turning it and turning it and turning it. But he never matches any colors, but that's what he does with his hands. And he won't let anybody next to him. So he's pretty isolated, so you don't have that sharing, you don't have that awareness of the sensory environment, that others are in your environment, you don't have responding with any humor or awe, he's kind of in his own little world, so this is a client that I had many years ago, his name wasn't Isaiah, but I got a Rubik's Cube. And we would be a number of feet away from each other, and he was playing with his Rubik's Cube and I was playing with my Rubik's Cube. And we did that for a while, and then I said, "Okay, what is this Rubik's Cube?" It's really a fine, it's kind of a fine motor cause effect toy, so I brought out some other toys after we had done this for a while and I had duplicates of them. And so it was like a busy box, there was one for him, there was one for me.

If it was a top, I had one for him, one for me. And I would put one next to him, push it next to him, and I would still be a couple feet away, and I played with that, my toy, and then he would come over and look at his toy, might not touch it, but when I would notice that, I would kind of make a big deal about mine, and over time we began playing with two things together, which is parallel play. If he then went back to his Rubik, I would then imitate his Rubik. So over time, I was able to not only introduce new activities to him, which is that flexibility of thought that we talked about as a Habit of the Mind, I was able to get closer to him so that there was more shared understanding, and as he would observe me playing, he was getting schema for how he could play with those items, so he learned to tolerate others in his play, which is that reciprocity, and that shared thinking, and he began to persist and playing with new items and developing these new schemas, and applying past knowledge to new events. So that's a very different stance than saying, putting him in a chair and us

taking turns, having him push the top, while he's screaming or yelling, and we're taking our hand and we're doing hand over hand instruction and he's screaming and yelling and he's afraid, and then he doesn't wanna come into the therapy room with us because he doesn't see us as a partner, we just make him do things. But we see that in the scenario that I described, he's able to maintain a calm alert state, learning is able to occur, he's developing scaffolding, there's no hand over hand instruction, so it's all of his own autonomy, he can have his own problems, and he can persist with his own problems. So we see this enhanced ability for self esteem.

And example three is Rick. Rick is 13, had a TBI following surgery at nine weeks of age, he actually had cerebral atrophy at nine weeks, which isn't a good thing, and he wants to engage with others. But he's kind of abrupt and awkward, I think I might've talked about him, but called him a different name last time. He has very fine motor skill... Very poor fine and gross motor skills, so when he moves through space, people think he's aggressive, he just looks he's very awkward, and because of the TBI and the heart problem, if he gets tired, hungry, or thirsty, his self-regulatory skills go down down the tubes. So part of his treatment was to create a Stop, Think, and Make a plan board, which was, looked like a stoplight.

And it was really focused on helping him develop executive functions where he would stop, kind of become aware of his sensory experience, like I'm thirsty, what should I do about this? So this is like narrating the problem. What's your plan? With all very much executive functions, I need to get a drink. Or if he was running down the hall, Rick, you need to stop, okay, let's stop, let's think. What do you wanna see happen? I wanna say hi to Joey. Okay, let's make a plan. How are you gonna say hi to Joey? And you can do a high five, you can just yell, "Hi Joey," but Rick would, historically would just grab kids, and because he was so awkward, they'd end up on the ground rolling around, and then Joey would think that Rick was trying to start a fight, and that wasn't the case at all. So oop and I see I changed his name in the middle of this example. So anyway,

we worked on the Stop, Think, and Make a plan strategy until it became second nature for him, even if he was on the playground and he wanted to go up the slide, it was like, you need to stop and think, there are other people there, becoming aware of the environment, that's interrelatedness, what's gonna be your plan? So over time he was able to handle this, and I can give you an example that's not here, people might say to you, "Well, how do you..." "To me, well, how do you know he integrated that plan?" There was one day where we were getting ready to go out into the hallway, and I said, Rick, "It's time to make your plan," and I took out my little stoplight and he was like, "I don't wanna do that, Lisa." I was like, all right, but you need to do it in your head today. And we went out into the hallway and there was another line of kids coming down, and Rick went to step out of the line to go and say hi to somebody in the other line, and stepped back into the line. Well, wow! That's some self-regulation. And then he just waved at the other child. That was a big deal.

So another example was, Rick was supposed to deliver bread with his peers to an office building, and he thought he would be the peer to carry the basket of bread, but then he didn't. It was given to somebody else. And he verbally said, "Wait, wait, my plan was to carry the bread, what happened?" And so he could engage in conversation with the person saying, "Well, Michael got here first, "so I gave him the basket." So working on this with him in play, on a playground, in the hallway, really then began to apply to some of his social and vocational skills, such as distributing bread around to the offices. And not having what he thought was gonna happen, happen. Flexibility of thought. Okay, I think I took up all of our time, but I'm willing to stay here for a few more minutes, if you want to send me some questions, that would be great. I also think there are some Brazilians in the group today. I have 173 of you here, and I didn't know there would be when I wrote "Obrigada!" So thank you. Obrigada! But I'm willing to take some questions. So from Heather, "If you're working with a child and they have a meltdown, "do you suggest as an SLP "to try to work through that with them, "working on self-management, "or do we allow the special ed teacher to jump in "and work on

that meltdown?" I think you need to discuss with the teacher what the plan is for working on meltdowns, so that you can be tag team and kind of support each other. I don't think it's one or the other, sometimes with the meltdown, we need, if the teacher is using good strategies, like just creating quiet, keeping things safe, reducing the sensory environment, providing some self-regulatory supports, then all is well and I don't think the SLP needs to step in. But if the special educator isn't using supportive strategies, maybe the SLP should step in and say, "I have a different idea." And certainly then to talk about it with the teacher later about what the plan is. And if meltdowns are occurring frequently, then I think there needs to be a written plan for how to successfully manage them.

Dorothy, "Do I have a list of references for this topic?" I believe I gave a list of references. I sent in a list. So let me talk to Amy about getting that for you, because I did provide a list, I believe. So we'll get to that. And then Laurie says, "It seems like it would be really helpful "to teach the Habits of Mind to caregivers." Yes. Yes I do do this. I kind of do this, not like here's a lesson on the Habits of the Mind, but as children are encountering things, I will, and as the parents are working with the child, I will coach them, and my coaching is informed by Habits of the Mind. So like, I will tell the family, tell parents, "You don't need to do hand over hand. "Do this right now." Now, sometimes they need to do hand over hand.

They gotta get out, they gotta get in the car, they gotta get going, the kid has to be picked up at soccer, all of that. But if they're sitting on the floor, playing with the child or bathing the child, I will coach them and provide them with some strategies that are informed by Habits of the Mind, I might even give them a couple to work on at home. So yeah, many of my parents know the phrase, "Let your child have his child sized problem." That's when that's used a lot, as well as, "Let's work on Stop, Think, and Make a plan." So indirectly informed by Habits of the Mind. And then Deborah says, "What do you do when a child is engaged in repetitive play "and doesn't appear to

notice what you are doing?" So I would ask, "What are you doing?" And if they are engaged in repetitive play, I will typically mirror their play and get as close as possible to them mirroring their play. And then I may trade with them, that might happen, or I may then scaffold up in the play. So if there were repetitive plays to line things up, I might be lining things up, and then I might switch an object across those two lines. Or after I line them up, I might start to knock them down. So I will go into what their level of play and then violate that play in some way. Okay. Any other questions here? I see Amy answered that she will make sure you get the references that I shared. Any other questions? I hope that this got you thinking about the what you're doing, and the why you're doing it, if you already are doing some of the things, now you have a better sense of the why and the importance of it, and just keep embracing the fact that what you're doing, should be serving to engage the child, and as you do that, you're also working on many aspects, the social realm, the personal realm, and the cognitive realm. And I'm gonna turn it over to Amy to get closure.

- [Amy] All right. Thank you so much, Lisa. This was really informative. I love all the examples that you're able to provide and just show how you are doing some of those strategies in therapy with the different students or children that you're seeing. So that made it really very, very helpful to have those examples. And as far as the references go, yes, I apologize, we do have a few references for you today. I will go ahead and I will upload those to our course, and then they'll also be available in the recorded course. We'll make sure that we email them to you as well. So thank you to everybody for joining us today. We certainly do appreciate your time, and look forward to seeing everyone next week, hopefully, for part four. Lisa, we look forward to seeing you next week for part four as well. All right, go ahead, and you can go ahead and log off and I hope you have a great rest of the day. Thank you.