

Play-Based Therapy to Improve Social Skills in Autistic Pre-Schoolers

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Abstract

Autism Spectrum Disorder (ASD) is characterized by deficits in social communication and interaction, making early intervention critical in improving long-term outcomes. Play-based therapy has emerged as a promising approach to addressing these social challenges, offering a structured yet flexible therapeutic method for enhancing social skills in autistic pre-schoolers. This review explores the effectiveness of play-based therapy in fostering social development, focusing on various methodologies, including Floor time, Integrated play Group (IPG), and Pivotal Response Training (PRT). By synthesizing existing literature, this paper evaluates the efficacy of these interventions and their implications for clinical practice.

Keywords: Autism spectrum disorder, play-based therapy, social skills, pre-schoolers, joint attention, floor time, integrated play groups, pivotal response training

Introduction

Social interaction deficits are one of the hallmark features of Autism Spectrum Disorder (ASD), often manifesting early in childhood. Preschool-aged children with ASD typically experience difficulties in initiating and maintaining social interactions, reading social cues, and engaging in reciprocal play with peers. Addressing these challenges at an early age is crucial for ensuring better developmental outcomes, particularly in terms of social communication and interpersonal relationships. Play-based therapy, which integrates therapeutic goals into structured play, has gained recognition as a practical intervention to enhance social skills in children with ASD. Play is a natural context for learning in young children, and play-based therapy leverages this by creating opportunities for autistic pre-schoolers to practice social skills in an engaging, non-threatening environment. This review examines the body of literature on play-based therapies, their effectiveness, and their potential role in the early intervention for autistic pre-schoolers.

Main Objective of the paper

The main objective of this paper is to explore the effectiveness of play-based therapy in enhancing social skills in autistic pre-schoolers.

Social Deficits in Autistic Pre-schoolers

Children with ASD exhibit varying degrees of impairment in social communication, including difficulties in joint attention, imitation, turn-taking, and understanding social norms. Joint attention the ability to focus on a shared object or event with another person is a fundamental building block for social interaction, and its impairment is particularly common in children with ASD. Additionally, autistic pre-schoolers may struggle with understanding and responding to the emotions and intentions of others, further complicating their ability to engage in meaningful social exchanges.

Given these challenges, early intervention through targeted therapies that focus on social skill development is essential. Play-based therapy aims to improve these fundamental skills by using play as a medium for learning, making it both an effective and enjoyable approach for young children.

Play-Based Therapy Approaches

a) Floor time (Developmental, Individual-differences, relationship-based Model-DIR)

Floor time, also known as the DIR model, was developed by Dr. Stanley Greenspan and focuses on following the child's lead during play to promote engagement, communication, and emotional development. The therapist or parent interacts with the child through play, creating opportunities to expand the child's attention and social participation. Studies have shown that the DIR model helps improve emotional regulation, joint attention, and social reciprocity in autistic pre-schoolers (Greenspan & Wieder, 2006)(1).

A study conducted by Solomon et al. (2007) (4) demonstrated that children who participated in DIR-based interventions exhibited significant improvements in emotional and social

A) Integrated Play Groups (IPG)

The Integrated play Groups model, developed by Pamela Wolfberg, emphasizes the inclusion of autistic children in structured play session with typically developing peers. Through guided participation and peer modelling, autistic pre-schoolers learn essential social play skills, such as sharing, turn-taking, and cooperative play. IPG aims to create a supportive environment where autistic children can observe and imitate their peers, gradually integrating more complex social behaviors into their interactions.

Research by Wolfberg (2003) highlights that children who engage in IPG interventions show marked improvements in initiating social interactions, sustaining attention during play, and engaging in shared activities with peers. The inclusion of typically developing children in these groups is key to promoting positive social role modelling, which facilitates social learning in a naturalistic setting.

B) Pivotal Response Training (PRT)

Pivotal Response Training is a play-based therapy that targets specific “pivotal” areas of development, such as motivation, self-management, and the ability to respond to multiple cues. By focusing on these key areas, PRT produces broad improvements in social, communication, and behavioral functioning. PRT is highly child-directed, with the therapist incorporating the child’s preferred activities and interests into the session to enhance engagement and motivation.

Koegel et al. (2012) demonstrated that pre-schoolers with ASD who participated in PRT interventions showed significant gains in social communication, including more frequent social initiations and increased use of verbal language during play. The study found that children who engaged in PRT were more motivated to interact with peers and adults, leading to improvements in overall social behavior.

Effectiveness of play-Based Therapy in Social Skill Development: Numerous studies have evaluated the efficacy of play-based therapies in improving social skills in autistic pre-schoolers. The consensus is that these interventions are effective in promoting key social behaviors, such as joint attention, social reciprocity, and peer interaction. A systematic review by Kasari et al. (2014) analyzed several studies on play-based interventions and concluded that such therapies are particularly effective when implemented early in a child’s development.

In a controlled study, Ingersoll and Schreibman (2006) found that play-based interventions led to significant improvements in social imitation and play behaviors in autistic pre-schoolers. The children in the intervention group demonstrated increased social engagement, greater responsiveness to social cues, and more frequent initiations of social interactions compared to those who did not receive the intervention.

Moreover, a meta-analysis by Murza et al. (2016) supports the effectiveness of play-based therapies in enhancing social communication in children with ASD. The analysis found that play-based interventions were associated with moderate to large improvements in social communication, particularly in areas such as turn-taking, shared attention, and verbal exchanges.

Mechanisms of Play-Based Therapy

Play-based therapy works by leveraging the natural motivation children have to engage in play, using it as a medium to teach and reinforce social skills. Several mechanisms contribute to its effectiveness in autistic pre-schoolers. First, the naturalistic setting of play reduces anxiety and allows children to practice social interactions in a familiar and enjoyable context. This makes it easier for children to engage in meaningful social exchanges. Studies show that modelling and imitation are key components of play-based therapy, where therapists or peers model appropriate social behaviors, which children then learn to imitate. This process helps autistic children understand social cues and respond to them in socially appropriate ways. Another critical mechanism is positive reinforcement. By embedding social goals within play activities, therapists can use rewards, such as praise or access to preferred toys, to

reinforce positive social interactions. This increases the child's motivation to participate in social exchanges, which is essential for fostering long-term improvements in social behavior. Research by Ingersoll and Schreibman (2006) demonstrated that naturalistic play-based interventions improved social imitation and joint attention in autistic children, highlighting the importance of these mechanisms. Furthermore, studies have shown that repeated practice of social skills within a structured play setting leads to better generalization of these skills in other social environments, such as school or home, which is critical for real-world functioning.

Challenges and Limitations

While play-based therapy has demonstrated effectiveness in enhancing social skills in autistic pre-schoolers, several challenges and limitations need to be addressed for its broader application. One of the primary challenges is the variability in outcomes, which can depend heavily on the individual child's characteristics, such as the severity of their ASD symptoms, cognitive ability, and language skills. Children with more severe social and communication deficits may require more intensive or tailored interventions, and not all play-based approaches may be equally effective for them. For instance, a study by Kasari et al. (2014) (3) found that children with limited verbal abilities showed less progress in certain play-based interventions compared to children with higher language proficiency, suggesting that additional support might be necessary for these subgroups. Another significant limitation is the difficulty in ensuring the generalization of skills learned in therapy to other environments, such as school or home. While children may demonstrate improved social behaviors during therapy sessions, they may struggle to apply these skills in less structured, real-world settings where social interactions are more dynamic and unpredictable. Research has shown that without explicit strategies to promote generalization, gains in social skills may not always transfer outside of the therapeutic context. Ingersoll and Schreibman (2006) (2) highlighted the need for caregivers and educators to be involved in reinforcing these skills across various settings to ensure lasting improvement.

Additionally, the implementation of play-based therapy can be resource-intensive. It often requires trained therapists to deliver the intervention in one-on-one or small group settings, making it time-consuming and costly. For example, the DIR/Floortime mode requires significant involvement from both therapists and parents, which can place a considerable burden on families who may already be dealing with other stressors associated with caring for a child with ASD. A lack of access to trained professionals, particularly in low-resource settings, further exacerbates these challenges. Studies have indicated that access to early intervention services, including play-based therapy, is unevenly distributed, with children from lower socioeconomic backgrounds often receiving fewer services or experiencing delays in starting treatment (Zuckerman et al., 2014) (5).

Furthermore, there is variability in the standardization of play-based therapies, making it difficult to compare outcomes across studies or ensure consistent application in clinical practice. Different studies may use slightly different protocols or therapeutic techniques, which can influence the results and make it challenging to draw definitive conclusions about the overall effectiveness of play-based interventions. For instance, while Integrated Play Groups (IPG) have shown success in promoting peer interaction, the degree of peer involvement and therapist facilitation can vary, affecting the intervention's efficacy.

Lastly, while most studies on play-based therapy show positive short-term outcomes, there is limited research on the long-term effectiveness of these interventions. Questions remain about whether the social skills developed through play-based therapy are maintained over time as children grow older and social expectations become more complex. The lack of long-term follow-up studies makes it difficult to assess the durability of these interventions and whether they provide lasting benefits into adolescence and adulthood. This gap in the literature suggests the need for more longitudinal studies to better understand the sustained impact of play-based therapy on social development in children with ASD.

7. Conclusion

Play-based therapy represents a valuable approach to enhancing social skills in autistic pre-

schoolers, offering a natural and engaging way for children to practice and develop key social behaviors. The literature supports the efficacy of interventions such as Floor time, Integrated Play Groups, and Pivotal Response Training in promoting joint attention, social reciprocity, and peer interaction. By leveraging play as a medium for learning, these therapies provide autistic pre-schoolers with the tools they need to navigate social relationships, setting for foundation for improved social functioning throughout their lives.

Future research should focus on refining these interventions to ensure their applicability across diverse populations and settings. Additionally, more studies are needed to explore the long-term effects of play-based therapy on social development in autistic children, as well as strategies to promote the generalization of social skills in various contexts.

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