

# Education update:

## "Affection training" can be useful

Group "affection activities" can increase autistic-like children's social interaction with peers, according to researchers in Tennessee.

The teacher in this study led three autistic-like students and their non-disabled kindergarten peers in group activities designed to promote affectionate behavior. For instance, when the class sang the song, "If You're Happy and You Know It"—which normally calls for children to clap hands, stamp feet, etc.—the teacher substituted verses asking them to "hug your friend" or "pat your friend on the back."

The researchers found that "affection activities" increased the autistic children's social interactions during free play, while participation in classroom group games without affection activities did not. Initiations by both autistic and non-handicapped peers increased, with reciprocal interactions occurring more often with non-handicapped students who had participated in the affection activities. While all three autistic students showed progress in social relating, the two with the least severe autistic behaviors showed the greatest improvement.

The researchers note that affection activities "are intrinsically reinforcing, address the behavior of both autistic and non-handicapped children, and can be integrated easily into daily classroom activities."

"Promoting autistic children's peer interaction in an integrated early childhood setting using affection activities," Mary A. McEvoy, Vey M. Nordquist, Sandra Twardosz, Kelly A. Heckaman, Joseph H. Wehby, and R. Kenton Denny; *Journal of Applied Behavior Analysis*, Vol. 21, No. 2, Summer 1988, pp. 193-200. Address: Mary A. McEvoy, Department of Special Education, George Peabody College of Vanderbilt University, Nashville, Tennessee 37203.

## Tooth-grinding reduced

A simple "cueing" procedure significantly reduced tooth-grinding in two autistic boys, according to Canadian researchers James Bebko and Carolyn Lennox.

Before treatment, the two boys ground their teeth almost constantly, resulting in severe tooth damage. The treatment procedure consisted of:

- intermittent reinforcement when tooth-grinding did not occur.

- giving a verbal cue, "No grinding," when the behavior did occur, touching the child's chin with an index finger, pushing down gently, and cueing him to open his mouth for 10 seconds.

- directing the child's attention back to the task he was working on.

After about 1-1/2 months of treatment, both children's rates of tooth grinding had dropped significantly. At follow-up two years later, one child had stopped tooth-grinding completely, while the other child's level of tooth-grinding was less than half of his pre-treatment level.

The researchers recommend that this procedure be used only with children who do not resist the physical cueing, because using force might cause injury.

"Case study: teaching the control of diurnal bruxism to two children with autism using a simple cueing procedure," James M. Bebko and Carolyn Lennox; *Behavior Therapy*, Vol. 19, 1988, pp. 249-255. Address: James M. Bebko, Department of Psychology, York University, 4700 Keele Street, North York, Ontario, Canada M3J 1P3.

## Imagery sessions increase socialization

Autistic children participating in "imagery" sessions increased their verbal interactions with others, according to a recent study by June Groden and Joseph Cautela.

The researchers conclude that imagery can be effective in improving social interaction even in autistic children who are retarded (the subjects in this study had IQs of 34, 47 and 49) and severely withdrawn.

Groden and Cautela observed three moderately retarded autistic children who attended brief twice-daily sessions in which they were encouraged to imagine social behaviors and associate them with pleasant experiences. For instance, the subjects were told to imagine that they were asking their peers to play cards, and then to imagine that they were eating chocolate ice cream cones.

The trainers relied heavily on sensory imagery ("describe the room you are in," "feel your hand waving to your friends," "how does the ice cream feel in your mouth?" etc.), and used simple language and short, easy-to-understand imagery scenes geared to each child's developmental level and interests.

Two of the three children initiated significantly more verbal interactions following imagery training than they had before the study began, and the third child also showed improvement.

"Procedures to increase social interaction among adolescents with autism: a multiple baseline analysis," June Groden and Joseph Cautela; *Journal of Behavior Therapy and Experimental Psychiatry*, Vol. 19, No. 2, 1988, pp. 87-93. Address: June Groden, The Groden Center, Inc., 86 Mount Hope Avenue, Providence, Rhode Island 02906.

## Lesch-Nyhan self-injury stopped using self-assessment

Lesch-Nyhan is a genetic disorder which causes mental retardation, compulsive self-injurious behaviors, and spasticity. People with Lesch-Nyhan syndrome often bite their lips, fingers, and shoulders, sometimes severely enough to cause permanent injury or death.

In the inaugural issue of the new *Journal of the Multihandicapped Person*, Nancy Grace et al. report that they stopped a 14-year-old boy with Lesch-Nyhan syndrome from biting his hands and fingers using a procedure combining self-assessment, rewards for correct assessment, and time-out for incorrect assessment.

The boy was left alone for gradually increasing amounts of time, with an observer watching him from another room. When the observer returned, the boy was asked to point to a picture of a "happy face" if he had not injured himself, and to a "sad face" if he had. (He was taught to perform this self-assessment task by a trainer who modeled self-injurious and non-self-injurious behaviors and then pointed to the correct picture.)

If the boy responded correctly, he was rewarded with hugs. If he responded incorrectly, the trainer used a time-out procedure which consisted of turning his back on the child for 30 seconds. The boy also was reprimanded for self-injury, and praised for not biting himself.

After only a few sessions, the boy's self-injury dropped from up to 60 times per half-hour to zero. Treatment effects were maintained during a 19-week follow-up.

The researchers report that "benefits from this treatment include not only the elimination of self-injury but also the freedom from physical restraints. This has allowed [the boy] the chance to use his limbs and develop his motor skills . . . he is now learning to maneuver his wheel chair, thus giving him an opportunity for some degree of independence."

"The fact that we were able to develop a program with few aversive components and no psychotropic medication is noteworthy," Grace notes. "Given that pharmacotherapy has not proven to be particularly effective with many cases of self-injurious behavior... behavioral methods are the most promising alternatives to date."

"Reinforcement and self-control for treating a chronic case of self-injury in Lesch-Nyhan syndrome," Nancy Grace, Charles Cowart, and Johnny L. Matson; *Journal of the Multihandicapped Person*, Vol. 1, No. 1, 1988, pp. 53-59. Address: Nancy Grace, Department of Psychology, Louisiana State University, Baton Rouge, Louisiana 70803.