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THE DEVELOPMENT OF THE AUTISTIC CHILD THROUGH THERAPEUTIC PLAY AND SPONTANEOUS PLAY

Faraj FARAJ[1], Marian Ciprian OLTEANU[2]

Abstract

The play is inevitably an integral part of human life, in one way or another, whether a child or an adult. The play involves sharing the same experiences and emotions, being the most enjoyable communication tool, regardless of the age. Along with verbal communication, the play brings people together and helps them discover and understand everyday life. In this study the theories regarding autism in children are presented, analyzed and compared, the specificity of autistic spectrum disorders is observed and described in close relationship with the play, to highlight its influence on the development of the autistic child.

Keywords: autism, therapeutic play, spontaneous play, emotional attraction, adaptation.

Introduction

In 1799, Dr. Itard discovered a case that became famous, a kid named Victor - "the savage of Aveyron" (Muresan, 2007, p. 9) caught by hunters. It was noted that Victor had a number of common features of many children who have various mental disorders, who are condemned to live together in various institutions. As characteristics of this child, doctor Itard notes watching only items strictly related to his subsistence; strong outbreak in laughter at different intervals without obvious cause; insensitivity to cold or intense heat; highly selective hearing. The empirical processes used by Itard have even affected education over the years, particularly that of young children; his theory assumes that the methods considered valid for a deficient child must be taken as such also for a normal child, with another coefficient but with the same mental age. Failing to make his patient speak, Dr Itard tried to communicate with him by writing, designing a play consisting of movable letters - which will be later perfected by Maria Montessori. Thus, Victor has not learned what language is, but has learned the opportunity to replace an object with another similar object. Edouard Séguin resumes the problems of these children in 1846, reproaching to Itard his metaphysical inspiration predominance, which opposes " the physiological education " and minutely describes the fea-

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tures of "idiocy" as he calls it and in the treatment plan he envisages multiplying the exercises, trying reeducation and stimulating essential functions: sensitivity, motility, memory and imagination.

Other researchers also began to study the phenomenon in question at the end of the nineteenth century; Moreau the son names one of his works Insanity in children and an Italian author, Sante de Sanctis, describes the " dementia precocissima."

Later on, discussions about the pediatric schizophrenia arise in the United States, which are attempts to find premises in childhood or early forms of mental illness in adults.

In 1943, Leo Kanner, an American pediatrician, describes the behavior of 11 children with autism, the term "autism" is borrowed from adult psychiatry. According to the Belgian Eugen Bleuler autism means one of the fundamental signs of schizophrenia. Hans Asperger, a contemporary of Kanner, describes it in Vienna in much the same way, a pathology very similar, but the two authors can not communicate because of the war and will find out about each other's work later. While Kanner includes its clinical picture in the more general context of pediatric psychosis, Asperger distinguishes between "psychopathy", making a kind of constitutional particularity of the personality and a mental disorder itself, its syndrome is considered the international classifications in force as a form of attenuated autism, preserving the intellectual capacities. The features Kanner observed in the 11 cases mentioned are: (1) strong lack of emotional attraction of the autistic subject for another humans; (2) the imperative need to preserve his/her environment unchanged; (3) fascination for some features of objects and movements, especially for their stereotyped ones; (4) complete absence of language or delay in its occurrence and formation (with numerous pronunciation and expression disorders

Since the 70s more studies have been conducted regarding the autistic mental structure by researchers like B. Hermmelin, N. O'Connor, L. Wing. And in the 80s, S. Baron-Cohen, Leslie A. and U. Frith demonstrate that the autism pathology can be explained by a lack of the theory of mind (or social justice, which is the ability to make inferences about the mental states such as beliefs, emotions, desires, intentions, etc. - and to use that information to interpret what the others say, to understand their behavior and to predict what they will do next) of the affected persons. In the 50s, psychoanalysis gets off the ground in the United States, by M. Mahler and B. Bettelheim's theories, that make a link between the personality traits supposedly negative of the parents and the pathology of the autistic child. However, we come back to Kenner's initial findings, observing that neither the parental personality nor the way of education are responsible for the occurrence of autism in children (Burghelea 2012: 7). Currently, there is unanimity regarding the fact that in order to be able to say if a person (including a child) has autism, the followings should be considered DSM 5 (*Diagnostic and Statistical Manual of Mental Disorders*) and ICD-10 (*Classification of Mental and Behavioural Disorders*).

The play therapy was started in the 1940s by Virginia Axline, who is also her founder. (LeBlanc & Ritchie, 1999). Among the roles of the play we mention: diversification of the child's behavioral repertoire; giving a sense to the world; child adaptation to difficult situations (fear, anxiety, anger); mastering reality

through experimentation and planning of model situations; encouraging the social integration of the child (Richard, 2005).

Roles of play

Therefore, the play has complex roles, from a behavioral development of the child (gestures, emotions, attachment, non-attachment, etc.), continuing with his/her adaptation to different situations that could occur in life that can cause feelings of anger, frustration, fear and pleasure, and then achieving certain template situations that he/she can manage, for example through repetition and ending with encouraging the adaptation of the autistic child in the society, knowing its roughness, as he/she is seen by the other children as someone different from them.

a) The spontaneous play; it contributes to the developmnent of: (1) motricity (movements of the limbs, catching and throwing things); (2) language (babbling, screams that prepare the development of the hearing and speech analyzers), each of these activities, seemingly without significance, allowing each function to create, to explore and to specialize in an area which it then extends" (Popovici, 2016). This type of play allows an immediate and fast unexpected, but effective expression, by moving or speaking;

b) The therapeutic play; it can be said that the children's play is equivalent to the adult's speech, being a good environment for expressing feelings, exploring relationships, describing new experiences, witnessing desires and also for self-fulfillment. This play envisages specialized activities that make up a support for the development of the autistic child and facilitate his/her emotional expression. The therapeutic play consists of at least one of the following activities: (1) encouraging the expression of emotions (eg, playing with dolls); (2) instructive game to teach the child about medical experiences; (3) the game that enhances the physiological skills (e.g. making soap bubbles, which helps the respiratory tract) (Ricasata, 2009: 6);

c) The didactic or the educational play; the educational play makes the children with autism able to: (1) express their knowledge about the world and about their relationships with others; (2) spontaneously explore the ways of thinking both about themselves and about the objects they encounter; (3) develop communication skills and a spirit of camaraderie; (4) discover exciting ways of learning; (5) develop imagination and creativity. And all this because understanding the social world involves: (a) „being aware of the others' existence; (b) the desire to belong, to be included or to share with others; (c) an understanding of how others would behave or would answer" (Lawson, 2011: 15).

The goal of the didactic play includes teaching children "in a field of knowledge, and increasing interest in that activity by using some fun items that can help achieving the formative and educative goal" and "combining the didactic item with the funny one in the didactic play leads to the emergence of complex emotional states, which stimulate and enhance direct and mediated processes of reality reflection and of knowledge retention". Examples: single-player play, a play that requires another person, small group play, big group play. If a typically developing child is bored to turn the wheels of a car for hours, it is not the same in the case of a child with autism, for whom it may even be a very interesting hobby: "the flowing air or the dust particles from a sunray can be fascinating for him/her; they represent his/her joy in exploring the environment" (Hotar, 2016: 1), at which moment the child can be helped to divert attention to a typical game, which brings the very same joy and stimulus to him/her.

The play of the autistic child is different from that of a typically developing child, being usually characterized by repetitive actions, stereotypes, which represent an obstacle in his/her understanding by others, and in the absence of the autistic child socialization with others. It should be noted that neurotypical children also do repetitive actions, but there are noticeable differences between these children and the autistic children. For example, small autistic children: (1) repeat an action or a move more times than typically developing children of the same age; (2) spend much more time with their favorite toys than typically developing children; (3) prefer simple games, simple toys, to the detriment of new or complex actions or experiences; (4) focus their attention on unusual objects they use as toys or play with in unexpected, different ways (for example, they prefer lining up toy vehicles rather than playing with them, or they play with laces, normal plates etc.); (5) show less interest in plays that involve imagination and symbols than the typically developing children; (6) often prefer to play for longer periods than the other solitary children, they prefer to play with their own toys without feeling the need to socialize with other children (see Rogers, Dawson și Vismara, 2013: 275).

Conclusion

Training in symbolic play can also help improve skills in other areas such as social, language, speech and communication skills (Stanley & Konstantareas, 2007). The play therapy for children helps children feel able to do things and facilitates an increase in self-esteem in which many children with ASD (Autistic Spectrum Disorder) are deficient (Kenny & Winick, 2000).

Mizrachi, Balauta and Vlaicu (2018), concluded that a form of interactive projected shadows called Shadow theater is a more effective teaching method than traditional classroom storytelling for children with autism. It is also important to remember the wellbeing of parents that have a child with autism, as they can neglect their own health, turning their entire attention to their child. Interest or a lack of attention for one's own health is a complex interaction of several factors: psychological, physical, and social. (Eglite, Vintila, Grinfelde & Kantiķe, 2009).

In the teenage years, the construct of positive body image is important for youth

diagnosed with autism as children. (Swami, Tudorel, Goian, Barron, Vintila, 2017). When referring to children with autism, professionals need to avoid adding to the marginalization that these children face, by using various concepts in formal or informal language, when addressing them. Social workers and other members of the multidisciplinary team may face linguistic differences that may affect their relationship with the client (Goian, Vintila, Bucur, 2012; Goian, 2010). By their involvment in different plays, the children with autism have the opportunity to enhance their understanding of different objects they come into contact with (for example, a ball, a tennis racket), objects that they will know how to use in the society, arousing emotions of any kind, attachment or lack of attachment.

Therefore, the play's main consequence is the development of the autistic child's personality.

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