

## THE DEVELOPMENT OF SOCIAL COMMUNICATION SKILLS THROUGH LEISURE ACTIVITIES FOR AUTISTIC CHILDREN

### Introduction

The leisure activities concept reflects the requisition for special programmes capable of accommodating a multitude of motivations, needs, skills, preferences, aptitudes, and also of intensifying social integration. A complex and systematic programme comprising all the fields of human development must consider the following aspects:

- the targeted group (age, gender, profession, social position);
- the proposed objectives, projected after the identification of the motivation for practising leisure activities (e.g. losing weight, physical or cognitive recovery, rehabilitation, etc.);
- the group type (homogenous, heterogeneous, etc.);
- the relation with the other partners (sports), the morale given by the competition, the adventure, etc.

The motor leisure activities may be organized as follows:

- independent or organised activities;
- individual or group activities;
- in the sports hall, in water or open-air;
- with or without opponents;
- age-related activities (children, teenagers, young people, adults, seniors);
- profession-related activities;
- gender-related activities ;
- related to the degree of severity of the disability (targeted at impaired people).

In the case of recreational activities, sports practice has the purpose of a recreation motor activity, so that it does not entail its being a sports discipline. The practical dimension of the recreational and leisure motor activities is easily accessible when the disability type is observed (gait, slow running, gymnastics, dance, swimming, badminton, tennis, open-air games, ski, hike, trips, mountaineering, etc.

*Recreation entails fun, leisure, walking away from a stressful situation or physical or psychic amelioration. Most leisure professionals prefer the term recreation, as it is what one wants to do and not what one has to do [3].*

### **ASD Student Profile**

According to DSM-IV (Diagnostic and Statistical Manual of Mental Disorder), for a diagnosis of autism, the subject should display: [4]

➤ Decrease in social interaction manifested in at least two of the following aspects:

- significant difficulty in non-verbal behavior (looking in the interlocutor's eyes, facial expression, body posture, absence of gestures usually used in social interaction)

- deficiencies in developing human relationship in accordance with the mental development level;

- lack of spontaneity in expressing joy, interest or sharing achievements to other people;

- lack of emotions or social reciprocity;

➤ Decrease in communication manifested in at least one of the following aspects:

- delay or complete absence of spoken language;

- in the case of the individuals with an adequate language there may occur difficulties in the ability to start conversing with others;

- stereotypical and repetitive language;

- lack of understanding and practising social-imitative games or varied, spontaneous games with reference to abstract conditions.

➤ Limited behaviour patterns, interests and activities, manifested in at least one of the following aspects:

- abnormal, limited interest or focus;

- inflexible adherence to a specific, non-functional ritual, unnatural preoccupation for one or few stereotypical activities, and also unnatural focus on a subject that would not normally require effort;

- stereotypical and repetitive manners;

- assiduous interest in some parts of some objects;

➤ Delays or abnormalities in the case of one of the following areas:

- social interaction;

- language resembling social communication;

- symbolic or abstract-imaginative games;

Symptoms usually occur before the age of three and may be present along the entire life; nevertheless, they may be ameliorated with proper intervention and adequate care. A child with autistic symptoms should be seen by an expert team

made up of a paedo-psychiatrist, a psychologist, a neurologist, a speech therapist and a specialist in education.

### **Psycho-motor specificities of the autistic student**

Psycho-motor education mainly aims at:

- improving body postures and gestures, resulting in a better social interaction;
- cooperating during games;
- acknowledging and representing the emotive expressions;
- searching and recognizing the reference person;
- activating social mutuality (cooperation according to social rules, acknowledging one's belonging to a group);
- reducing the problematic behavior (auto- and hetero-aggressive);
- improving the imitative skills;
- improving self-esteem;
- optimizing the verbal and non-verbal communication;
- becoming acquainted to the corporal scheme;
- improving personal autonomy;
- reducing stereotypes;
- stimulating the psycho-motor skills.

### **Activities to Improve Basic Interpersonal Communication Skills**

- **Pleasure leisure activities** (gaits, visits, art-therapy, melotherapy, etc.)

The physical activity does not entail special efforts and is driven by personal motivation.

- **Socio-cultural leisure activities** (artistic groups, symposia, birthday parties, etc.) This type of leisure activity is balanced in what physical activity and psychic simulation are concerned. Recreational activities are specific to it.

- **Sports and recovery leisure activities** (sport games, running, fitness, Multi-Systemic Therapy in Water, also known as Caputo-Ippolito method);

- **Touristic leisure activities** (hikes, trips, fishing, etc.). In this case, we have to emphasise that physical activity is of the essence. The making-effort capacity should be carefully considered.

### **Art-therapy as leisure activity**

**Art-therapy** expresses, develops, balances, empowers and sensitizes. Moreover, art-therapy is liberating. Freedom gives the autistic person a chance to express himself, to get to know himself, to act free from the restrictions imposed by the other educational therapies. Through games and visual, auditory and kinaesthetic elements, such as dancing, autistic children can express their

sensations and feelings, because the autistic children seem to act under certain stimuli too.

### **Autism and art-therapy**

Art-therapy is a leisure means which gives the person a chance to exteriorize and know oneself. Art-therapy stimulates the psychic development of an individual. It leads to affective unblocking of the autistic child through visual/figurative elements (drawing, painting, pottery, collage, sculpture, dactyl-painting), the gesture and mimicking expressivity (mime, eurhythmics, dancing); stage expressivity (puppet shows, dramatizations).

Through its formative and aesthetic value, art-therapy fulfils one's personality, stimulates ethical behavior and deems the individual socially responsible).

According to Steiner, drawing, painting and eurhythmics are aspects of finesse, by which the educator may subtly notice the children's social and affective issues.

„The graphic gesture, the manner in which the child deals with the white surface, the choice for shapes and places are elements which express his emotional state.” [2]

Figurative language helps the autistic child to express himself much easier than the verbal one, which may well be altogether absent. The colour, the hues, and their combinations define the autistic child's state of mind. Isolated colours may suggest rigidity, fear, and social block. The chaotic mix of colours suggests immaturity and impulsivity in the autistic child. Identifying such behaviour through art-therapy may result in changes at the level of the entire recovery programme.

Another art form by which the autistic child may express himself is melo-therapy, also included in the wider domain of art psychotherapy. Alois Gherguț has a fundamental theory in what the effects of melo-therapy over human psyche are concerned:

„Music is the art of expressing sentiments and ideas with the help of the sounds combined in a specific manner, triggering varied and unexpected affective processes, from musical emotions, with a wide range of manifestations (joy, inner feelings, harmony, spiritual elation) to explosive releases of choleric exaltation.” [1]

To conclude, following the effective application of an educational programme based on leisure motor activities, we have noticed improvement at the communicational, relational, senso-motor, cognitive and behavioural levels.

## REFERENCES:

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### **The Development of Social Communication Skills Through Leisure Activities for Autistic Children**

**Abstract:** *The psychomotor dimension is an optimal way of nonverbal and verbal communication in the social environment for the child with autism. It is recognised that any child coordinates his motor activity in accordance with the mental image of the perceived act. Leisure and recreation activities and also psychomotor therapy facilitates through its integrated programmes, the education of the individual, aiming at knowing one's own body and at the identification of the self. The identification of the self under all its aspects - physical, social or moral-ethical, conscious or unconscious - is the essence of living.*

**Key words:** *autism, leisure programs, social integration, communication.*