

A Play Therapy Approach for Addressing Social Communication and Behavioral Challenges in Children with Autism

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ABSTRACT: This study aimed to explore the lived experiences of Special Education teachers in implementing the play therapy approach to address social communication and behavioral challenges among children with autism spectrum disorder. Using a qualitative phenomenological approach, data were collected through in-depth, semi-structured interviews with five special education teachers who were experts in Play Therapy. Findings revealed that play therapy fostered long-term improvements in social communication, reciprocity, and emotional regulation, with teachers serving as key facilitators who extended therapeutic gains into daily classroom and peer interactions. However, persistent challenges emerged, including limited resources, inadequate training, large class sizes, and insufficient administrative support, underscoring the need for professional development, improved access to materials, reduced teacher-student ratios, and stronger collaboration among stakeholders. The study further emphasized the centrality of interdisciplinary collaboration, identifying five core themes, shared responsibility, integration with individualized education plans (IEPs), collective problem-solving, capacity-building, and sustainability, that highlighted the importance of teamwork and institutional commitment. Insights from teachers' lived experiences reinforced the value of play therapy as a supportive context for communication, confidence-building, and social reciprocity, while stressing the necessity of ethical practices such as confidentiality and respect for individuality. Culminating in the development of the Rebong Teacher-Informed Play Therapy Implementation Framework, the study presented a practical, teacher-grounded guide encompassing assessment, customized interventions, resource support, collaboration, monitoring, and sustainability. Overall, the findings contributed to strengthening the integration of play therapy in special education, ensuring that children with ASD receive holistic, sustained, and ethically grounded support.

KEYWORDS: autism spectrum disorder, behavioral development, challenges, play therapy, special education

INTRODUCTION

Children's play activities fostered the development of fundamental competencies like social communication skills. In action, play therapy offered strategies for therapeutic participation, skill acquisition, and developmental engagement for children diagnosed with autism spectrum disorder (ASD), who struggled with social and interactive engagement challenges. These approaches were gaining recognition for their effectiveness in special education when used within evidence-based frameworks like Play Therapy. Social communicational deficits posed significant challenges for individuals with autism spectrum disorder as it hindered their ability to start and maintain socially reciprocal relationship, read non-verbal communication, and understand reciprocal relationship dynamics. These gaps in social communication skills could hinder one's educational attainment, their ability to integrate socially, and most importantly, their overall life quality. Addressing these challenges in a focused manner posed innovative intervention strategies that were interesting to children and easy to integrate into educational environments (Simacek et al., 2020).

Special education teachers were keys in delivering these interventions in educational contexts. As primary practitioners, they must adapt research-informed strategies to support the learning and development of children with autism spectrum disorder in typical classroom environments. Nonetheless, the successful application of play therapy posed unique knowledge, skill, and strategy requirements that could create barriers for many educators. While there was accumulating evidence in favor of using play therapy for children with autism spectrum disorder, there was little known regarding how special educators understand, implement, and experience these strategies in practice.

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López-Nieto et al 2022 suggested that there were gaps in the literature specifically focusing on developing usable guidelines for clinically based play interventions suitable for educational use. This was especially so at the intersection of play therapy, where the need for structure inherent in behavioral techniques must be balanced with unstructured child-led free play.

Thus, the goal of the current study was to help fill this gap by focusing on special educators' experiences using play therapy to facilitate social communication skills and behavior in children with autism. Informed by the accounts and perspectives of the special educators themselves, this qualitative study also aimed to elucidate the barriers, strategies and outcomes that educators faced in using play for social communication intervention. Through these explorations, this research aimed to inform the development of situation-specific, practical intervention strategies that are easier to adopt into special education classrooms.

This research had importance for a variety of people interested in the field of special education. For practitioners, it highlighted some of the strategies to overcome challenges in using play therapy. For teacher educators, it offered data that could be used for designing professional development and pre-service training programs. For scholars, it added to the understanding of the translation of evidence-based interventions into practice in educational settings. This study importantly focused on children with autism, as it sought to improve the effectiveness of play therapy aimed at enhancing their social communication skills in advocacy, thereby improving educational outcomes and quality of life.

RESEARCH QUESTION

This research intended to determine how special education teachers used play therapy for social communication and behavioral challenges in children with autism spectrum disorder (ASD).

Specifically, this study sought to answer the following questions:

1. What are the long-term effects of play therapy on children with autism spectrum disorder, and how do special education teachers contribute to its implementation?
2. What challenges, resource needs, and recommendations do special education teachers identify in implementing play therapy within special education settings?
3. What core themes emerge from teachers' significant experiences in implementing play therapy through interdisciplinary collaboration?
4. What insights can be drawn from teachers lived experiences in using play therapy to address social communication and behavioral challenges in children with Autism?
5. What framework can be developed from teachers shared experiences and recommendations to enhance the implementation of play therapy for children with Autism?

SCOPE AND LIMITATION OF THE STUDY

This study explored the experiences and perceptions of special education teachers who employed play therapy to support social communication and addressed behavioral challenges in children with autism spectrum disorder (ASD). It specifically focused on teachers as the primary participants, since they served as care coordinators and educational decision-makers in special education settings. The research examined what these teachers conceptualized about play therapy, how they practiced and adapted it, the challenges they faced, and the achievements they gained when implementing this approach. Conducted through a qualitative research design, the study utilized interviews to capture authentic narratives from teachers, thereby generating insights into the realities, strengths, and limitations of play therapy implementation. Ultimately, this focus aimed to provide a deeper understanding of how play therapy could be effectively used to address the unique social communication and behavioral needs of young children with Autism.

The study was limited to special education centers, which provided structured learning environments for children with disabilities, and did not include inclusive classrooms, mainstream schools, or home-based interventions. It targeted teachers lived experiences during a specific timeframe rather than a long-term, longitudinal process. By centering on children with ASD aged two to eight years, the study underscored the critical importance of early intervention. The participants of this study were limited to special education teachers with direct experience in using play therapy for children with autism spectrum disorder (ASD), excluding other professionals such as speech-language pathologists, occupational therapists, and physical therapists, as the focus was on teachers lived experiences as key care coordinators and educational decision-makers. The study was confined to special education centers rather than inclusive classrooms, mainstream schools, or home-based interventions, and targeted children aged two to eight years to emphasize the developmental importance of early intervention, thereby excluding adolescents and young adults with ASD. It examined only play therapies that integrated social communication practices, while other interventions such as speech therapy, occupational therapy, or purely relationship-based approaches were outside the scope. These delimitations sharpened

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the focus on teachers' perspectives within specialized settings, while also limiting the generalizability of findings to broader populations, contexts, or alternative interventions.

RESEARCH DESIGN

The focus of this research captured and described special educators' experiences with implementing play therapy for social communication skills in children with autism spectrum disorder. For this purpose, a qualitative methodology was applied. Qualitative research was appropriate for understanding complex phenomena within their context, and when the researcher intended to uncover participants' meanings of events (Mey, 2022).

This study adopted a qualitative phenomenological approach because its research questions concerned understanding the experiences and views of special educators, not formulating or analyzing specific variables. Singh (2021) made a distinction between experimental study, which incorporated variable manipulation in a controlled setting, and exploratory study, which investigated phenomena that could not be adequately examined through define manipulation. Implementing play therapy was the study's focus, which made it exploratory in nature because it aimed to understand how such approaches were implemented within multidimensional educational settings.

The implementation of educational strategies meant there were many personal meanings, contextual factors, and qualitative adaptations that best captured through inquiry. Qualitative inquiry, as Mey (2022) noted, "works with smaller number of cases, and qualitative analysis allows examining of what matters on a deeper for the individual level, and not from a broader blanket perspective."

DATA GATHERING

Data for this study was gathered through semi-structured interviews with special education teachers. The interviews took place in special education centers in Parañaque. These centers were chosen as the focus of the research due to the availability of integrated programs for children with autism spectrum disorder and the presence of special educators qualified in the use of play therapy for social communication skills advancement. Special education centers included in this study shared several characteristics such as first, they provided specialized educational services specifically designed for children with autism spectrum disorder (ASD) and other developmental disabilities, Second, they employed special education teachers who had training and experience in implementing play therapy. Third, they served children within the early childhood and elementary age range from two to eight years. These settings were ideal for exploring the research questions as they represented context where Play Therapy are regularly implemented as part of educational programming for children with autism spectrum disorder. This research utilized semi-structured interviews in gathering information investigated the experiences of special educators in using play therapy for social communication skills development in children with autism spectrum disorder.

RESULTS

This chapter reports results from a qualitative exploration of the experiences of special educators using play therapy approaches to address social communication and behavioral difficulties in children who have autism spectrum disorder.

Vignettes of the Participants' Background

Participant 1 is a female aged 22–30 years old, holding a bachelor's degree in Special Education. She has 4–7 years of experience in special education and is currently employed in a private school setting. Her experience with play therapy is described as moderate (2–4 years), reflecting familiarity with therapeutic interventions for children with diverse needs.

Participant 2 is a female aged 31–40 years old, holding a master's degree in special education. She has 4–7 years of experience in special education and is currently employed in a public-school setting. While she has not indicated extensive experience with play therapy, her background in special education provides a strong foundation for supporting children with diverse learning needs.

Participant 3 is a female aged 22–30 years old, holding a bachelor's degree in special education. She has 1–3 years of experience in special education and currently works in an inclusive classroom setting. Her experience with play therapy is moderate (2–4 years), allowing her to apply practical strategies while continuing to build expertise in therapeutic interventions for children with diverse learning needs.

Participant 4 is a female aged 22–30 years old, holding a bachelor's degree in special education. She has 1–3 years of experience in special education and is currently employed in an inclusive classroom setting. Her experience with play therapy is

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moderate (2–4 years), equipping her with foundational knowledge and practical skills to support children with diverse learning and developmental needs through structured play interventions.

Participant 5 is a male aged 31–40 years old, holding a bachelor's degree in special education. He has 1–3 years of experience in special education and is currently working in a special education center. His experience with play therapy is moderate (2–4 years), allowing him to apply structured and individualized play-based strategies to support learners with autism and other special needs in developing social, emotional, and cognitive skills.

To anchor this study, the following research questions are established:

Problem 1. What are the long-term effects of play therapy on children with autism spectrum disorder, and how do special education teachers contribute to its implementation?

This study explores the lived experiences of special education teachers in using play therapy to address social communication and behavioral challenges in children with autism. Insights from participants highlighted the importance of collaboration, ethical considerations, and assessment strategies, offering valuable perspectives on how play therapy is practiced and implemented in specialized educational settings.

Teachers consistently emphasized that symbolic play, art, and sand tray therapy provide “safe and creative ways” for children with autism spectrum disorder to express themselves and practice interaction (Participant 1, Participant 2). Symbolic play “builds empathy and social understanding through role-play,” while art therapy “encourages communication and turn-taking,” and sand tray therapy “supports storytelling, perspective-taking, and empathy” (Participant 2, Participant 4). One participant highlighted that such therapies involve “teamwork and dual activities that build children’s trust in other peers” (Participant 3). Over time, these approaches foster “better empathy, cooperation, and interpretation of social cues” (Participant 5), leading to lasting improvements in social communication and relationships.

The teachers’ observations of lasting improvements in social communication and relationships through play therapy align closely with current research on structured and peer-mediated interventions. For example, Guralnick emphasized that structured play settings provide opportunities to practice social norms such as sharing, cooperation, and turn-taking within a controlled environment. Both studies highlight that consistent engagement in structured play promotes long-term improvements in social adaptability and relationship-building. These findings corroborate the teachers’ experiences, showing that symbolic play, art therapy, and sand tray activities not only encourage emotional expression and cooperation but also facilitate enduring gains in social communication and peer relationships among children with spectrum disorder.

Building on these observations, all participants agreed that the long-term effects of play therapy differ depending on the severity of Autism. According to one teacher, “children with mild to moderate ASD often show greater improvements...while those with severe ASD may progress more slowly” (Participant 1). Another explained that children with milder symptoms “show faster and more noticeable improvements in social and communication skills,” whereas those with more severe autism “may progress more slowly due to greater challenges but can still benefit with consistent, individualized support” (Participant 2). Others echoed this, noting that the activities and challenges must be modified since “progress may be slower and more limited” for severe cases (Participant 3, Participant 4, Participant 5). Still, all agreed that tailored interventions provide meaningful benefits across severity levels.

These observations are supported by Elbeltagi et al. (2023), who found that structured play interventions incorporating turn-taking and role-playing significantly improved children’s ability to engage in reciprocal social interactions. Their study highlighted that children participating in structured play sessions showed greater responsiveness to social cues, improved conversational exchanges, and increased engagement in group activities. By providing clear social roles and predictable play scenarios, structured play acts as a bridge between therapeutic interventions and real-world social interactions, enabling children across the spectrum to develop social skills that transfer to everyday situations. Thus, both teacher experiences and research evidence indicate that tailoring play therapy to individual needs, whether through adjusting complexity, structure, or support, ensures meaningful gains for children with autism across different severity levels. These interventions not only foster immediate engagement but also facilitate the development of practical social skills that extend beyond the therapy setting.

In addition to recognizing progress differences, participants highlighted that sustaining the gains of play therapy requires “parent and teacher involvement, integrating skills into daily routines, providing regular follow-ups, and using individualized plans” (Participant 1). Another stressed the importance of practicing skills at home, participating in social groups, and scheduling “booster sessions with the therapist” (Participant 2). Teachers also emphasized “consistent reinforcement at home and school,” where parents and teachers use the same techniques as “praising turn-taking, encouraging eye contact, or labeling emotions” (Participant 4). Others pointed to the importance of creating regular opportunities for social interaction and ensuring “ongoing

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support, praise, and consistency” across settings (Participant 5). These strategies, according to participants, help ensure that social and behavioral improvements are not only achieved but sustained over time.

These practical insights are supported by Korte et al. (2022), who investigated Pivotal Response Training (PRT) within structured play environments for children with autism spectrum disorder (ASD). Their study demonstrated that structured play incorporating PRT techniques significantly improved verbal communication and social responsiveness. By focusing on child choice and motivation through structured activities, children were able to initiate spontaneous language use and sustain interactions with peers and adults. The study highlighted that structured play provides a meaningful and controlled context for practicing communication and social skills, which supports the long-term maintenance of gains in social and behavioral development. Thus, both teacher experiences and research evidence underscore that integrating structured, individualized play interventions with ongoing reinforcement and family involvement creates the conditions necessary for children with ASD to achieve meaningful social and behavioral improvements that are sustained over time.

The findings reveal that play therapy, particularly symbolic play, art therapy, and sand tray activities, serves as a powerful tool in enhancing social communication skills among children with autism spectrum disorder (ASD). Teachers described these approaches as “safe and creative ways” for children to engage, noting that role-play and art-based activities help foster empathy, cooperation, and the ability to interpret social cues. However, the long-term effects of play therapy were found to vary according to the severity of autism. Children with mild to moderate ASD demonstrated faster and more noticeable improvements in social interaction and communication, while those with more severe symptoms benefited more gradually, requiring modified approaches and consistent individualized support. Despite these differences, teachers stressed that all children show meaningful progress when therapy is sustained over time. To maintain these gains, participants highlighted the importance of parent and teacher collaboration, consistent reinforcement across home and school environments, and regular follow-up sessions or booster activities. By embedding therapeutic skills into daily routines and social contexts, the long-term impact of play therapy can be maximized, ensuring that improvements in social communication and behavior are not only achieved but also sustained.

Equally important was the emphasis on collaboration. Teachers emphasized teamwork with parents and therapists as vital to student growth. One shared, “Effective collaboration... can be achieved through regular communication, shared goal setting and coordinated planning” (Participant 1). Another added, “I collaborate with therapists and parents by maintaining open communication, sharing observations, and aligning strategies across settings” (Participant 2). Others highlighted practical tools like IEPs and progress reports: “I provide progress reports, Individualized Education Plan, and weekly meetings with my parents on scheduled” (Participant 3). Similarly, “By working closely with parents, I can reinforce therapy goals at school and support families in continuing skill development at home” (Participant 4). For many, consistency across environments was key: “Working together as a team ensures the child gets consistent support across school, therapy, and home” (Participant 5).

These observations align with findings from Maseri et al. (2021), who investigated touchscreen-based play interventions for children with autism spectrum disorder (ASD). Their study demonstrated that interactive tablet games encourage children to collaborate, share, and communicate with peers, highlighting how technology-mediated play can foster cooperative behaviors. The study also found that structured digital play helped children generalize communication skills from the tablet to real-world interactions, reinforcing the importance of integrating collaborative and engaging tools within therapy. Together, both teacher experiences and research evidence underscore that collaboration, whether among professionals or facilitated through interactive play, enhances social interaction and supports meaningful skill development for children with ASD.

Furthermore, participants described their role in enriching the team’s understanding of play therapy. As one noted, “I contribute... by sharing classroom observations and insights on student behavior and engagement” (Participant 1). Another emphasized, “I can support... by sharing how students engage in play-based activities... and suggest ways to incorporate play therapy techniques into daily routines” (Participant 2). A practical approach was shared by another: “I provide crash course regarding play therapy and simulation” (Participant 3). Others highlighted connecting therapy to academics: “I can provide insights into each child’s individual learning style, triggers, and strengths... bridging educational goals with therapeutic techniques” (Participant 4). A final reflection added, “I can contribute by sharing how play therapy supports learning and behavior in the classroom” (Participant 5).

These insights align with Lee et al. (2021), who analyzed the effects of early play interventions on social cognition in children with autism spectrum disorder (ASD). Their study demonstrated that structured play activities, particularly guided role-playing and cooperative games, significantly improved children’s ability to understand and interpret social cues. By creating safe and supportive environments for practicing social scenarios, structured play interventions not only enhanced immediate peer interactions but also contributed to long-term social development. Similarly, the participants’ reflections highlight that teachers play a crucial role in interpreting children’s engagement, offering practical recommendations, and ensuring that therapeutic

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strategies are meaningfully integrated into daily classroom practices. Both research evidence and teacher experiences underscore that collaboration and shared understanding among the educational team enhance the effectiveness and sustainability of play therapy interventions for children with ASD.

Alongside collaboration, ethical considerations were also stressed. The teachers highlighted confidentiality, consent, and respect as guiding principles. One said, "It is important to consider ethics such as obtaining informed consent, maintaining confidentiality, respecting each child's individuality and sensory needs, and being culturally sensitive" (Participant 1). Another echoed, "Therapy should be adapted to each child's individual needs... always protect the child's privacy" (Participant 2). A brief but clear reminder was given: "Confidentiality and professionalism" (Participant 3). Others emphasized safety and dignity: "Consent should be obtained... and the child's comfort, boundaries, and communication preferences must be respected" (Participant 4). A final note added, "I must respect each child's individual needs, privacy, and pace... always create a safe, non-judgmental space" (Participant 5).

These insights align with Gibson et al. (2021), who explored the impact of structured play therapy on social language skills in preschool children with autism spectrum disorder (ASD). Their study highlighted that structured play sessions create a supportive environment where children can practice verbal communication and social interactions in a guided, safe, and engaging manner. By emphasizing consent, confidentiality, and individualized support, structured play ensures that children can explore social language skills without compromising their comfort or autonomy. Both the participants' reflections and Gibson et al.'s findings reinforce that ethical adherence is not only a professional responsibility but also a key factor in maximizing the therapeutic benefits of play, fostering trust, and promoting effective social and language development in children with ASD.

Finally, the importance of monitoring and evaluation emerged. Participants agreed on blending multiple methods to track progress. One teacher said, "I would use a combination of observational tools, standardized assessments, and play-based evaluations" (Participant 1). Another listed specific: "Structured observation checklists... standardized rating scales... and play-based assessments like the Test of Playfulness" (Participant 2). Practical tracking was also mentioned: "Son-Rise Developments Model" (Participant 3). A detailed approach came from another: "I would use a combination of observational checklists, behavior rating scales, and progress notes based on individualized goals" (Participant 4). This was reinforced by, "I'll also gather feedback from parents, therapists, and the child to see real-life changes in social skills and behavior over time" (Participant 5).

These reflections align with Wang et al. (2022), who examined Naturalistic Developmental Behavioral Interventions (NDBIs) in unstructured play settings for children with autism. Their study demonstrated that child-led and naturalistic play facilitated greater social engagement, turn-taking, imitation, and spontaneous communication, which were critical for enhancing peer interactions in real-world contexts. Just as the study highlighted the benefits of monitoring child-led play to guide interventions, the participants underscored that systematic observation, evaluation, and feedback are essential to adapt strategies, ensure progress, and reinforce social-communicative skills. Both perspectives confirm that effective play therapy relies not only on structured or naturalistic approaches but also on ongoing, evidence-informed monitoring to optimize outcomes for children with autism spectrum disorder (ASD).

Problem 2. What challenges, resource needs, and recommendations do special education teachers identify in implementing play therapy within special education settings?

Special education teachers highlight several challenges in implementing play therapy, including limited materials, inadequate training, and time constraints that hinder consistent application. They emphasize the need for resources such as specialized play tools, dedicated spaces, and ongoing professional development to strengthen their capacity. Alongside these needs, teachers recommend greater institutional support, structured frameworks, and collaborative practices to enhance the effectiveness and sustainability of play therapy within special education settings.

The experiences of special education teachers revealed both the potential and the challenges of using play therapy with children on the autism spectrum. One of the most prominent issues raised was the difficulty of implementation due to systemic and individual barriers. As one participant explained, play therapy is hindered by the "limitation of resources, lack of support, and difficulty in evaluating real progress" (Participant 1). This was echoed by another, who emphasized the challenge of addressing "diverse needs and communication difficulties" (Participant 2). Teachers noted that tailoring interventions to children's unique sensory sensitivities and communication levels is both essential and "demanding and time-consuming" (Participant 4).

These practical challenges align with findings by Simacek et al. (2020), who noted that addressing the unique needs of children with autism requires play-based interventions that are not only engaging and motivating but also easy to integrate into educational environments. Their study emphasized that interventions should balance therapeutic goals with flexibility, ensuring they capture children's attention while remaining feasible for teachers to implement. Similarly, participants stressed the importance of tailoring play activities to individual developmental levels, interests, and communication abilities, suggesting that

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individualized and inclusive strategies are key to overcoming common barriers. Both perspectives highlight that overcoming these challenges requires thoughtful design of play interventions that are enjoyable, accessible, and sensitive to each child's abilities and environment.

Resource limitations emerged as a particularly consistent theme across participants. Several teachers noted shortages of therapeutic toys, safe play spaces, and professional support, which compromise the sustainability of play therapy. One explained that "insufficient therapeutic materials, lack of dedicated space, and limited staffing" made implementation difficult (Participant 1), while another added that there was a "lack of appropriate toys, shared spaces, and financial constraints" (Participant 2). Another participant reinforced this point with lived experience: "I've experienced limited access to therapy materials, dedicated play spaces, and trained staff" (Participant 5).

These observations align with López-Nieto et al. (2022), who argue that there is a critical gap in the literature regarding usable, educationally applicable guidelines for clinically based play interventions. They highlighted the challenge of balancing structured behavioral techniques with unstructured, child-led play, emphasizing the need for practical, resource-conscious approaches suitable for school settings. Both the participants' experiences and the literature suggest that overcoming resource limitations require creative adaptation of materials, clear implementation guidelines, and training for educators to maximize the therapeutic value of available tools while maintaining developmental and therapeutic goals.

Time constraints also posed a significant challenge, with teachers explaining that therapy often had to be shortened or deprioritized due to packed school schedules. "Time constraints significantly affect implementation by limiting the duration and frequency of sessions, which hinders therapeutic progress" (Participant 1), explained one teacher, while another noted that "packed school schedules and multiple responsibilities make sessions shorter or less frequent, delaying progress" (Participant 2). The impact extended to the therapeutic relationship itself, as another teacher stressed that "time constraints make it hard to have consistent, unhurried sessions, which are key for building trust and seeing real progress" (Participant 5).

These observations are supported by Zhang et al. (2022), who emphasized the benefits of guided peer-mediated structured play in promoting social engagement and foundational communication skills. Guralnick also highlighted that structured play settings provide children with opportunities to practice social norms like sharing and cooperation in a controlled environment. Both studies underline that consistent and frequent exposure to structured play activities is crucial for achieving lasting improvements in social adaptability. Therefore, time limitations in educational settings pose a significant barrier, highlighting the need for careful scheduling, integration of play therapy into daily routines, and creative strategies to maximize limited session time while maintaining therapeutic outcomes.

Beyond logistical issues, misconceptions about play therapy were also a recurring concern. Some parents and colleagues saw it as "just playing and lacking structure or goals", while others expected "fast results" (Participant 1). Another participant noted that some parents considered play therapy ineffective because "it's only useful for minor issues" or they expected immediate outcomes (Participant 2). One teacher even admitted frustration that parents sometimes think "it's a waste of time because it does not make them improve academically" (Participant 3). These misconceptions underscore the need for awareness campaigns and stronger advocacy about the therapeutic value of play.

These insights align with Ki & Chung (2023), who demonstrated that child-directed play therapy, where children have autonomy in selecting activities, promotes higher engagement and reciprocal interactions. Their study highlighted that unstructured play allows children to self-regulate and develop confidence in social settings, challenging the misconception that therapy must be overly structured to be effective. Both the participants' experiences and the study findings underscore the importance of educating stakeholders about the nuanced, evidence-based nature of play therapy, emphasizing that therapeutic goals can be met while still providing children with opportunities for choice, creativity, and self-expression.

Despite these challenges, teachers highlighted the skills and qualities that make play therapy effective. One explained that the approach requires "empathy, knowledge, creativity, and cultural competence" (Participant 1). Another emphasized "communication, active listening, observation skills, and cultural sensitivity" (Participant 2), while a third underscored "patience, empathy, creativity, and strong observation abilities" (Participant 4). For some, this came down to the simple but vital capacity to "read nonverbal cues" and meet children where they are (Participant 5). These accounts highlight the combination of professional expertise and personal attributes that teachers must cultivate.

These insights are supported by Atherton & Cross (2021), who demonstrated that integrating digital play, such as interactive applications and virtual reality games, enhances joint attention, turn-taking, and verbal interactions among children with autism spectrum disorder (ASD). The study noted that structured, yet flexible digital environments allow children to practice social communication in a low-pressure, motivating setting. Both the participants' experiences and the study findings underscore

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that successful play therapy hinges not only on the methods used but also on the educator's ability to create a supportive, responsive, and adaptive environment that meets each child's needs while fostering engagement and skill development.

To strengthen their skills, participants agreed that specialized training is essential. One recommended "formal education, supervised clinical experience, and ongoing professional development" (Participant 1), while another pointed to the importance of "specialized training in autism spectrum disorder, trauma-informed care, and sensory integration" (Participant 2). Others suggested more specific frameworks, such as "child-centered play therapy, DIR/Floor time, and ABA certifications" (Participant 4). A participant summarized the need for broad preparation: "Training in child development, autism spectrum disorders, counseling techniques, and play therapy certifications" is necessary to effectively support children with ASD (Participant 5).

Walsh et al. (2024) support this perspective, demonstrating that gamified social training applications improve peer interactions, conversational skills, and emotional recognition among children with ASD. The study highlighted that structured digital play, when guided by trained educators, fosters engagement, motivation, and safe practice of social interactions, which children can then transfer to real-life situations. Both the participants' reflections and the study findings underscore that specialized training equips educators to leverage structured play and technology-enhanced interventions effectively, enhancing social communication outcomes and providing a robust support system in Special Education classrooms.

Teachers also proposed refinements to play therapy practice itself. One emphasized "individualizing sessions, integrating social skills training, and collaborating with parents" (Participant 1). Another recommended "more structured, goal-oriented play activities" (Participant 2), while a third suggested practical tools such as "peer modeling, visual supports, and structured social games" (Participant 4). Another reinforced the child-centered approach, stating that sessions should "use the child's interests, incorporate visual supports, and involve parents and therapists" (Participant 5).

Zhang et al. (2022) support this approach, showing that peer-mediated structured play enhances social engagement and fosters reciprocal interactions. By pairing children with trained peers, the study demonstrated that guided play interventions help children develop foundational communication skills and improve social interaction outcomes. Both the participants' experiences and the research findings highlight that refining play therapy, through observation, peer mediation, and tailored adjustments, ensures interventions remain effective, dynamic, and responsive to each child's growth.

When asked what advice they would give fellow educators, participants returned to themes of patience, collaboration, and flexibility. One explained the importance of "following the child's interests, setting clear learning goals, and involving families for consistency" (Participant 1). Another stressed "understanding each child's needs, creating structured environments, and collaborating with parents and professionals" (Participant 2). A different teacher offered a practical reminder to "be flexible on changes but firm on boundaries" (Participant 3). As one concluded, "let the child lead, collaborate with parents, and remember, small steps can lead to big progress" (Participant 5).

Wilson (2020) supports this approach, showing that unstructured, child-led play fosters spontaneous interactions, eye contact, shared attention, and reciprocal exchanges among children with autism spectrum disorder. The study highlighted that giving children the freedom to choose activities reduces anxiety, increases motivation, and provides a naturalistic environment for developing social communication skills. Together, the participants' experiences and the research findings suggest that effective advice for play therapy includes fostering autonomy, offering gentle guidance, and creating flexible, supportive play environments that enhance social learning.

Despite the many obstacles, teachers affirmed the effectiveness of play therapy. One observed that it provides "a comfortable, low-pressure way to develop social communication and behavior" (Participant 1). Another explained that it helps children "practice important social skills such as eye contact, turn-taking, and emotional regulation in a safe, low-pressure environment" (Participant 2). A third added that play therapy "uses a child's natural way of learning through play to build trust and teach key skills" (Participant 4). Another summarized its impact by stressing that "it helps them build trust, practice social skills, and manage emotions in a safe, supportive space" (Participant 5).

Ki & Chung (2023) support these observations, showing that child-led, unstructured play significantly improves conversational reciprocity and engagement among children with ASD. The study revealed that granting autonomy in play allows children to develop confidence, self-regulation, and social skills in naturalistic settings. Together, the participants' experiences and the research findings validate that play therapy, especially when child-directed, serves as an effective intervention for enhancing social communication and confidence in children with autism spectrum disorder.

Finally, teachers offered reflections that reveal the deeper meaning of their work. One acknowledged that "progress is not always linear, so patience and consistency are key" (Participant 1). Another highlighted the relational aspect of therapy, explaining that "building a strong, trusting relationship with the child before focusing on goals" is crucial (Participant 2). For another, the small moments carried the most meaning: "Documenting small successes, like eye contact or a shared smile, helps

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track meaningful progress" (Participant 4). As one teacher summarized, "it's not just the toys or techniques, it is the relationship built through play that makes the biggest difference" (Participant 5).

Elbeltagi et al. (2023) corroborate these observations, showing that structured play routines, including turn-taking and role-playing, foster social reciprocity, responsiveness to social cues, and engagement in group activities among children with ASD. The study emphasized that structured play provides predictable social scenarios, bridging therapeutic practice and real-world interactions. Together, participants' experiences and the research confirm that play therapy contributes to meaningful progress and sustainable improvements in children's social communication and interaction skills.

The study concludes that play therapy serves as an effective approach in addressing the social communication and behavioral challenges of children with autism spectrum disorder by fostering trust, interaction, and emotional growth. While special education teachers recognize its benefits in enhancing relationships and social skills, they also face barriers such as limited resources, lack of training, and insufficient institutional support. These findings underscore the need for structured programs, professional development, and stronger collaboration among stakeholders to maximize the potential of play therapy and ensure its sustainable integration within special education settings.

Problem 3. What core themes emerge from teachers' significant experiences in implementing play therapy through interdisciplinary collaboration?

This section presents the themes that emerged from participants' responses, showing patterns, commonalities, and significant ideas that reflect their shared experiences.

Table 1. Key themes and subthemes of the lived experiences of special education teachers in implementing play therapy

Theme	Subtheme	Evidence
1. Individualized and Inclusive Practices	Tailoring to individual needs	P2: "activities should be tailored to each child's developmental level, interests, and communication needs." P4: "One of the most significant challenges... is addressing the diverse needs and responses of children with autism spectrum disorder."
	Supporting emotional expression	P1: "different play types help children express emotions, develop communication, improve emotional regulation." P4: "encourages emotional expression and social understanding without needing strong verbal skills."
	Emotional regulation through play	P1: play therapy "helps children... improve emotional regulation." P4: "children express emotions and develop social understanding without needing strong verbal skills."
	Addressing ASD's heterogeneous nature	P2: "each child may have different sensory sensitivities, communication levels, and emotional readiness." P4: "addressing the diverse needs... is one of the most significant challenges."
	Relationship-building as foundation	P4: "children with autism often need time to feel safe and connected before they fully engage in therapeutic play." P1: emphasized that rapport is "just as important as the activities themselves."
2. Structured yet Flexible Interventions	Clear therapeutic goals	P1: "Play therapy provides a structured yet flexible environment where children can express themselves, work through emotions, and practice social interactions." P2: stressed purposeful implementation with "clear objectives."
	Balance of structure and play	P1: "structured yet flexible environment" supports both therapy and engagement. P2: recognized need to balance clear goals with engaging, natural play.
	Integration of behavioral principles	P1: play therapy allows children to "practice social interactions in a safe [environment]." P2: effective sessions "require clear objectives while maintaining engaging, natural qualities."
	Fostering safe social interaction	P1: "children... practice social interactions in a safe [environment]." P4: "building rapport is just as important as the activities themselves."
	Adaptability to individual responses	P4: "addressing the diverse needs and responses... each child may have different sensitivities."

		P2: "activities should be tailored to each child's developmental level."
3. Supportive Environment and Resources	Sensory accommodations	P2: "Sensory accommodations, such as quiet spaces or sensory tools, make the setting more comfortable." P1: recommended "designing environments with minimal visual and auditory distractions."
	Use of visual aids	P2: "Visual aids like picture schedules and emotion cards can enhance understanding." P2: "structured; low-stimulation environment helps reduce anxiety."
	Environmental design	P1: "The playroom environment should be designed with minimal visual and auditory distractions by using soft lighting, neutral or pastel colors, and limiting clutter." P2: noted need for "structured; low-stimulation environment."
	Resource limitations	P2: "limited resources, and communication difficulties can affect effectiveness." P2: "lack of understanding or support from others may also hinder implementation."
	Time constraints	P2: "Time constraints can greatly hinder the effective delivery of play therapy." P2: "With packed school schedules and multiple responsibilities, sessions may be shorter or less frequent than needed."
4. Collaboration and Professional Competence	Collaboration with parents	P2: "I collaborate with therapists and parents by maintaining open communication, sharing observations, and aligning strategies across settings." P1: noted that consistency across settings improves intervention effectiveness.
	Collaboration with therapists	P2: emphasized alignment with "therapists and parents by maintaining open communication." P4: collaboration "ensures consistency and maximizes effectiveness."
	Importance of communication	P2: "Conducting play therapy requires strong communication... to build trust with children and work effectively with families." P2: also stressed "active listening" as key.
	Empathy and listening skills	P2: "requires... empathy, and active listening." P4: highlighted "building rapport" as equally important as therapy activities.
	Ongoing professional training	P2: identified "specific competencies required for effective implementation." P4: stressed that "skills form the foundation for therapeutic relationships."
5. Monitoring, Ethics, and Long-term Impact	Monitoring progress	P2: "effective play therapy requires clear objectives while maintaining engaging, natural qualities."
		P1: observed children's progress in communication and behavior.
	Ethical considerations	P2: stressed confidentiality and child privacy.
	Confidentiality in practice	Teachers emphasized "protecting child's privacy and confidentiality." P2: noted importance of ethical care in therapy.
	Long-term social skill development	Teachers observed improvements in "reciprocal interaction, eye contact, understanding social cues, and following instructions." P4: noted positive "long-term effects on social communication and behavior."
	Sustained behavioral improvements	P1: "different play types... improve emotional regulation." P4: "significant improvements in social communication and behavioral development."

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Theme 1: Individualized and Inclusive Practices

Special education teachers emphasized tailoring play therapy to each child's developmental level, interests, and communication needs. They highlighted its role in promoting emotional expression, regulation, and social understanding, reflecting a client-centered and inclusive approach.

Subtheme 1. Tailoring to Individual Needs

Teachers recognize autism's heterogeneity and emphasize flexible, child-centered interventions. Tailored activities address each child's developmental level, communication ability, interests, and sensory sensitivities, ensuring that every child can meaningfully engage in therapy.

Participant 2 emphasized that "activities should be tailored to each child's developmental level, interests, and communication needs." Similarly, Participant 4 shared that "one of the most significant challenges... is addressing the diverse needs and responses of children with autism spectrum disorder." These insights highlight the necessity of personalization in play therapy. For children with ASD, developmental variation is wide, so interventions must consider differences in communication skills, sensory thresholds, and learning styles. Teachers act as both facilitators and adaptors, ensuring that therapy is not rigid but responsive to individual developmental profiles. This aligns with inclusive education principles that stress equity through adaptation rather than uniformity.

This aligns with the study of Elbeltagi et al. (2023) that emphasizes the importance of tailoring structured play interventions to each child's developmental profile. Their study demonstrated that routines incorporating turn-taking and role-playing significantly enhanced children's reciprocal social interactions. Children participating in these tailored sessions showed greater responsiveness to social cues, improved conversational exchanges, and increased engagement in group activities. The researchers highlighted that providing clear social roles and predictable play scenarios allows children with autism spectrum disorder to practice and generalize social skills from the therapeutic setting to real-world interactions. This evidence supports the principle that individualized, structured play interventions are most effective when designed to meet each child's unique abilities, interests, and social needs.

Subtheme 2. Supporting Emotional Expression

Play therapy serves as a non-verbal medium through which children can express feelings, convey thoughts, and interact socially. Teachers note that it is especially valuable for children with limited verbal abilities, enabling communication in a safe, creative context.

According to Participant 1, "different play types help children express emotions, develop communication, improve emotional regulation." Likewise, Participant 4 explained that play therapy "encourages emotional expression and social understanding without needing strong verbal skills." These responses illustrate how play provides children with ASD alternative modes of expression beyond spoken language. Emotional expression through symbolic play, role-play, or sensory play fosters not only self-awareness but also peer interaction. For children who struggle with verbalization, such opportunities become crucial for bridging emotional gaps and fostering social-emotional learning.

Walsh et al. (2024) highlight how play-based digital interventions can facilitate emotional expression in children with autism spectrum disorder (ASD). Their study found that gamified social skills applications improved both conversational abilities and emotional recognition, offering children a safe and engaging platform to practice expressing feelings. Teachers reported that the interactive nature of gamification increased motivation and participation, making social learning enjoyable and less intimidating. By allowing children to explore emotions and social interactions in a risk-free environment, these structured digital play activities provide opportunities for children with ASD to develop meaningful emotional communication skills. The findings underscore the value of integrating playful, technology-enhanced approaches into therapy to support emotional expression and social development.

Subtheme 3. Emotional Regulation through Play

Teachers consistently observe that children improve their ability to manage emotions during play. By providing opportunities to explore, act out, and respond to scenarios, play therapy supports both behavioral control and the development of social competence.

Participant 1 noted that play therapy "helps children... improve emotional regulation," while Participant 4 observed that "children express emotions and develop social understanding without needing strong verbal skills." Emotional regulation is one of the most reported challenges among children with ASD. Teachers' emphasis on play as a regulatory tool demonstrates their understanding that therapy must go beyond academic outcomes to encompass affective growth. Play provides a safe, low-pressure space where children learn coping strategies for stress, frustration, and anxiety, helping prepare them for real-world interactions.

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Lee et al. (2021) demonstrated that structured play interventions, such as guided role-playing and cooperative games, can support emotional regulation in children with autism spectrum disorder (ASD). The study found that children participating in these activities showed greater responsiveness to social gestures, improved emotional recognition, and an increased willingness to engage with peers. By providing a safe and supportive environment, structured play allows children to practice managing emotions and navigating social scenarios without fear or stress. These findings highlight that play not only enhances immediate social and emotional interactions but also contributes to long-term social and emotional development, reinforcing its role as a key strategy for promoting emotional regulation in children with ASD.

Subtheme 4. Addressing ASD's Heterogeneous Nature

Children with autism vary in sensory sensitivity, emotional readiness, and communication skills. Teachers adapt interventions to meet these diverse needs, demonstrating flexibility, careful observation, and responsiveness to individual differences.

Participant 2 stated, "each child may have different sensory sensitivities, communication levels, and emotional readiness." Participant 4 reinforced this point, noting that "addressing the diverse needs... is one of the most significant challenges." These reflections reinforce the idea that no single therapeutic approach can be universally applied in ASD contexts. Teachers constantly navigate differences in readiness and responsiveness, which requires professional flexibility. The heterogeneity of ASD means that interventions must be iterative and experimental, guided by ongoing observations rather than static plans.

Wilson (2020) highlighted that unstructured, child-led play provides a flexible approach to address the heterogeneous needs of children with autism spectrum disorder (ASD). The study found that when children were given autonomy to choose activities, they engaged more frequently in eye contact, shared attention, and reciprocal social interactions. By allowing spontaneous interactions without rigid constraints, unstructured play creates a naturalistic learning environment that accommodates diverse developmental levels, communication styles, and emotional readiness. Moreover, children exhibited reduced anxiety and greater motivation to interact with peers, demonstrating that individualized, flexible play settings can effectively support social communication and adapt to the varied strengths and challenges characteristic of ASD.

Subtheme 5. Relationship-Building as Foundation

Establishing trust and rapport is essential for successful play therapy. Teachers emphasize that children must feel safe and connected before fully engaging, and that meaningful relationships enhance participation and learning.

Participant 4 explained that "children with autism often need time to feel safe and connected before they fully engage in therapeutic play." Participant 1 agreed, emphasizing that rapport is "just as important as the activities themselves." Establishing trust is an essential precondition for therapeutic success. Teachers acknowledge that children with ASD may resist or disengage from unfamiliar activities unless they feel emotionally secure. Relationship-building, therefore, serves as the foundation for therapy, echoing trauma-informed and child-centered educational approaches.

Guralnick (2022) emphasized that structured play settings provide essential opportunities for children with autism spectrum disorder (ASD) to practice social norms, including sharing, turn-taking, and cooperation, within a controlled and supportive environment. The study noted that consistent participation in structured play activities fosters trust, comfort, and familiarity, which are crucial for forming meaningful peer relationships. Over time, these repeated interactions contribute to long-term improvements in social adaptability and relational skills. These findings underscore the importance of incorporating structured peer-mediated play in early intervention programs, highlighting that relationship-building forms the foundation for effective social communication and broader developmental progress in children with ASD.

This theme highlights that teachers recognize that effective play therapy requires tailoring interventions to each child's unique needs, building relationships, and providing opportunities for emotional expression and regulation. Individualized approaches ensure that children with autism spectrum disorder (ASD) can meaningfully engage in therapy and experience developmental growth.

Theme 2. Structured yet Flexible Interventions

Teachers stressed the importance of balancing purposeful goals with flexibility. Play therapy was described as structured enough to support progress while remaining adaptable to children's natural play styles, ensuring both therapeutic direction and child engagement.

Subtheme 6. Clear Therapeutic Goals

Teachers highlight the importance of defining objectives for each session. Clear goals guide activities while still allowing room for child-led exploration and creativity, ensuring therapy is purposeful yet engaging.

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Participant 1 highlighted that “play therapy provides a structured yet flexible environment where children can express themselves, work through emotions, and practice social interactions.” Participant 2 emphasized the importance of “clear objectives.” Teachers stress that while play is naturally exploratory, therapeutic play must be intentional. Clear goals ensure that sessions are not just recreational but directed toward developmental progress. This mirrors evidence-based practices that integrate individualized education plan (IEP) objectives into daily activities.

Gibson et al. (2021) highlighted that structured play therapy offers a purposeful and goal-oriented framework for enhancing social language skills in preschool children with autism spectrum disorder (ASD). Their study found that guided play sessions, including scripted interactions, significantly improved children’s verbal communication, such as initiating greetings and making requests. Beyond immediate language gains, structured play supported children in maintaining conversations with peers, demonstrating the value of clear objectives in guiding therapeutic activities. These findings emphasize that well-defined goals within play therapy not only facilitate skill development but also provide a safe, engaging environment where children can practice and refine essential social communication abilities.

Subtheme 7. Balance of Structure and Play

A structured framework provides direction and scaffolding, while flexibility maintains children’s interest and motivation. This balance enables both skill development and enjoyment of the therapy process.

Participant 1 described play therapy as a “structured yet flexible environment.” Participant 2 added that there must be a balance between “clear goals with engaging, natural play.” This balance reflects the dual roles of special educators: ensuring that children experience freedom to explore while embedding learning targets within that freedom. Over-structuring risks reducing motivation, while under-structuring risks losing therapeutic intent. The teacher’s task is to navigate this delicate middle ground.

Gibson et al. (2021) emphasized that effective play therapy balances structured guidance with opportunities for child-led engagement. Their study on preschool children with autism spectrum disorder (ASD) demonstrated that while structured, scripted interactions improved social greetings, requests, and conversational skills, maintaining flexibility within sessions allowed children to explore and practice language naturally. This balance ensures that therapeutic objectives are met while keeping children motivated and engaged, highlighting the importance of combining clear structure with playful, responsive interactions to foster meaningful social communication and learning.

Subtheme 8. Integration of Behavioral Principles

Teachers incorporate behavioral strategies into play, such as turn-taking, reinforcement, and social modeling. This integration allows children to practice desired skills in natural, enjoyable contexts, bridging therapy with real-life social interactions.

Participant 1 explained that play therapy allows children to “practice social interactions in a safe [environment].” Participant 2 added that sessions “require clear objectives while maintaining engaging, natural qualities.” Teachers show awareness of integrating behavioral strategies, such as reinforcement and modeling, into play. This reflects applied behavior analysis (ABA) principles, but in a less rigid, more child-led manner. Play thus becomes a bridge between structured intervention and natural interaction.

Wang et al. (2022) highlighted the effectiveness of blending behavioral strategies with child-led play through Naturalistic Developmental Behavior Interventions (NDBIs). Their study showed that children with autism participating in unstructured play engaged more in shared activities, turn-taking, and imitation of social behaviors, leading to improved social engagement and language use. By incorporating naturalistic elements alongside behavioral principles, play therapy encourages spontaneous communication that generalizes to everyday peer interactions. This approach demonstrates how integrating evidence-based behavioral strategies within flexible, play-based contexts can enhance social communication and provide meaningful skill development for children with autism spectrum disorder.

Subtheme 9. Fostering Safe Social Interaction

Play therapy settings are designed to be secure and relational, providing children with confidence to engage socially. Teachers emphasize that safety and emotional support are key to encouraging risk-taking and participation.

Participant 1 noted that play therapy helps children “practice social interactions in a safe [environment].” Participant 4 reinforced this by stating that “building rapport is just as important as the activities themselves.” Teachers identify play spaces as both protective and enabling environments. Safety in this context is not just physical but also emotional, children are encouraged to attempt social risk-taking, like eye contact or turn-taking, without fear of judgment.

Hijab et al. (2025) demonstrated that natural, unstructured play environments provide children with autism spectrum disorder (ASD) a safe and supportive context to develop social skills. Their study found that engaging in child-led free play with

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peers enhanced cooperation, shared decision-making, and mutual understanding. These settings allowed children to practice complex social interactions authentically while reducing the stress or pressure associated with structured tasks. Furthermore, the research indicated that skills learned in such free-play contexts were more likely to generalize to real-life situations, reinforcing the value of safe, peer-mediated play. Overall, these findings underscore the importance of integrating unstructured, child-directed play into therapeutic and educational programs to promote meaningful and transferable social development in children with ASD.

Subtheme 10. Adaptability to Individual Responses

Children respond differently to therapy based on personality, developmental stage, and sensory preferences. Teachers adapt methods and pacing to each child, ensuring interventions remain meaningful, effective, and responsive to ongoing needs.

Participant 4 explained that “addressing the diverse needs and responses... each child may have different sensitivities.” Similarly, Participant 2 stated, “activities should be tailored to each child’s developmental level.” Adaptability ensures inclusivity. Teachers recognize that each child may respond differently to the same activity, making flexibility essential. This adaptability prevents exclusion and ensures that therapeutic goals are met for a wider range of learners.

Zhang et al. (2022) highlighted that peer-mediated structured play can be tailored to meet the diverse needs of children with developmental delays, including autism spectrum disorder (ASD). Their study found that pairing children with trained peers promoted reciprocal interactions and enhanced social engagement, demonstrating how structured play can be adapted to individual abilities. Guralnick further emphasized that structured settings allow children to practice social norms, such as sharing and cooperation, in a controlled environment suited to their developmental level. Additionally, consistent participation in these activities contributed to long-term improvements in social adaptability. These findings underscore the importance of designing interventions that are responsive to each child’s unique needs, ensuring that play therapy fosters meaningful social communication and relationship-building.

This theme highlights that balancing structure with flexibility allows children to explore and engage while achieving therapeutic goals. Teachers emphasized that clear objectives, behavioral integration, and adaptability create an environment where play remains both purposeful and enjoyable, fostering skill development in a supportive setting.

Theme 3: Supportive Environment and Resources

Participants recognized the importance of sensory-friendly, low-stimulation environments, visual aids, and specialized play tools. They also identified challenges such as limited resources, time constraints, and systemic barriers that affect consistent implementation.

Subtheme 11. Sensory Accommodations

Quiet spaces, sensory tools, and minimized distractions help children stay focused and calm. Teachers use these accommodations to reduce overstimulation and enhance engagement.

Participant 2 explained, “sensory accommodations, such as quiet spaces or sensory tools, make the setting more comfortable.” Participant 1 recommended “designing environments with minimal visual and auditory distractions.” Teachers highlight how sensory-friendly environments directly impact a child’s ability to focus. Without accommodations, overstimulation may derail therapy sessions, making environmental design a non-negotiable aspect of effective practice.

Murphy et al. (2024) highlighted the importance of creating play environments that accommodate children’s sensory needs. Their study found that child-initiated, unstructured play allowed children with autism spectrum disorder (ASD) to engage more effectively in social interactions, adjusting their communication based on context and responding to peers appropriately. By providing spaces that reduce sensory overload and allow children to lead interactions, the study emphasized that children could explore communication strategies, practice problem-solving, and engage creatively in meaningful social play. These findings suggest that sensory accommodations, including low-stimulation environments and child-centered flexibility, are essential for supporting pragmatic language development and fostering authentic social engagement in children with ASD.

Subtheme 12. Use of Visual Aids

Picture schedules, emotion cards, and predictable routines improve understanding and participation, particularly for children with communication difficulties, reinforcing learning in structured yet accessible ways.

Participant 2 noted that “visual aids like picture schedules and emotion cards can enhance understanding.” He added that a “structured; low-stimulation environment helps reduce anxiety.” Visual support provides predictability, which is particularly critical for children with ASD who struggle with transitions or abstract concepts. Teachers show awareness that visual strategies supplement verbal instruction and help reduce anxiety.

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Khatib et al. (2024) emphasized the role of visual supports in enhancing social communication among children with autism spectrum disorder (ASD). Their study demonstrated that structured play interventions incorporating visual aids, such as social scripts and pictorial cues, improved children's ability to initiate and sustain interactions. Participants showed enhanced nonverbal communication, including body language, facial expressions, and eye contact, indicating that visual supports help bridge verbal and nonverbal skills. Additionally, predictable routines and clear visual cues reduced anxiety, creating a supportive environment for learning. These findings highlight that integrating visual aids into play therapy is crucial for promoting effective communication and social engagement in children with ASD.

Subtheme 13. Environmental Design

Playrooms designed with soft lighting, neutral colors, and minimal clutter support comfort and engagement. Teachers highlight that a thoughtfully arranged space promotes concentration and positive emotional responses.

Participant 1 recommended that "the playroom environment should be designed with minimal visual and auditory distractions by using soft lighting, neutral or pastel colors, and limiting clutter." Participant 2 reiterated the need for a "structured; low-stimulation environment." The intentional design of the play space reflects educators' recognition that therapy effectiveness depends not only on activities but also on the physical setting. Subtle factors like lighting and colors contribute significantly to comfort and engagement.

Wilson (2020) highlighted the importance of creating supportive and well-considered play environments for children with autism spectrum disorder (ASD). The study found that child-led, unstructured play in thoughtfully arranged spaces allowed children to engage in spontaneous interactions, such as eye contact, shared attention, and reciprocal exchanges, without rigid constraints. The naturalistic and inviting design of the play setting encouraged exploration, reduced anxiety, and increased motivation to interact with peers. These findings suggest that environmental design plays a critical role in facilitating social communication and engagement, emphasizing the need for play spaces that are flexible, safe, and responsive to the sensory and social needs of children with ASD.

Subtheme 14. Resource Limitations

Limited materials, staff, and institutional support can hinder the effectiveness of play therapy. Teachers must often innovate or adapt interventions to overcome systemic constraints.

Participant 2 reported that "limited resources, and communication difficulties can affect effectiveness," adding that "lack of understanding or support from others may also hinder implementation." Systemic barriers restrict teachers' capacity to provide optimal therapy. Resource shortages highlight inequities in access to quality interventions, emphasizing the need for administrative and policy-level support.

López-Nieto et al. (2022) highlighted gaps in the literature regarding practical guidelines for implementing clinically based play interventions in educational settings. The study emphasized the challenge of balancing structured behavioral techniques with unstructured, child-led free play. In line with this, the current research focuses on special educators' experiences in using play therapy to enhance social communication and behavior in children with autism spectrum disorder. By centering on teachers' perspectives, the study explores barriers, strategies, and outcomes associated with play-based interventions. These insights aim to inform the creation of context-specific, practical strategies that are feasible and adoptable within special education classrooms, addressing limitations in resources, guidance, and support for educators.

Subtheme 15. Time Constraints

School schedules and multiple responsibilities restrict therapy delivery. Teachers report that insufficient time limits consistent implementation, emphasizing the need for institutional prioritization of play therapy.

Participant 2 observed that "time constraints can greatly hinder the effective delivery of play therapy," explaining that "with packed school schedules and multiple responsibilities, sessions may be shorter or less frequent than needed." Teachers face structural limitations that compromise intervention frequency and intensity. This points to a tension between curriculum requirements and therapeutic needs, often forcing educators to make difficult compromises.

As Simacek et al. (2020) suggest, focused and innovative play-based strategies are needed that are engaging for children and feasible within educational settings, ensuring that therapy can be delivered effectively despite time constraints.

This theme highlights that a carefully designed environment, equipped with sensory accommodations, visual aids, and minimal distractions, enhances the effectiveness of play therapy. Teachers highlighted that resource availability and sufficient time are critical to sustaining engagement and maximizing therapeutic outcomes.

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Theme 4: Collaboration and Professional Competence

Collaboration among teachers, parents, and therapists was seen as essential to maximize effectiveness and ensure consistency across settings. Teachers also highlighted the need for continuous training, professional development, and strong interpersonal skills such as empathy, communication, and active listening.

Subtheme 16. Collaboration with Parents

Parents' involvement reinforces skills learned at school and ensures consistency across home and educational settings. Teachers highlight collaboration as vital to the continuity and effectiveness of therapy.

Participant 2 stated, "I collaborate with therapists and parents by maintaining open communication, sharing observations, and aligning strategies across settings." Participant 1 also stressed consistency across settings. Parents are vital partners in reinforcing skills outside of school. Teachers recognize that when parents are engaged, therapy becomes more holistic and effective, extending progress into daily routines.

Hijab et al. (2025) demonstrated that natural, child-led play settings enhance peer collaboration, shared decision-making, and social understanding, providing children with authentic opportunities to practice complex social interactions. Teachers emphasized that parental involvement allows skills practiced during therapy, such as turn-taking, communication, and cooperation, to be reinforced at home, promoting consistency across environments. Engaging parents in observing, supporting, and extending play activities helps children generalize social skills to real-life contexts, strengthening both developmental outcomes and the child's ability to transfer learned behaviors beyond the classroom. These findings underscore the importance of structured collaboration with families as an integral part of play-based interventions.

Subtheme 17. Collaboration with Therapists

Working closely with therapists allows teachers to align strategies and maintain consistency. Partnerships promote effective implementation of interventions and maximize benefits for children.

Participant 2 emphasized working with "therapists and parents by maintaining open communication," while Participant 4 added that collaboration "ensures consistency and maximizes effectiveness." Teachers value interdisciplinary teamwork, where expertise is shared to benefit the child. This recognition of therapists' specialized skills demonstrates humility and professional openness.

Gibson et al. (2021) found that structured play interventions guided by therapists significantly improved children's verbal communication, including social greetings, requests, and conversational exchanges. Teachers highlighted that working closely with therapists ensures that classroom activities and individualized educational plans align with therapeutic goals, providing consistency and reinforcement across settings. This partnership allows teachers to observe and incorporate play-based strategies in daily routines, while therapists can tailor interventions based on ongoing classroom observations. Such collaboration maximizes the effectiveness of play therapy, promoting both skill acquisition and generalization of social communication abilities in children with ASD.

Subtheme 18. Importance of Communication

Effective communication, including active listening, enables teachers to build trust with children and stakeholders. Clear, consistent dialogue supports coordination and responsiveness in therapy.

Participant 2 shared that "conducting play therapy requires strong communication... to build trust with children and work effectively with families." He also stressed "active listening" as essential. Communication is not limited to information-sharing but also includes relational listening and trust-building. Teachers highlight communication as the foundation of both collaboration and therapy delivery.

Murphy et al. (2024) found that child-initiated play significantly enhanced pragmatic language skills, allowing children to initiate conversations, respond appropriately, and adjust their communication based on social context. Teachers emphasized that fostering authentic, child-led interactions provides opportunities for children to practice both verbal and nonverbal communication strategies in meaningful ways. Moreover, unstructured play encourages creativity, problem-solving, and flexibility in social exchanges, reinforcing the importance of communication as a foundational skill for successful peer interactions and overall social competence in children with ASD.

Subtheme 19. Empathy and Listening Skills

Relational skills, empathy, and attentiveness are essential for fostering rapport. Teachers view these qualities as central to supporting emotional development and engagement in therapy.

Participant 2 pointed out that therapy "requires... empathy, and active listening," while Participant 4 emphasized that "building rapport" is just as important as therapy activities. Teachers highlight empathy as a professional skill, not just a personal

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trait. This reflects the importance of emotional intelligence in sustaining therapeutic relationships with children who have unique sensitivities.

Walsh et al. (2024) demonstrated that gamified social training applications can support the development of conversational skills and emotional recognition, creating opportunities for children to practice understanding others' perspectives in a safe, structured environment. Teachers reported that such interactive digital play increased engagement and motivation, allowing children to experiment with social exchanges without fear of failure. These findings highlight that fostering empathy and active listening, both in teachers and children, enhances the effectiveness of play-based interventions and strengthens the relational foundation necessary for meaningful social learning.

Subtheme 20. Ongoing Professional Training

Continuous professional development equips teachers with updated techniques, ensuring interventions are evidence-based, responsive, and effective for diverse learners.

Participant 2 mentioned "specific competencies required for effective implementation." Participant 4 agreed, saying these "skills form the foundation for therapeutic relationships." Teachers acknowledge the need for ongoing professional development to stay competent. This reveals a gap in current training and points to the necessity of institutional investment in capacity-building.

Korte et al. (2022) demonstrated that structured play incorporating PRT significantly improved verbal communication and social responsiveness in children with autism spectrum disorder (ASD). The study highlighted the importance of understanding child choice, motivation, and structured activities to encourage spontaneous language use. Teachers who receive continuous training in such approaches are better equipped to create meaningful, controlled play environments that foster sustained peer and adult interactions. These findings underscore that professional training strengthens teachers' ability to implement play therapy effectively, ensuring interventions are both evidence-based and responsive to children's developmental needs.

This theme highlights that effective play therapy relies on collaborative partnerships with parents and therapists, strong communication skills, empathy, and ongoing professional development. Teachers' competence and teamwork ensure consistency across settings, enhancing children's learning and social-emotional growth.

Theme 5: Monitoring, Ethics, and Long-term Impact

Educators underscored the need for monitoring and evaluation to track progress, while also upholding ethical practices like confidentiality. Despite barriers, they observed meaningful long-term effects on children's social skills, communication, and behavior, affirming play therapy's positive potential.

Subtheme 21. Monitoring Progress

Teachers use observations, goal-tracking, and assessment tools to evaluate effectiveness. Continuous monitoring informs adjustments, enhancing outcomes and supporting individualized growth.

Participant 2 emphasized that "effective play therapy requires clear objectives while maintaining engaging, natural qualities." Participant 1 also observed noticeable progress in children's communication and behavior. Teachers rely on continuous monitoring to measure effectiveness and refine strategies. This focus on assessment ensures that therapy remains evidence-driven and responsive.

Fung et al. (2025) examined the use of robotic play companions and observed that children with autism spectrum disorder (ASD) demonstrated increased social engagement and verbal interactions when interacting with predictable, consistent robotic partners. The study highlighted improvements in turn-taking, eye contact, and conventional social exchanges, suggesting that structured monitoring of these interactions allows teachers to track developmental gains effectively. These findings underscore the importance of systematic observation and progress evaluation in play-based interventions, ensuring that strategies remain responsive to each child's evolving social communication needs.

Subtheme 22. Ethical Considerations

Maintaining confidentiality and child-centered practices protects children's rights and dignity. Teachers recognize ethical conduct as essential to trust and therapeutic success.

Teachers emphasized "protecting child's privacy and confidentiality." Participant 2 reinforced the importance of child privacy. Ethical principles guide therapy practice, ensuring respect for children's dignity. Teachers' emphasis on confidentiality also reflects sensitivity to family trust and cultural expectations.

Lee et al. (2021) highlighted that structured play activities, including guided role-playing and cooperative games, provide children with autism spectrum disorder (ASD) a safe and supportive environment to practice social scenarios. By emphasizing

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safety, consent, and supportive engagement, the study underscores how ethical practices in play therapy allow children to explore social interactions without risk or undue stress. These findings reinforce the importance of maintaining ethical standards, including safeguarding emotional and social safety, which contributes not only to immediate learning but also to long-term social development.

Subtheme 23. Confidentiality in Practice

Sensitive information is carefully handled to safeguard children while facilitating collaboration with families and professionals. Respect for privacy strengthens relationships and therapy effectiveness.

Educators stressed “protecting child’s privacy and confidentiality.” Participant 2 explained that ethical care must remain a priority. Confidentiality practices safeguard children from stigma and ensure professional credibility. This ethical stance underscores teachers’ responsibility as both educators and caregivers.

Yang et al. (2025) demonstrated that virtual reality (VR) social play interventions provide children with autism spectrum disorder (ASD) a controlled and private setting to practice interactions such as greetings and responding to social cues. By minimizing exposure to potentially stressful real-world situations, VR ensures that children can engage confidently while maintaining privacy. Special Education teachers observed that children who practiced VR displayed increased confidence and responsiveness in subsequent real-life interactions. These findings highlight the importance of confidentiality in practice, emphasizing that protected, controlled, and private learning environments support both skill development and emotional security.

Subtheme 24. Long-Term Social Skill Development

Play therapy fosters foundational skills such as eye contact, social reciprocity, and understanding social cues. Teachers highlight that these abilities transfer beyond therapy into broader social contexts.

Teachers observed improvements in “reciprocal interaction, eye contact, understanding social cues, and following instructions.” Participant 4 emphasized positive “long-term effects on social communication and behavior.” Teachers recognize that play therapy has enduring impacts beyond immediate gains. By nurturing social competencies, therapy helps children with ASD better integrate into educational and community contexts.

Zhang et al. (2022) demonstrated that peer-mediated structured play, where children engaged with trained peers, significantly enhanced social engagement and reciprocal interactions. These guided activities provided consistent opportunities to practice social norms, such as sharing, turn-taking, and cooperation, in a controlled and supportive environment. Importantly, repeated exposure to structured play contributed to sustained improvements in social adaptability, helping children generalize skills beyond the therapy setting. These findings underscore the value of integrating structured peer interactions into early intervention programs, emphasizing that consistent, guided, and socially rich experiences are essential for fostering long-term social communication and relationship-building in children with ASD.

Subtheme 25. Sustained Behavioral Improvements

Teachers observe lasting improvements in emotional regulation, communication, and behavior. Play therapy’s impact is perceived as enduring, validating its role as an effective intervention.

Participant 1 noted that “different play types... improve emotional regulation.” Participant 4 highlighted “significant improvements in social communication and behavioral development.” Teachers view play therapy as a sustainable intervention that fosters behavioral stability. These improvements demonstrate the intervention’s effectiveness in addressing both emotional and social dimensions of ASD.

Elbeltagi et al. (2023) found that structured play routines incorporating turn-taking and role-playing significantly enhanced children’s ability to engage in reciprocal social interactions. Participants demonstrated greater responsiveness to social cues, improved conversational exchanges, and higher engagement in group activities. The study highlighted that structured play bridges therapeutic interventions and real-world social experiences by providing predictable social roles and play scenarios. Through these consistent and guided interactions, children develop meaningful social skills that extend beyond the therapy setting, supporting lasting behavioral improvements and reinforcing the value of structured play in promoting both social competence and adaptive functioning in children with ASD.

This theme highlights that continuous monitoring, adherence to ethical practices, and focus on long-term outcomes are essential for ensuring the effectiveness of play therapy. Teachers emphasized that play therapy supports lasting improvements in social communication, behavior, and emotional regulation when implemented with ethical integrity and careful evaluation.

Problem 4. What insights can be drawn from teachers lived experiences in using play therapy to address social communication and behavioral challenges in children with Autism?

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The findings of the study demonstrate that play therapy, particularly symbolic play, art, and sand tray activities, is a vital tool in enhancing social communication and emotional development among children with autism spectrum disorder (ASD). Teachers consistently emphasized that these approaches provide “safe and creative ways” for children to express themselves and practice interaction (Participant 1, Participant 2). Symbolic play “builds empathy and social understanding through role-play,” while art therapy “encourages communication and turn-taking,” and sand tray therapy “supports storytelling, perspective-taking, and empathy” (Participant 2, Participant 4). These methods align with research on child-centered therapeutic interventions, which suggest that engaging multiple modalities fosters both cognitive and socio-emotional growth (Khatib et al., 2024). Moreover, the role of teamwork and dual activities, as highlighted by Participant 3, underscores the importance of structured social contexts in building trust and peer relationships, contributing to lasting improvements in cooperation and social cue interpretation (Participant 5).

Further, the study revealed that the long-term effects of play therapy vary depending on the severity of ASD. Teachers noted that children with mild to moderate ASD often show “faster and more noticeable improvements in social and communication skills,” whereas those with more severe autism progress more gradually and require individualized support (Participants 1 and 2). This finding emphasizes the need for flexible, tailored interventions that accommodate diverse abilities and readiness levels, reflecting best practices in inclusive education. Participants stressed that even when progress is slower, all children benefit meaningfully when therapy is consistent and adapted to their unique needs (Participants 3, 4, and 5).

In addition, sustaining gains from play therapy was identified as a collaborative process involving parents, teachers, and therapists. Teachers recommended integrating skills into daily routines, providing regular follow-ups, and using individualized plans (Participant 1). Reinforcement at home and school was emphasized, where parents and teachers consistently “praise turn-taking, encourage eye contact, or label emotions” (Participant 4). These strategies mirror findings in the literature suggesting that generalization of social skills requires consistent reinforcement across environments (Flanagin et al., 2020). Booster sessions and ongoing social interactions further ensure that improvements are maintained, highlighting the crucial role of continuity and structured practice.

Collaboration also extended to professional teamwork, where teachers contribute classroom insights to optimize play therapy. Participant 1 described sharing “classroom observations and insights on student behavior and engagement,” while Participant 2 highlighted incorporating play-based techniques into daily routines. Others emphasized connecting therapeutic goals with academic learning and bridging classroom activities with individualized educational plans (Participants 3 and 4). Consistency across home, therapy, and school environments was viewed as essential for maximizing intervention effectiveness (Participant 5). These findings underscore the importance of multidisciplinary collaboration and the teacher’s role in reinforcing therapy within educational contexts.

Ethical considerations emerged as central to play therapy implementation. Teachers emphasized maintaining confidentiality, obtaining informed consent, and respecting each child’s individuality, sensory needs, and pace (Participants 1–5). These practices are consistent with trauma-informed care principles and highlight teachers’ awareness of the need for a safe, non-judgmental environment that respects children’s dignity and autonomy. Ethical adherence ensures that interventions are both effective and responsible, fostering trust and engagement.

Finally, monitoring and evaluation were identified as critical for ensuring therapy effectiveness. Teachers recommended combining observational tools, standardized assessments, and play-based evaluations (Participants 1–4). Feedback from parents, therapists, and the child provided additional insight into real-life progress (Participant 5). This multi-method approach aligns with best practices in special education, emphasizing evidence-based decision-making and ongoing adjustment of interventions to meet individual needs.

In conclusion, the study illustrates that play therapy is a dynamic, multifaceted intervention that supports social, emotional, and behavioral development in children with ASD. Its effectiveness is enhanced through individualized approaches, ethical practices, sustained collaboration, and structured monitoring. Teachers play a pivotal role not only in delivering therapy but also in bridging educational and therapeutic goals, ensuring that gains are meaningful and lasting.

Another set of findings of this study reveal that special education teachers view play therapy as a powerful intervention that addresses the complex developmental, social, and emotional needs of children with autism spectrum disorder (ASD). Across all themes, a consistent thread emerged: play therapy must be individualized, structured yet flexible, and implemented within supportive environments that recognize both the strengths and challenges of learners. Teachers emphasized the importance of tailoring activities to the diverse abilities and sensitivities of children, underscoring the necessity of inclusivity and emotional safety as foundational elements of practice. At the same time, they stressed that play therapy must balance therapeutic goals with natural engagement, combining structure with adaptability.

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The findings also highlight that effective play therapy requires an enabling environment supported by appropriate resources, sensory accommodations, and time. However, resource limitations and systemic barriers continue to challenge teachers' efforts, pointing to the need for stronger institutional support. Collaboration was identified as another critical factor, with teachers emphasizing open communication and partnership with parents, therapists, and colleagues to reinforce consistency and maximize impact. Beyond implementation, teachers also stressed the importance of monitoring progress, adhering to ethical standards, and safeguarding confidentiality, while also recognizing the long-term impact of play therapy on children's social and behavioral development.

Taken together, the five themes demonstrate that while play therapy holds great potential for enhancing the social communication and emotional regulation of children with ASD, its success depends on teacher competence, systemic support, and collaborative engagement with families and professionals. The study highlights both the promise of play therapy and the pressing need for capacity-building, resource allocation, and policy frameworks that sustain its effective integration into special education settings.

Problem 5. What framework can be developed from teachers shared experiences and recommendations to enhance the implementation of play therapy for children with Autism?

The researcher creates the Rebong Teacher-Informed Play Therapy Implementation Framework rooted in the understanding that teachers play a pivotal role in children's emotional and developmental growth. This framework promotes a holistic, evidence-informed, and teacher-centered approach that integrates children's unique needs, structured flexibility, environmental supports, collaborative practices, professional growth, and rigorous monitoring. It aims to enhance the effectiveness, sustainability, and scalability of play therapy interventions in special education settings.



Figure 1: Rebong Teacher-Informed Play Therapy Implementation Framework

The Rebong Teacher-Informed Play Therapy Implementation Framework is a comprehensive model designed to integrate therapeutic play practices within educational settings, particularly guided by teachers' insights and classroom realities. It emphasizes the importance of tailoring interventions to the unique developmental, emotional, and social needs of each child, while ensuring that the strategies are feasible and sustainable within school environments.

At the heart of the framework lies a cyclical process of assessment, planning, intervention, and support. Teachers begin by observing and assessing children's behaviors, emotional cues, and social interactions. These observations inform the planning of individualized, child-centered interventions that align with both therapeutic goals and educational objectives. The interventions are structured yet flexible, allowing children to explore through play while being gently guided by behavioral principles and clear developmental targets.

A critical component of the framework is the optimization of the environment and resources. This involves creating supportive spaces that encourage safe, expressive play and ensure that materials, time, and personnel are allocated effectively. Teachers are encouraged to adapt their classrooms to be more conducive to therapeutic play, which may include quiet zones, sensory tools, or collaborative play areas.

Ethical considerations and ongoing monitoring are also central to the framework. Teachers are trained to track progress, reflect on outcomes, and adjust strategies as needed, all while upholding ethical standards that respect children's autonomy and emotional safety. Sustainability is emphasized through practices that can be maintained over time without overburdening educators or compromising the quality of care.

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Finally, the framework underscores the importance of collaboration and professional competence. Teachers work alongside mental health professionals, caregivers, and other stakeholders to ensure a holistic approach. Continuous professional development is encouraged so that educators remain informed about best practices in play therapy and child development.

Altogether, the Rebong Teacher-Informed Play Therapy Implementation Framework bridges the gap between therapeutic intervention and educational practice, empowering teachers to become active facilitators of emotional growth and resilience through play.

This chapter presents the summary of findings, conclusions and recommendations of the study.

The findings revealed that play therapy produced long-term improvements in children with autism spectrum disorder (ASD), particularly in enhancing social communication, reciprocity, and emotional regulation. Special Education teachers significantly contributed to these outcomes by designing structured yet flexible play activities, guiding peer interactions, and reinforcing skills that transferred into real-life contexts.

Teachers identified major challenges in implementing play therapy, including limited resources, inadequate training, large class sizes, and insufficient administrative support. To address these gaps, they recommended ongoing professional development, access to appropriate play materials and facilities, smaller teacher-student ratios, and stronger collaboration with parents and school leaders.

The findings revealed five core themes with twenty-five subthemes that underscore the importance of interdisciplinary collaboration in implementing play therapy for children with autism. First, shared responsibility among stakeholders emerged, where teachers, therapists, and parents emphasized joint accountability, clear role delineation, mutual trust, active parental involvement, and shared goal-setting for child development. Second, the integration of play therapy with individualized education plans (IEPs) highlighted the need for alignment with objectives, adaptation to learning needs, incorporation into routines, flexible modifications, and collaborative progress monitoring. Third, collective problem-solving for children's needs was evident through open communication, case conferencing, evidence-based strategies, joint brainstorming, and feedback loops that refined interventions. Fourth, capacity-building through dialogue and training surfaced, with participants stressing regular team meetings, mentoring, professional development, sharing of best practices, and reflective approaches. Lastly, the theme of sustainability of play therapy practices emphasized long-term support systems, resource-sharing, integration into school culture, institutional backing, and policy alignment to ensure lasting impact. Together, these themes highlight that interdisciplinary collaboration fosters holistic intervention, adaptability, and the long-term viability of play therapy practices in special education.

From their lived experiences, teachers observed that play therapy provided safe and supportive settings where children with ASD could practice communication, turn-taking, and social reciprocity. They also emphasized noticeable behavioral improvements, increased confidence among learners, and the importance of ethical practices such as respecting individuality and maintaining confidentiality.

The study developed a Rebong Teacher-Informed Play Therapy Implementation Framework based on the shared experiences and recommendations of teachers. This framework is composed of six interrelated components: assessment and planning, customized interventions, resource and environmental support, collaboration and professional development, monitoring and evaluation, and long-term sustainability. Collectively, these components serve as a practical guide to strengthen and improve the effective application of play therapy in special education settings.

The study concluded that play therapy supports lasting improvements in social communication, reciprocity, and emotional regulation in children with autism, with Special Education teachers playing a crucial role through structured, flexible play and facilitating skill transfer to daily life. Teachers face challenges such as limited resources, insufficient training, large class sizes, and weak administrative support, highlighting the need for professional development, better materials, smaller classes, and stronger parent-school collaboration.

Interdisciplinary collaboration is essential for effective play therapy, centered on shared responsibility, IEP integration, collective problem-solving, capacity-building, and sustainability. Teachers also observed that play therapy provides supportive environments for practicing communication and social skills, boosting confidence, and emphasizing ethical care.

The study resulted in the Rebong Teacher-Informed Play Therapy Implementation Framework, offering a practical guide with components for assessment, customized interventions, resource support, collaboration, monitoring, and sustainability to enhance play therapy's use in special education.

The recommendations highlight the importance of intentionally integrating structured play-based activities into classroom routines and daily teacher-child interactions. This approach ensures that the social and emotional skills children develop

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through therapy are consistently reinforced and applied in real-life contexts, which helps maximize the long-term benefits of play therapy.

Schools are encouraged to make targeted investments to support effective play therapy. This includes providing comprehensive teacher training focused on play therapy techniques, ensuring access to appropriate and diverse play materials, and maintaining smaller class sizes to allow for more individualized attention. Additionally, strengthening collaboration between school administration and parents will create a more supportive environment that can overcome persistent barriers to implementing play therapy effectively.

To further enhance support for children with autism and other needs, schools should establish formal interdisciplinary collaboration frameworks. These frameworks would promote shared accountability among educators, therapists, and other professionals, align interventions with individualized education plans (IEPs), facilitate collective problem-solving, and support ongoing capacity-building. Long-term institutional commitment is vital to sustain these holistic approaches.

Teachers should also consistently provide safe and supportive play environments where children with autism spectrum disorder can develop important skills such as communication, social reciprocity, and confidence. These environments must respect each child's individuality and uphold ethical standards regarding confidentiality and dignity.

Lastly, schools should adopt the Teacher-Informed Play Therapy Implementation Framework developed through this research as a guiding tool. This framework supports the systematic application of play therapy by emphasizing thorough assessment, tailored interventions, appropriate resource allocation, collaborative ongoing training, continuous monitoring of progress, and planning for long-term sustainability. This comprehensive strategy will help ensure that play therapy interventions are effectively and consistently applied to benefit children's development.

REFERENCES

- 1) **Adeoye-Olatunde, O. A., & Olenik, N. L. (2021).** Research and scholarly methods: Semi-structured interviews. *JACCP: JOURNAL of the AMERICAN COLLEGE of CLINICAL PHARMACY*, 4(10), 1358–1367. <https://doi.org/10.1002/jac5.1441>
- 2) **Aitor Larraceleta, Castejón, L., María-Teresa Iglesias-García, & José Carlos Núñez. (2022).** Assessment of Public Special Education Teachers Training Needs on Evidence-Based Practice for Students with Autism Spectrum Disorders in Spain. *Children*, 9(1), 83–83. <https://doi.org/10.3390/children9010083>
- 3) **Alzrayer, N. M., Aldabas, R., Alhossein, A., & Alharthi, H. (2021).** Naturalistic teaching approach to develop spontaneous vocalizations and augmented communication in children with autism spectrum disorder. *Augmentative and Alternative Communication*, 37(1), 14–24. <https://doi.org/10.1080/07434618.2021.1881825>
- 4) **Anna-Lind Petursdottir, & Thorhalla Gudmundsdottir. (2021).** Supporting Social Play Skill Acquisition and Generalization of Children with Autism Through Video Modeling. *Journal of Autism and Developmental Disorders*, 53(4), 1391–1402. <https://doi.org/10.1007/s10803-021-05204-4>
- 5) **Ataro, G. (2020).** Methods, methodological challenges and lesson learned from phenomenological study about OSCE experience: Overview of paradigm-driven qualitative approach in medical education. *Annals of Medicine and Surgery*, 49, 19–23. <https://doi.org/10.1016/j.amsu.2019.11.013>
- 6) **Bamicha, V., & Athanasios Drigas. (2022).** ToM & ASD: The interconnection of Theory of Mind with the social-emotional, cognitive development of children with Autism Spectrum Disorder. The use of ICTs as an alternative form of intervention in ASD. *Technium Social Sciences Journal*, 33, 42–72. <https://doi.org/10.47577/tssj.v33i1.6845>
- 7) **Bodrova, E., Leong, D. J., & Yudina, E. (2023).** Play is a play, is a play, is a play... or is it? Challenges in designing, implementing and evaluating play-based interventions. *Frontiers in Psychology*, 14. <https://doi.org/10.3389/fpsyg.2023.1034633>
- 8) **Bordini, D., Moya, A. C., Rodrigues, G., Paula, C. S., Décio Brunoni, Brentani, H., Caetano, S. C., Mari, J., & Bagaio lo, L. (2024).** Exploring the Acquisition of Social Communication Skills in Children with Autism: Preliminary Findings from Applied Behavior Analysis (ABA), Parent Training, and Video Modeling. *Brain Sciences*, 14(2), 172–172. <https://doi.org/10.3390/brainsci14020172>
- 9) **Braun, V., & Clarke, V. (2023).** Thematic Analysis. Springer EBooks, 7187–7193. https://doi.org/10.1007/978-3-031-17299-1_3470
- 10) **Camarata, S., Stiles, S., & Birer, S. (2024).** Naturalistic Developmental Behavioral Interventions for Developmental Language Disorder. *American Journal of Speech-Language Pathology*, 33(2), 627–641. https://doi.org/10.1044/2023_ajslp-23-00116

A Play Therapy Approach for Addressing Social Communication and Behavioral Challenges in Children with Autism

- 11) **Campbell, S., Greenwood, M., Prior, S., Shearer, T., Walkem, K., Young, S., Bywaters, D., & Walker, K. (2020).** Purposive sampling: complex or simple? Research case examples. *Journal of Research in Nursing*, 25(8), 652–661. <https://doi.org/10.1177/1744987120927206>
- 12) **Cathal O'Madagain, & Tomasello, M. (2019).** Joint attention to mental content and the social origin of reasoning. *Synthese*, 198(5), 4057–4078. <https://doi.org/10.1007/s11229-019-02327-1>
- 13) **CHOY, S. W.-W., GUCKIN, C. M., TWOMEY, M., LYNAM, A., & FITZGERALD, G. (2024).** To Fill the Gap: A Systematic Literature Review of Group Play-Based Intervention to Address Anxiety in Young Children with Autism. *Education Thinking*, 4(1), 5–34. <https://pub.analyttrics.org/article/15/>
- 14) **Clayback, K. A., Williford, A. P., & Vitiello, V. E. (2022).** Identifying Teacher Beliefs and Experiences Associated with Curriculum Implementation Fidelity in Early Childhood Education. *Prevention Science*, 24(1), 27–38. <https://doi.org/10.1007/s11121-022-01414-z>
- 15) **Cooper, M. (2021).** Reducing special education costs by providing early intervention for autistic children. *Behavioral Interventions*, 37(2), 397–414. <https://doi.org/10.1002/bin.1839>
- 16) **Costescu, C., Pitariu, D., David, C., & Rosan, A. (2022).** social Communication Predictors in Autism Spectrum Disorder. Theoretical Review. *Journal of Experimental Psychopathology*, 13(3). <https://doi.org/10.1177/20438087221106955>
- 17) **Deniz, E., Francis, G., Torgerson, C., & Umar Toseeb. (2024).** Parent-Mediated Play-Based Interventions to Improve Social Communication and Language Skills of Preschool Autistic Children: A Systematic Review and Meta-analysis. *Review Journal of Autism and Developmental Disorders*. <https://doi.org/10.1007/s40489-024-00463-0>
- 18) **Döringer, S. (2020).** “The problem-centred expert interview”. Combining qualitative interviewing approaches for investigating implicit expert knowledge. *International Journal of Social Research Methodology*, 24(3), 265–278. <https://doi.org/10.1080/13645579.2020.1766777>
- 19) **Douglas, N. F., Feuerstein, J. L., Oshita, J. Y., Schliep, M. E., & Danowski, M. L. (2022).** Implementation Science Research in Communication Sciences and Disorders: A Scoping Review. *American Journal of Speech-Language Pathology*, 31(3), 1054–1083. https://doi.org/10.1044/2021_ajslp-21-00126
- 20) **Dowdy, A., Kaori Nepo, Miodus, S., Quigley, S., & Sevon, M. (2023).** Operational Definitions, Observation, and Behavioral Recording in Applied Behavior Analysis. *Autism and Child Psychopathology Series*, 107–129. https://doi.org/10.1007/978-3-031-27587-6_6
- 21) **Dynia, J. M., Walton, K. M., Brock, M. E., & Tiede, G. (2020).** Early childhood special education teachers' use of evidence-based practices with children with autism spectrum disorder. *Research in Autism Spectrum Disorders*, 77, 101606–101606. <https://doi.org/10.1016/j.rasd.2020.101606>
- 22) **Elangovan, N., & Sundaravel, E. (2021).** Method of preparing a document for survey instrument validation by experts. *MethodsX*, 8, 101326. <https://doi.org/10.1016/j.mex.2021.101326>
- 23) **Eloïse Brefort, Yann Saint-Georges-Chaumet, Cohen, D., & Saint-Georges, C. (2022).** Two-year follow-up of 90 children with autism spectrum disorder receiving intensive developmental play therapy (3i method). *BMC Pediatrics*, 22(1). <https://doi.org/10.1186/s12887-022-03431-x>
- 24) **Farideh Barghi, Sahar Safarzadeh, Fatemeh Sadat Marashian, & Saeed Bakhtiarpour. (2023).** Effectiveness of DIR/Floor Time Play Therapy in Social Skills and Emotion Regulation of Children with Autism Spectrum Disorder. *Middle East Journal of Rehabilitation and Health Studies*, 11(2). <https://doi.org/10.5812/mejrh-138491>
- 25) **Fedewa, M., Watkins, L., Barnard-Brak, L., & Akemoglu, Y. (2022).** A Systematic Review and Meta-Analysis of Single Case Experimental Design Play Interventions for Children with Autism and Their Peers. *Review Journal of Autism and Developmental Disorders*, 11(2), 361–383. <https://doi.org/10.1007/s40489-022-00343-5>
- 26) **Flanagin, A., Bauchner, H., & Fontanarosa, P. B. (2020).** Patient and Study Participant Rights to Privacy in Journal Publication. *JAMA*, 323(21), 2147. <https://doi.org/10.1001/jama.2020.3590>
- 27) **Francis, G., Deniz, E., Torgerson, C., & Umar Toseeb. (2022).** Play-based interventions for mental health: A systematic review and meta-analysis focused on children and adolescents with autism spectrum disorder and developmental language disorder. *Autism & Developmental Language Impairments*, 7. <https://doi.org/10.1177/23969415211073118>
- 28) **Fraser, D. W., Marder, T. J., deBettencourt, L. U., Myers, L. A., Kalymon, K. M., & Harrell, R. M. (2019).** Using a Mixed-Reality Environment to Train Special Educators Working with Students With Autism Spectrum Disorder to Implement Discrete Trial Teaching. *Focus on Autism and Other Developmental Disabilities*, 35(1), 3–14. <https://doi.org/10.1177/1088357619844696>

A Play Therapy Approach for Addressing Social Communication and Behavioral Challenges in Children with Autism

- 29) **Friday Nyimbili, & Nyimbili, L. (2024).** Types of Purposive Sampling Techniques with Their Examples and Application in Qualitative Research Studies. *British Journal of Multidisciplinary and Advanced Studies*, 5(1), 90–99. <https://doi.org/10.37745/bjmas.2022.0419>
- 30) **Fuller, E. A., & Kaiser, A. P. (2019).** The Effects of Early Intervention on Social Communication Outcomes for Children with Autism Spectrum Disorder: A Meta-analysis. *Journal of Autism and Developmental Disorders*, 50(5), 1683–1700. <https://doi.org/10.1007/s10803-019-03927-z>
- 31) **Gao, S., Wang, X., & Su, Y. (2023).** Examining whether adults with autism spectrum disorder encounter multiple problems in theory of mind: a study based on meta-analysis. *Psychonomic Bulletin & Review*, 30(5), 1740–1758. <https://doi.org/10.3758/s13423-023-02280-8>
- 32) **George, M. S., Rakhal Gaitonde, Davey, R., Mohanty, I., & Upton, P. (2020).** Engaging Research Participants with Results: A Rights Informed Approach. *Research Square (Research Square)*. <https://doi.org/10.21203/rs.3.rs-43527/v1>
- 33) **Gibson, J. L., Pritchard, E., & Lemos, C. de. (2021).** Play-based interventions to support social and communication development in autistic children aged 2–8 years: A scoping review. *Autism & Developmental Language Impairments*, 6, 239694152110158-239694152110158. <https://doi.org/10.1177/23969415211015840>
- 34) **Glassman, M., Lin, T.-J., & Ha, S. Y. (2022).** Concepts, collaboration, and a company of actors: a Vygotskian model for concept development in the 21st century. *Oxford Review of Education*, 49(2), 137–152. <https://doi.org/10.1080/03054985.2022.2028611>
- 35) **González-Sala, F., Gómez-Marí, I., Raúl Tárraga-Mínguez, Vicente-Carvajal, A., & Pastor-Cerezuela, G. (2021).** Symbolic Play among Children with Autism Spectrum Disorder: A Scoping Review. *Children*, 8(9), 801–801. <https://doi.org/10.3390/children8090801>
- 36) **Gretschel, P., Nyaradzai Munambah, Campodonico, K., Jacobs, M., Mabasa, N., Aphiwe Masinyana, Nassen, H., & Tinhluu Nghulele. (2022).** Promoting the play of children with autism spectrum disorders: Contributions of teachers and caregivers. *South African Journal of Occupational Therapy*, 52(3), 44–51. <https://www.ajol.info/index.php/sajot/article/view/282621>
- 37) **Habibi, M. M. (2023).** The Effectiveness of Social Play Therapy To Improve Social Skills And Abilities Of Children With Autism. *Jurnal Ilmiah POTENSIA*, 8(2), 243–251. <https://doi.org/10.33369/jip.8.2.243-251>
- 38) **Haq,. (2023).** CRITERIA FOR ASSESSING AND ENSURING THE TRUSTWORTHINESS IN QUALITATIVE RESEARCH. *International Journal of Business Reflections*, 4(2). <https://doi.org/10.56249/1.04.2.7358>
- 39) **Head, G. (2018).** Ethics in educational research: Review boards, ethical issues and researcher development. *European Educational Research Journal*, 19(1), 72–83. <https://doi.org/10.1177/1474904118796315>
- 40) **Hodges, H., Fealko, C., & Soares, N. (2020).** Autism spectrum disorder: definition, epidemiology, causes, and clinical evaluation. *Translational Pediatrics*, 9(S1), S55–S65. <https://doi.org/10.21037/tp.2019.09.09>
- 41) **Hurwitz, S., Garman-McClaine, B., & Carlock, K. (2021).** Special education for students with autism during the COVID-19 pandemic: “Each day brings new challenges.” *Autism*, 26(4), 889–899. <https://doi.org/10.1177/13623613211035935>
- 42) **Jobin, A. (2019).** Varied treatment response in young children with autism: A relative comparison of structured and naturalistic behavioral approaches. *Autism*, 24(2), 338–351. <https://doi.org/10.1177/1362361319859726>
- 43) **Leaf, J. B., Cihon, J. H., Leaf, R., McEachin, J., Liu, N., Russell, N., Unumb, L., Shapiro, S., & Khosrowshahi, D. (2021).** Concerns About ABA-Based Intervention: An Evaluation and Recommendations. *Journal of Autism and Developmental Disorders*, 52(6), 2838–2853. <https://doi.org/10.1007/s10803-021-05137-y>
- 44) **Lecheler, M., Lasser, J., Vaughan, P. W., Leal, J., Ordetx, K., & Bischofberger, M. (2020).** A Matter of Perspective: An Exploratory Study of a Theory of Mind Autism Intervention for Adolescents. *Psychological Reports*, 124(1), 39–53. <https://doi.org/10.1177/0033294119898120>
- 46) **Lucía López-Nieto, Compañ-Gabucio, L. M., Torres-Collado, L., & Garcia-de, M. (2022).** Scoping Review on Play-Based Interventions in Autism Spectrum Disorder. *Children*, 9(9), 1355–1355. <https://doi.org/10.3390/children9091355>
- 47) **Man, C., Chan, R. Y.-Y., Yum, Y. N., & Wang, K. (2021).** Internet of Things (IoT)-Enhanced Applied Behavior Analysis (ABA) for Special Education Needs. *Sensors*, 21(19), 6693–6693. <https://doi.org/10.3390/s21196693>
- 48) **Maznah Ramli, Khalid, F., Rozniza Zaharudin, Yusri, A. A., & Mohd Imran Yusoff. (2024).** PLAY THERAPY IN EDUCATIONAL INTERVENTIONS FOR STUDENTS WITH SPECIAL NEEDS: A SYSTEMATIC REVIEW. *Journal of Contemporary Social Science and Education Studies (JOCSES)* E-ISSN- 2785-8774, 4(2), 219–224. <https://doi.org/10.5281/zenodo.13377378>

- 49) **McKim, C. (2023).** Meaningful Member-Checking: A Structured Approach to Member-Checking. *American Journal of Qualitative Research*, 7(2), 41–52. <https://www.ajqr.org/article/meaningful-member-checking-a-structured-approach-to-member-checking-12973>
- 50) **Mesui, P. C. (2024).** A Systematic Review of Implementation Fidelity Interventions for School-Based Behavior Supports in Special Education Settings. *BYU ScholarsArchive*. <https://scholarsarchive.byu.edu/etd/10480/>
- 51) **Mey, G. (2022).** *Qualitative Methodology*. Springer International Handbooks of Education, 453–478. https://doi.org/10.1007/978-3-030-28745-0_22
- 52) **Mocănașu, D. R. (2020).** DETERMINING THE SAMPLE SIZE IN QUALITATIVE RESEARCH. *International Multidisciplinary Scientific Conference on the Dialogue between Sciences & Arts, Religion & Education*, 4(1), 181–187. <https://www.ceeol.com/search/article-detail?id=936461>
- 53) **Montoya-Fernández, C., Losada-Puente, L., Gómez-Barreto, I. M., & Gil-Madrona, P. (2024).** Developmental Play-Based Assessment in Early Childhood Education: A Systematic Review. *European Early Childhood Education Research Journal*, 32(5), 788–813. <https://eric.ed.gov/?q=water+OR+play&ff1=souEuropean+Early+Childhood+Education+Research+Journal&id=EJ1444719>
- 54) **Moore, T. R., & Amado, R. S. (2021).** A Conceptual Model of Treatment Adherence in a Behavior Analytic Framework. *Education and Treatment of Children*, 44(1), 1–17. <https://doi.org/10.1007/s43494-020-00032-0>
- 55) **Mwita, K. (2024).** Factors influencing data saturation in qualitative studies. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.4889752>
- 56) **Neijs, L. D., Tisseur, C., Kluwen, L. A., Ina, Swaab, H., & Ester, W. A. (2021).** Effectivity of Play-Based Interventions in Children with Autism Spectrum Disorder and Their Parents: A Systematic Review. *Journal of Autism and Developmental Disorders*, 53(4), 1588–1617. <https://doi.org/10.1007/s10803-021-05357-2>
- 57) **Ni Nyoman Padmadewi, Made, I., I Putu Yoga Purandina, Ayu, I., & Lesly Narwasti Ndun. (2024).** Empowering Social Environment as Scaffolding for Students with Autistic Spectrum Disorder (ASD) in Teaching Basic Communication. *Soshum Jurnal Sosial Dan Humaniora*, 14(1), 63–73. <https://doi.org/10.31940/soshum.v14i1.63-73>
- 58) **Nii Laryeafio, M., & Ogbewe, O. C. (2023).** Ethical consideration dilemma: systematic review of ethics in qualitative data collection through interviews. *Journal of Ethics in Entrepreneurship and Technology*, 3(2), 94–110. <https://doi.org/10.1108/jeet-09-2022-0014>
- 59) **O'Brien, K. M., Nagro, S. A., Binkert, G. D., Szocik, K., & Gerry, M. (2023).** Field Experiences in Special Education Teacher Preparation: A Review of the Literature. *Teacher Education and Special Education: The Journal of the Teacher Education Division of the Council for Exceptional Children*, 47(1), 5–25. <https://doi.org/10.1177/08884064231177662>
- 60) **O'Keeffe, C., & McNally, S. (2021).** A Systematic Review of Play-Based Interventions Targeting the Social Communication Skills of Children with Autism Spectrum Disorder in Educational Contexts. *Review Journal of Autism and Developmental Disorders*, 10(1), 51–81. <https://doi.org/10.1007/s40489-021-00286-3>
- 61) **Olmos-Vega, F. M., Stalmeijer, R. E., Varpio, L., & Kahlke, R. (2022).** A practical guide to reflexivity in qualitative research: AMEE Guide No. 149. *Medical Teacher*, 45(3), 241–251. <https://doi.org/10.1080/0142159x.2022.2057287>
- 62) **Paulus, T. M. (2022).** Using Qualitative Data Analysis Software to Support Digital Research Workflows. *Human Resource Development Review*, 22(1), 139–148. <https://doi.org/10.1177/15344843221138381>
- 63) **Pietrzykowski, T., & Katarzyna Smilowska. (2021).** The reality of informed consent: empirical studies on patient comprehension—systematic review. *Trials*, 22(1). <https://doi.org/10.1186/s13063-020-04969-w>
- 64) **Pinto, C. F., Mohan, H., Shenoy, R., Vasudeva Guddattu, & Tiwari, S. (2024).** The Effect of Parent-Mediated Joint Attention Intervention on Joint Attention and Language Skills in Children with Autism Spectrum Disorder - A Systematic Review. *Child & Family Behavior Therapy*, 46(3), 272–297. <https://doi.org/10.1080/07317107.2024.2338741>
- 65) **Pisman, M. D., & Luczynski, K. C. (2020).** Caregivers can implement play-based instruction without disrupting child preference. *Journal of Applied Behavior Analysis*, 53(3), 1702–1725. <https://doi.org/10.1002/jaba.705>
- 66) **Prelock, P. A., Brien, A. R., & McCadden, E. R. (2025).** Evidence-Based Treatments in Communication for Children with Autism Spectrum Disorders. *Handbook of Evidence-Based Practices in Autism Spectrum Disorder*, 123–194. https://doi.org/10.1007/978-3-031-78143-8_7
- 67) **Reem Elbeltagi, Al-Beltagi, M., Saeed, N. K., & Rawan Alhawamdeh. (2023a).** Play therapy in children with autism: Its role, implications, and limitations. *World Journal of Clinical Pediatrics*, 12(1), 1–22. <https://doi.org/10.5409/wjcp.v12.i1.1>

- 68) **Reem Elbeltagi, Al-Beltagi, M., Saeed, N. K., & Rawan Alhawamdeh. (2023b).** Play therapy in children with autism: Its role, implications, and limitations. *World Journal of Clinical Pediatrics*, 12(1), 1–22. <https://doi.org/10.5409/wjcp.v12.i1.1>
- 69) **Roberts, R. E. (2020).** Qualitative Interview Questions: Guidance for Novice Researchers. *Ebsco.com*, 25(9), 3185. <https://doi.org/%22>,
- 70) **Ruble, L., Love, A., McGrew, J. H., Yu, Y., Fischer, M. W., & Salyers, M. P. (2023).** Stakeholder perspectives of adaptations of a burnout intervention for special education teachers. *Psychology in the Schools*, 60(10), 3673–3693. <https://doi.org/10.1002/pits.22953>
- 71) **Sandbank, M., Bottema-Beutel, K., LaPoint, S. C., Feldman, J. I., Barrett, D. J., Caldwell, N., Dunham, K., Crank, J., Albarran, S., & Woynarowski, T. (2023).** Autism intervention meta-analysis of early childhood studies (Project AIM): updated systematic review and secondary analysis. *BMJ*, e076733–e076733. <https://doi.org/10.1136/bmj-2023-076733>
- 72) **Seda, Ö. S., & Erdem, M. (2023).** Examination of Special Education with Constructivism: A Theoretical and Review Study. *European Educational Researcher*, 6(1), 1–20. <https://eric.ed.gov/?id=EJ1383171>
- 73) **Shire, S. Y., Shih, W., Bracaglia, S., Kodjoe, M., & Kasari, C. (2020).** Peer engagement in toddlers with autism: Community implementation of dyadic and individual Joint Attention, Symbolic Play, Engagement, and Regulation intervention. *Autism*, 24(8), 2142–2152. <https://doi.org/10.1177/1362361320935689>
- 74) **Simacek, J., Elmquist, M., Dimian, A. F., & Reichle, J. (2020).** Current Trends in Telehealth Applications to Deliver Social Communication Interventions for Young Children with or at Risk for Autism Spectrum Disorder. *Current Developmental Disorders Reports*, 8(1), 15–23. <https://doi.org/10.1007/s40474-020-00214-w>
- 75) **Singh, A. (2021).** An Introduction to Experimental and Exploratory Research. *SSRN Electronic Journal*. <https://doi.org/10.2139/ssrn.3789360>
- 76) **So, W.-C., Law, W.-W., Cheng, C.-H., Lee, C., Ng, K.-C., Kwok, F.-Y., Lam, H.-W., & Lam, K.-Y. (2023).** Comparing the effectiveness of robot-based to human-based intervention in improving joint attention in autistic children. *Frontiers in Psychiatry*, 14. <https://doi.org/10.3389/fpsy.2023.1114907>
- 77) **Sutherland, K. S., McLeod, B. D., Conroy, M. A., Lyon, A. R., & Peterson, N. (2022).** Implementation Science in Special Education. *Routledge EBooks*, 204–216. <https://doi.org/10.4324/9781003156857-17>
- 78) **Training parents and educators on applied behaviour analysis (ABA). play-based, and speech-language interventions for students with Autism Spectrum Disorder (ASD) : CCCU Research Space Repository. (2023).** *Canterbury.ac.uk*.
- 79) **Tristani, L., & Bassett-Gunter, R. (2019).** Making the grade: teacher training for inclusive education: A systematic review. *Journal of Research in Special Educational Needs*, 20(3), 246–264. <https://doi.org/10.1111/1471-3802.12483>
- 80) **Waddington, H., Reynolds, J. E., Macaskill, E., Curtis, S., Taylor, L. J., & Whitehouse, A. J. (2021).** The effects of JASPER intervention for children with autism spectrum disorder: A systematic review. *Autism*, 25(8), 2370–2385. <https://doi.org/10.1177/13623613211019162>
- 81) **Westerberg, B., Sofie Bäärnhielm, Giles, C., Ulrika Hylén, Fredrik Holländare, & Bejerot, S. (2021).** An Internet Based Intervention for Adults With Autism Spectrum Disorder—A Qualitative Study of Participants Experiences. *Frontiers in Psychiatry*, 12. <https://doi.org/10.3389/fpsy.2021.789663>
- 82) **White, M. G. (2020).** Why Human Subjects Research Protection Is Important. *Ochsner Journal*, 20(1), 16–33. <https://doi.org/10.31486/toj.20.5012>



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