



AUTISM AND SOCIAL ETIQUETTES: A CASE STUDY

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Abstract:

Autistic kids are wired differently for social interaction than their neurotypical counterparts. These neurodivergent individuals express and exhibit cultural and social norms and values in their own atypical way. But these sometimes make them misfit in the social and cultural milieu around them and impacts their social interaction and interfaces. Thus, this is quite imperative to improve their social interaction style and etiquettes. The researcher presents a case study in the form of action research to further investigate this concern. This paper highlighted the importance of Applied Behavioral Analysis (ABA) and interventions to improve the social etiquettes of Autistic kid. Observation technique was used to record the behavior of the subject. The researcher observed the subject during school hours around 7 hours each day, as she is a special aide (one to one) for the case. She only implemented the interventions under the guidance of a trained ABA professional and recorded the behaviors and executed the Discrete Trial Teaching for teaching social etiquettes to the subject. Researcher conducted Informal interviews from all stakeholders who interacts with the case on day-to-day basis, like teachers, teacher aides, special aid teacher and parents to discuss the positive changes in autistic kid's social etiquettes. In conclusion, this case study of a 6-year old autistic kid did confirm, that ABA therapy and DTT could bring positive observable and measurable changes in social etiquettes of Autistic kids.

Key words: *Autism, Social Etiquettes, Applied Behavioral Analysis (ABA) and Discrete Trial Teaching (DTT).*

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Introduction:

“You see, you start pretty much from scratch when you work with an autistic child. You have a person in the physical sense – they have hair, a nose and a mouth – but they are not people in psychological sense. One way to look at the job of helping autistic kids to see it as a matter of constructing a person. You have the raw material, but you have to build the person.”

Dr. Ole Iva Lovaas Norwegian American Clinical Psychologist.

Autism was first diagnosed in the U.S. The incidence has climbed to an alarming one in 44 children, are diagnosed with autism in the U.S. Autism is a bio-neurological developmental disability that generally appears before the age of 3. It impacts the normal development of the brain in the areas of social interaction, communication skills, and cognitive function. Individuals with autism typically have difficulties in verbal and non-verbal communication, social interactions, and leisure or play activities. Autism is diagnosed four times more often in boys than girls. Its prevalence is not affected by race, region, or socio-economic status. Currently there is no cure for autism, though with early intervention and training, the diverse symptoms related to autism can be greatly improved and, in some cases, completely overcome.



The researcher noticed her becoming very overwhelmed, when she sees a big crowd, the researcher has hard time making her participate in gym classes. In any assembly program she would remain glued to her teachers. On contrary, she would do wonderful in Special education classes, with her speech pathologist and occupational therapist. In small groups as well as in one-to-one interactions she does great but when it comes to big groups she can't cope well with the circumstances.

The subject keeps grabbing her peers' food and beverages without seeking their consent. Without any reason or rage, she would hit or hurt her friends. She would not like to share her stuffs with anyone at all. These socially undesirable behaviors of my client are distancing her from friends and peers and affecting the environment and group dynamics of the classroom to great extent. Many are indeed afraid of coming near her. They all have so many questions about her behavior, they laugh at her, they amuse her, sometimes they are amazed by her. Some of them dislike her, some make mockery of her. These all instances intrigued the researcher to further study her unique and unfair social interaction style. Researcher also thought, how to sensitize her peers and develop positive attitudes towards her behavior.

Through many research articles and videos, I have studied I found that autistic kids have difficulty in initiating any social topic, understanding other feelings and expression. They lack on social imitation, social cognition, social skill, and social motivation. Autistic kids do demonstrate persistent deficient in social communication and social interaction (APA, 2013). Multiple studies reveal that children with autism generally rate their own social skills considerably higher than their peers or parents / caretakers. Researcher also came across the concept of Applied Behavioral Analysis (ABA) and Discrete Trial Teaching (DTT) during review of related literature, which is a scientific technique of modifying and improvising behaviors of autistic and exceptional children.

Applied Behavior Analysis (ABA) is the practice of applying the psychological principles of learning theory in a systematic way to modify behavior. Dr Ole Ivar is considered to be a pioneer of modern ABA therapy and grandfather of ABA therapy, who brought to the world the most effective and efficient means of behavior modification, ABA therapy.

ABA is a scientific approach and method to treat or modify aberrant behavior. It is based on the principles of social psychology and behaviorism. It is based on the scientific principle of cause and effect. advocates mechanism of behavior modification with the help of reinforcement and sometimes punishment in lieu of rewards and incentives. It also encompasses theories and principles of motivation and rewards. ABA is an umbrella term which includes DTT as one of the important components and techniques to modify aberrant behavior.

Discrete Trial Training (DTT) is based on principles of small steps and involves breaking down skills to their most basic parts and teaching those skills to children step by step. It is based on the learning theory of Shaping. It is all about learning a small concept or skill in several trials where each small step is reinforced appropriately.

Research questions:

1. Why subject's social interactions are so unique and undesirable?
2. What strategies can be used to improve her social etiquettes?



Objectives of the study

1. To investigate the effectiveness of ABA therapy and DTT in improving the social etiquettes of autistic child.
2. To identify and document the positive changes in the social etiquette observed in the autistic child after ABA intervention.
3. To understand the perceptions of stake holders regarding the impact of ABA therapy and DTT on the social etiquette of autistic child.
4. To provide recommendations for the use of ABA therapy and DTT in improving the social etiquettes of autistic child based on the findings of the study.

Terms of the study:

Autism:

Conceptual definitions:

Autism spectrum disorder (ASD) is a neurological and developmental disorder that affects how people interact with others, communicate, learn, and behave. Although autism can be diagnosed at any age, it is described as a “developmental disorder” because symptoms generally appear in the first 2 years of life.

As per Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5). The DSM-5 breaks autism into three levels of severity, defined by the amount of support that is necessary. These are:

Level 1—Requiring Support: At this level, the individual struggles to initiate communication and lacks interest in relationships. They also exhibit inflexible behavior that leads to disruptions in everyday activities.

Level 2—Requiring Substantial Support: Individuals have apparent difficulty with nonverbal and verbal communication at this level. They demonstrate limited social skills. Their inflexibility makes daily living challenges evident to casual observers.

Level 3—Requiring Very Substantial Support: At this level, the person has severe communication challenges, both verbally and nonverbally. They have difficulties functioning independently in all areas of life.

Operational definitions:

Autistic child – A six-year-old female autistic child who also suffers from Epilepsy. She is level 2 as per the amount of supports she needs.

Social Etiquettes:

Conceptual definition: Social etiquette is exactly how it sounds, it refers to the behavior you resort to in social situations—interactions with your family, friends, coworkers, or strangers. We’re expected to follow social norms to coexist and live in harmony. Social etiquette influences how others perceive and treat you.

Social etiquettes can be operationally defined as the building relationship skill and play skills like taking consent from the owner before grabbing their belongings, asking somebody before giving hugs, taking turns while playing with friends and sharing with friends, raising hands for asking etc., using magic words like, sorry, thank you, please and excuse me.



ABA Therapy:

Applied Behavior Analysis (ABA) The researcher used ABA therapy and intervention to improve the social etiquettes of the subject. Researcher used ABA’s interventions to improve her behavior like keeping calm body and quiet mouth, walking slowly, listening ears, following direction etc. with 20 minutes’ reinforcement schedule. Researcher used a tracker to record the behavior modification and progression.

Discrete Trial Teaching. DTT is sometimes called Discrete Trial Teaching or training was also used by the researcher to teach the client how to walk slowly and act respectfully.

Methodology of Study:

Observation technique was used to observe the subject. Researcher herself is a special aide working with the subject for the last two months almost 7 hours on each school day. We are using Applied Behavior Analysis (ABA) to improve her behavior and Discrete Trial Teaching to train her on social etiquettes. ABA is an old concept, which is being used in behavior modification of differently abled children for the last 50 years.

Researcher also writes special comments about the days when she performed extra ordinarily well and worst too. Every fortnight a trained Board-Certified Behavior Analyst (BCBA) comes to train the researcher on the intervention plan and the strategies to implement. Researcher also used Discrete Trial Teaching (DTT) to teach the subjects magic words like excuse me, please, thank you and sorry. Taking turns while playing and sharing things with her table partners etc.

Sheet 1 Sample Behavior Tracker:

Time Interval	Target Behavior	I have quiet mouth	What I am working for: Write what the student is working for - what is the behavior target? If the student has at least 1 correct item on the grid of the 20 minutes interval
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
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20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		
20 minutes	I have a quiet body		

Above sheet is the behaviour tracker on which subject’s behaviour was tracked throughout the school hours except lunch and recess. The subject was asked to chose a reinforcer , and asked what you would like to work for ? Reinforcers mainly fell in three categories like tangibles, edibles, activity based like coloring , drawing, listening to frozen song etc.



A timer for 20 minutes was set, and the subject was told she has to follow the rules for 20 minutes and if she follows it she gets rewards of her choice. She would get a X if she breaks the rules and a smily face for following the rules. Every time rules were clerly told to the subjects before setting the timer for 20 minutes.

Throughout the school day, every 20 mins the subject would work towards the rules, if she breaks the rule more than 3 times within that 20 min period, she doesn't get her rewards, between two rewards she gets 3 min of break too. There are some pre specified rules like keeping calm body, quite mouth, listening ears, walking slowly, and waiting patiently. For these behaviors' modification and maintenance, ABA intervention was used rigorously on the client.

Sheet 2 Behavior Tracker of The Subject

Date: 02/08/2023

100th Day of school (Lot of activities)

Time Period	Eva's Rules: I have a calm body Listening ears I have quiet mouth (in each 20 minute interval, place an X every time Eva breaks the rules)	Waiting patiently	Walking slowly	What I am working for: (write what the student is working for - give a 3 minute break if the student has at least 1 empty box at the end of the 20 minute interval)	More usually = Arts Craft
H.R 20 minutes	(U)	(U)	(U)	(U)	M&M
Sp.Ed 20 minutes	(U)	(U)	(U)	(U)	Frozen
Sp.Ed 20 minutes	(U)	(U)	(U)	(U)	sticker
S.T 20 minutes	X	X	(U)	(U)	Frozen
H.R 20 minutes	X	(U)	(U)	(U)	M&M
H.R 20 minutes	X	(U)	(U)	(U)	Frozen
H.R 20 minutes	X	(U)	(U)	(U)	Frozen
H.R 20 minutes	X	(U)	(U)	(U)	Frozen
H.R 20 minutes	X	(U)	(U)	(U)	M&M
Sp.Ed 20 minutes	(U)	(U)	(U)	(U)	Frozen
H.R 20 minutes	(U)	(U)	(U)	(U)	M&M
H.R 20 minutes	X	(U)	(U)	(U)	Frozen
H.R 20 minutes	X	(U)	(U)	(U)	Frozen
A-R 20 minutes	X	(U)	(U)	(U)	sticker
20 minutes	X	(U)	(U)	(U)	sticker
20 minutes					
20 minutes					
20 minutes					

The subject faired so well on this particular day. Above sheet is showing, how the client's behaviour is tracked on everyday basis. How reseracher tracked the behaviour by putting X and smily. What all reinforcers or rewards the client chose and where was client , in her hoom room (H.R) special Education class(Sp.Ed) speech therapist (S.T) etc ?This particular day was activity oriented and she was completely engaged in Art and Craft and fun activities.



Sheet 3 Another sample of Marked Behavior Proforma

Time Period	Eva's Status 1 hour, 45 min body					What I am working for (write what you noticed in working for - give a 2 minute interval, if the student has at least 1 activity done at the end of the 20 minute interval)
	(0-10 min)	(10-20 min)	(20-30 min)	(30-40 min)	(40-45 min)	
H.R	X					
H.R	X					
Sp. Ed						Frozen
Sp. Ed						M&M
Gym						Frozen
Gym	X					Frozen
H.R	X					M & M
Sp. Ed	X	X				Frozen
H.R	X					Frozen
H.R	X	X				stickers
H.R	X	X				Frozen
H.R			X			Frozen
20 minutes						Frozen
20 minutes						
20 minutes						
20 minutes						
20 minutes						
20 minutes						
20 minutes						
20 minutes						
20 minutes						

Above sample of marked behavior proforma reveals that the subject did great in the Gym that day. During gym class she would be reluctant to participate, as there would be around 50 kids from two classrooms. She becomes overwhelmed when sees a crowd. That day she immediately joined the gym class and participated in all the activities.

Data Collection:

Unstructured and informal interviews from the stakeholders like homeroom teacher, Special Ed teacher, Teacher aide, Occupational therapist, Speech pathologist and parents were taken, asking about impacts of ABA therapy on subject’s social interaction or etiquettes pertaining to calm body, quite mouth, walking slowly, listening, following direction etc. All the stakeholders were asked what behavioral changes they are observing in the client after the ABA therapy was implemented and executed?

In words of client’s home room teacher “In the beginning subject would constantly get up from her sit, hit her friends, grab things, hurt her friends. It was extremely hard to teach the class, as I would be busy handling her. But after ABA interventions, she has calm down a lot, she sits her on chair for great amount of time, she walks better. After interventions she has academically and behaviorally grown. She focuses more, learned to sit. She raises her hand if she needs things, so yes interventions have brought positive improvement in Eva, she has improved a lot after the interventions.

Special Education teacher quoted, “student before intervention was very defiant, very off task, easily distracted the work was not getting done, I had to do extra modification, on top of the modification already I did just to make the work complete and focus on skill. After intervention were in place, she was able to sit longer



period about 20 min. then she will get her break. She was able to do more problems, sometimes she will be able to complete all the problems sometimes half of it just because of the enhanced ability to stay on task. She is learning more; she can follow direction. She can be more independent with her work. So, interventions are being effective so far.

Occupational therapist quoted “when she started at the school, she was very shy and kept to herself. It would take lot of prompting to get her to answer simple questions how are you? Now she is a lot more independent in communicating her wants n needs”.

Speech pathologist quoted from the beginning of the school years to now the client has exhibited the following, more engagement with activities, improved direction following, increased mean length of utterance, increased functions of language like discourse, response, regulate direct action etc.

Her classroom teacher aide commented, the most remarkable difference the researcher observed in the client is that she now raises hand for asking things or now she clearly asks for things. Another teacher aide commented intervention has brought out many changes in the subject, her communication skills have improved, she has gone from hand gestures as response or non-verbal responses to one-word responses.

Discussion and Conclusion:

Almost after two months of ABA interventions and DTT the subject did display some observable and objective changes in her behaviors.

- Subject maintains calm body and quite mouth to greater extent now.
- Subject now shows some restrain in grabbing and gulping others' stuffs.
- Also demonstrates better control on walking, follows direction to great extent, that is amazing, uses the magic words like, please, thank you, excuse me little more frequently. She does demonstrate great deal of patience in her response.
- Her stereotypic behavior has reduced to great extent, and she follows direction from all her teachers, therapists for great amount of time.
- She has become very verbal and vocal. She responses to each question and statement posed to her verbally and clearly in yes, no, or ok.

Researcher is really amazed, to see her change so much in this short period of time. The subject has shown progress, in all aspects of development, social, mental. emotional and physical. She is progressing academically as well as behaviorally. Overall, we see great amount of change in the subject's behavior after the implementation of ABA therapy.

Once again, we can conclude from this case study that ABA therapy is indeed a very effective and efficient method in improving social skills of autistic kids and it helps a lot in reducing the stereotypic and self-stimulating behavior.

“There needs to be a lot more emphasis on what a child CAN DO instead of what he cannot do”.

Dr. Temple Grandin



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