



The BEST PRACTICES

Newsletter
Of

*The Interdisciplinary Council on
Developmental & Learning Disorders*

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The Best Practices Newsletter of the Interdisciplinary Council on Developmental and Learning Disorders is written to provide regional updates and networking opportunities to professionals and parents working with young children with communication and relating challenges. We hope to provide information and support and welcome any feedback or contributions that you may have. Please E-mail your comments to:
Jo Raphael, MSW, Editor: jraphael1@comcast.net.





EDITORIAL NOTE

Jo Raphael, MSW and Molly Romer Witten, Ph.D.

Dear Readers,

We are excited to bring you some very creative and thoughtful articles in this issue as we strive to stimulate your thinking as to how it relates to your practice and/or your child. DIR® continues to expand and our writers share their new insights and practical applications with us.

It is exciting to see how different people are able to utilize the DIR model in very innovative and creative ways. There is an article acquainting us with a new Parent Child Workshop describing how they weave the DIR methodology into their play and group sessions. Additionally, there is an article written by one of the parents who participated in the group who shares her insights about her experience with us.

As springtime approaches we are able to get out more which can sometimes lead to coping with taking our children to the playground. Playground politics are hard for any child but for a child with challenges in communicating and sensory and motor abilities, it can be a stressful and difficult time. We have included several articles written by DIR clinicians on how to utilize DIR® while on the playground.

As always, the authors of the articles would appreciate your feedback and further conversation.

We would also like to hear from you. We will continue to bring you cutting edge articles that reflect *Best Practices* and welcome your feedback and contributions.

Please contact either or both of us: jraphael1@comcast.net and beso1948@global.net.

Best regards,

Jo & Molly



DIR® ON THE PLYAGROUND: A Pragmatic Approach

Michele Ricamato, CCC/SLP

What makes playgrounds so challenging for children with disorders in relating and communicating? The answer is as complex as the politics our children face at the swing sets. However, from a language perspective one component that creates the difficulties on the black top is pragmatic language. Pragmatics is defined as a set of sociolinguistic rules related to the use of language during communication. It is the way that language is USED to communicate with others, rather than the way it is structured or sounds. Social pragmatic rules in conversation include: turn taking, opening conversations, maintaining conversations, and making relevant contributions to the topic. Additionally, the ability to repair through giving and receiving feedback, correcting errors in conversation, and maintaining roles within a dialogue are also important aspects of pragmatic language.,

In order to support children who experience difficulty using pragmatic language, one to one intervention is often effective, necessary and facilitating. For children who are developmentally ready for peer interactions, starting with a small group (1-3 peers and the child needing support) and one facilitator within a quiet environment is often a stepping stone before going to the actual playground where sensory information is often overwhelming and disorganizing, derailing the process of interaction.

Within the small group, activities that work to build mutual relationships between peers while supporting pragmatic language goals are essential.

Utilizing the principles of DIR ®, the child with special needs can bring an item of interest, initiate a topic or bring a favorite game to play with the group. Focus on interpreting and providing the correct nonverbal cues to communicative partners is often the first goal within sessions. Playing games without the use of verbal language heightens the opportunities for peers to begin to interpret meanings of gestures, facial expressions and affect cues.

Once the dynamics within the group are well established and comfortable, the facilitator can create opportunities for problem solving and discussions where conflicts or differences of opinion may arise between the children. The facilitator can then act as an interpreter when a peer partner misreads, cannot repair or is unable to express their intent effectively within the group process. We have found that groups work best when they meet at least three times per week within a recess/lunch time during the school day. Alternating the peers within the group from time to time also supports building relationships when there are many students in the class.

When the child with special needs begins to feel successful during interaction within the small group setting, moving to the playground with the core group of children (a total of 3-4) can be a supportive bridge to interacting in the face of multiple interpersonal and sensory dynamics. The group will have an established relationship to bring to the outdoors while the facilitator supports the interactions on the playground, helping the child with special needs initiate, mediate, repair,



and generally maintain interactions, and interpret and give appropriate nonverbal cues in order to successfully engage and communicate. This multi-step, multi-faceted process will benefit all

children (typical and atypical in development), by supporting richer social pragmatic abilities in interactions as they navigate the complexities of the playground environment.

DIR® ON THE SCHOOL PLAYGROUND

Michele Havens, Ed.D, Educational Director

Nanette Tangkeko, MA, Floortime Director

Imagine Academy

Brooklyn, NY

Floortime is traditionally thought of as an intervention indoors, at home or in the classroom. The playground is a great place for Floortime with all children. How can we bring this method of intervention outside onto the playground, either at home or school? The same principles will apply. Engagement is the ultimate goal and priority; with affect and movement as the critical ingredients. Model strategies and offer coaching to the children and staff, if necessary. Be on the lookout for opportunities to engage in a back and forth exchange. The playground is a highly motivating place for most children, so capitalize on the affective states that are naturally present on the playground. Some downtime is inevitable, but work to keep it to a minimum.

What equipment is available on the playground? Slides, climbers, tubular structures, and swings all lend themselves to playful obstruction. Get in the way! Some playgrounds can also be modified. Swings can be removed or moved. You can use other materials on the playground. Dolls or stuffed animals can go on the climber or down the slide.

Follow the child's lead, but don't act on what you anticipate the child wants, wait and watch. Your level of waiting and watching is largely dependent on developmental levels of the child, so begin with something familiar. When the child reacts and attempts to communicate-expand, expand, expand, using high affect. If the child is unfamiliar and tends to wander without showing interest, gesture toward choices of play equipment and give yourself time to observe the child. Change your tone of voice or volume, if needed.

To "woo" the child: appeal to his sensory profile – rub dirt into and around your hands (and his if possible). Appeal to his visual perceptual profile – use a funnel with the dirt or sand. Appeal to his auditory perception, pour dirt or sand into a cup, cover and shake. Try motor planning, make a mound of dirt and jump on top. Continue to use gesture and high affect as you describe your actions.

If the child walks away, go where she's going, get involved again with what appeals to her. Start again and remember the following:

- I. Open and Close Circles
Find what interests the child, stop and wait for the child, in turn, to initiate and use intent to continue engagement.



Use repetition initially in creating the play exchange, keep going – when the child becomes comfortable with the partnership, add another action / toy / play sequence. Keep in mind his individual differences.

II. Extend the circles of communication.

III. Expand-expand-expand

Depending on what you have observed as the child's ability in motor planning and their interest in the equipment, use playful obstruction. Then wait, what does the child do? Try playing dumb; put your hand in the way, then your foot, whatever it takes!

Some activity ideas for the playground:

1. Chant to "Going on a Bear Hunt": We're going to the playground – the playground – the playground...
2. Play stop & go / fast & slow games
3. Become a dinosaur and stomp around toward the child, see if there is a reaction
4. Sing out your actions, as you do the motor movements
Knock, knock on the playground
Up, up, up on the steps
Down, down, down on the slide
We'll have fun on the playground
Today! Hooray!
5. Bubble hunt with a battery operated bubble machine; find where the bubbles are coming from
6. Hide & Seek
7. Tag with home base
8. Dance and move to:
Round, round, round on the playground
Twist, twist, twist, by ourselves
Round, round, round on the playground
We'll have fun
On the playground
Today! Hurray!
9. On a warm day, use physical elements playfully. What was the reaction to sand and dirt?
10. Climbing – Representational drama
 - a. 3 Little Pigs
 - b. Ants Go Marching
 - c. Daddy Works With One Hammer
 - d. Camping
 - i. Lost
 - ii. Treasure Hunt
11. Balance beam activities
 - a. Fishing
 - b. Picnic in the tower
 - c. Bumble Ball Madness
 - d. Kickball Targets
 - e. Follow the Leader
 - i. Marching
 - ii. Crawling



- iii. Jumping
 - iv. Galloping
 - v. Waddling
 - vi. Noising
 - vii. Whispering
 - viii. Tapping
 - ix. Pounding
- 12. Musical swings
 - 13. Hunt for bugs with flashlights
 - 14. Simon Says
 - 15. Act out a Train Trip
 - i. Tunnel
 - ii. Mountain
 - iii. Circus
 - iv. Roller coasters
 - v. Canada
 - vi. Florida
 - vii. Ice cream factory
 - viii. Farm
 - 16. Create a trail
 - i. Lines to follow
 - ii. Ropes to cross
 - iii. Hula hoops to jump
 - iv. Balance beam to cross
 - v. Monkey bars to swing
 - 17. Animal swings-move the swings as an animal
 - i. Horse
 - ii. Elephant
 - iii. Bird
 - iv. Ostrich
 - v. Tazmanian Devil
 - vi. Polar Bear
 - 18. Parachute tent
 - a. Who could be around my tent-a bear, an alligator, a Daddy?
 - 19. Water spray tag
 - 20. Rock hunt for rock gardens
 - 21. Stick hunt
 - a. Send an SOS message
 - 22. Bean bag catch to the highest tower
 - 23. Jump rope can be a snake or other animal or lizard



The Parent Child Workshop

Molly Romer Witten. Ph.D.

The Parent Child Workshop (PCW) is a parent peer playgroup for preschool children with regulatory and sensory integrative issues, and their parents. Each playgroup consists of five children, one parent of each child, an occupational therapist, a developmental therapist (DT), and a clinical psychologist. Additionally, there is monthly speech and language consultation for the therapists. The parents and therapists are informed in their interactions with the children by principles of the DIR paradigm including:

1. The activities of the playgroup are organized by the principles of Floortime
2. Lowering each child's anxiety through ready availability of their parent
3. Observing and acknowledging the changing variation of each child's individual differences throughout the play
4. Creating enticing play based on each child's unique developmental and sensory profile

However, the children only know that it is really fun to come and play. There are a few toys and props: some large motor equipment, a bin of sand, a bin of bubble blowing water and tubes, some flubber with small interesting 'real' objects in it, and some dress up clothes. It is the intent of the therapists that the children will discover that their parents and themselves are the best toys to play with.

The PCW meets two days a week for two hours each time. Everyone, including parents, children and therapists, play during the first 45-minute period. Then there is a fifteen minute transition clean up time. Following clean up, the children sit with

the therapists and have snacks that they brought from home. Since each child may be on his or her own unique diet, the standard is for each child and their parent to bring whatever they want to eat. While the children are having snacks, their parents bid them goodbye and move to a separate room to share observations, comments and concerns about the play with their child and the other children with whom they were just playing.

The second hour involves clinically supported peer play among the children, with the OT and the DT. Having just had 45 minutes of play with their own or other parents nearby, the children are full of ideas for play. During the first hour, but more so in the second hour the therapists facilitate group play among the children by working with each child individually. The therapists' alerting and orienting activities are mostly non-verbal, and may include creating an auditory and/or proprioceptive rhythm that is 'catchy' and that all the children wish to join, developing one child's problem in play into a group problemsolving activity for a moment or two, or following the lead of one child and enticing other children into the drama of the play for however long it lasts.

In their meeting during the second hour, the parents discuss their play session by reviewing their thoughts about each child's play. As the parents come to feel comfortable with one another in their own group, they become self-reflective about where they found themselves stuck in following each child's lead, what they observed and experienced. Parents support each other to look at each child with new eyes. Similarly the parent



group can be a place to feel understood as the parent of the child with issues that cannot easily be seen outside of the immediate interaction. This support helps parents to develop plans for carrying through on Floortime at home, and reflect on the growing hope they feel for their child. The discussion among the parents is spontaneous, without structure, far reaching, and may cover any aspect of the play that they just experienced. The psychologist facilitates the parent meeting.

During the last fifteen minutes the children come to the 'mommies and daddies' room and call for their parents. Initially the therapists encourage the children to knock on the door, and call. Eventually, each child learns to identify themselves, and call for their parent, depending on their level of early emotional development; "it's Tommy, mommy, it's time to come back". The parent child pairs find soft comfortable 'clouds' to rest on, and reunite. After a few minutes coming together again, the DT entices the assembled group to remember what they liked and didn't like about their activities. She may ask a child, or recount some memorable moment for the group. Each child participates whether they are verbal or not. As well, the children decide how to say goodbye to one another. Most of the time there is a 'good bye' song sung to each child, using the words that the child provides. Sometimes the children decide not to sing, but to lay quietly for a moment, say good bye and leave. There is no 'circle time' at the PCW; the closest thing to it is when the children all reunite with their parents together and lounge around getting reacquainted with

each other. At the beginning of the year it is often a tearful time full of expressions of sadness, disappointment at the separation, and perhaps anger. As the year progresses the ending time becomes a joyful time of reengagement between child and parent, evolving into an interactive group process.

Over the course of the year, the structure of the interaction also evolves. During the first month the parents and their children struggle to find moments of mutually satisfying play with each other. The children's awareness of others then begins to emerge as a wish to play physically closer to one another. As this happens the therapists begin to find children 'clumping' near each other and moving out from interaction with their own parents to using other parents as helpers in the play. For this reason each parent is called by everyone "mommy-name" and "daddy-name". While it may feel silly at first for parents to hear themselves called "mommy Jane" or "daddy John", the children develop the knowledge that they can approach anyone for help. From the perspective of parallel play the children begin to imitate each other, and use their parents as bridges to play with another child. Most children are not primarily verbal at this point in the group. The wish to play precedes the capacity to verbally relate to each other. During the last half of the eleven month year, the children become more and more interactive, sharing their ideas for play, beginning to negotiate with each other, and harnessing their wonderfully creative energy in the service of developing their own ideas, thoughts and wishes.



BUILDING RELATIONSHIPS IN A PARENT CHILD WORKSHOP

A Parent's View

Building relationships has always been easily obtainable for me. Social contact was a very important focal point in my maturation. Relationships were fun and they always enhanced my life experiences; good or bad. In fact, all of the people from my past have molded me to be, well, *me*. So why is any of this pertinent to this article? Fast forward to the present time and you see a much different picture of *me*. A vision of struggles and frustration, anxiety and tears, hopelessness and shame form my current landscape. A depressing depiction all because I have realized that this natural progression of building relationships will not be so easily acquired by my son. And learning to teach him how to build enjoyable relationships, when my assumption was that they occur naturally, has been quite an emotional and mental challenge. One that took my vision of motherhood to a new level and made me have another look at my maternal role.

Once I crossed this threshold into parenting a child with a regulatory disorder, “dedicated” became an entirely new word in my vocabulary. I was quickly forced to evaluate my life and my new undertaking. Living suddenly became mentally exhausting, not to mention how tired I was of chauffeuring him around to his various therapies that never seem to be close to home. I was jealous of watching other parents with their typical kids while I struggled with my atypical kid. I was a bundle of anxiety, my formerly comfortable existence a distant memory. What type of parent did I now strive to be? Well, after an entire school year spent building relationships in a Parent-Child Workshop and the onset of year two, I

derived an answer to that very question: simply, dedicated.

This Workshop is a straightforward partnership between the therapists, parents, and children. *Nobody* gets to take the easy way out of any conflict or stressful situation, parent or child. We don't deal with problems at Workshop; we work through them, painful as that may be. This multi-faceted structure inspires every child to initiate relationships and social interactions with others. And the complexity it takes for the professionals to make available opportunities for intense social encounters and then shape them to the individual differences and developmental needs of every child is merely astonishing.

However, at first, the workshop made *me* feel dysregulated. Here I was with a child who could not relate, with a mom who was mentally worn-out, while the staff was evaluating how to make the chaos cohesive. Everyone involved experienced some serious growing pains before the program started to click. The group felt scattered and displaced. I started to have doubts about the benefits of the program. It took the framework of the psychologists and therapists to support our entire group. Their commitment and devotion allowed both the children and the parents to grow. Through modeling and coaching, parents and children finally began to understand their individual roles. Vulnerability became more comfortable and one by one the pieces connected. Towards the end of the first year, kids, parents and therapist were all interacting functioning like a well-oiled machine.



It was very empowering to witness such an amazing process. The loyalty and dedication by all parties involved was extraordinary. By the end of the year, children who at first played on the perimeter of the room, distant from one another, were all sitting around a bucket of bubbles, deciding whose car would go through the car wash next. Sharing, taking turns, identifying visual clues, and being respectful of others feelings became the rule rather than the exception. I am grateful for this

journey. Even though at times I felt (and continue to feel) challenged and overwhelmed, I remain committed and dedicated to helping my son regulate and be related. It is all worth while when I observe what a typical little boy my son is growing into. I will regret the day when we outgrow this group, although the relationships that we have built will outlast the program. For now we hang on and enjoy the ride.

Just a mom in Chicago

TO THE TWO WHO NEVER GAVE UP

Jacob (of Jacob's Story, now 15)

To the two who never gave up
this is all I have to say.
Thank you for never giving up on your children,
especially the youngest one.
For a decade and one fourth ago
he was like any other toddler his age;
until one day he didn't seem to answer you.
You thought it was nothing much,
but over time he became more
distant, and seemed to forget how to talk.
You were not sure what it was,
you thought that he was deaf or dumb.
You confronted a specialist,
he said that he was, as some would say
a "retard". To be more specific
he was like Rain Man.
He said the most "effective" cure
was to train him like a dog.
You knew this was foolish and inhumane.
So looked left and right,
but nothing was to be found.
Until one day, you met a very wise man,
who could help you cure your son.
You jumped at the chance, and so
he told you about some places where they could
help your son.
You were sure it was the best action,
and oh how right you were.
For over a painful and costly process
He was able to speak just two years later.
And now he writes on his fancy laptop
over a decade after.



UPCOMING CONFERENCES AND TRAINING

SAVE THE DATES!!!

April 28 - May 1, 2006 – Washington, DC Metro Area. *The Infancy and Early Childhood Training Course.* Presented by Stanley Greenspan, M.D. and Serena Wieder, Ph.D. Register online at www.StanleyGreenspan.com.

May 19-20, 2006 – Rockville, MD. *The Affect-Based Language Curriculum (ABLC) An Intensive Program for Families, Therapists and Teachers.* Presented by Diane Lewis, MA, CCC-SLP. For registration materials please contact Cindy at ablc2004@hotmail.com or 301-258-1004.

May 20, 21 & 22, 2006: University of California at Los Angeles. *International Conference on Signs of Autism in Infants: Recognition and Early Intervention.*

Presenters include: Stella Acquarone, Ph.D., Hanna Alonim, Prof. Laurent Danon-Boileau, Barbara Kalmanson, Ph.D., Sandra Maestro, M.D., Henry Massie, M.D., Shelley Mitchell, MSC, SLP, Filippo Muratori, M.D., Michael Siller, M.A., Jim Stieben, Colwyn Trevarthen, Ph.D., and Lonnie Zwaigenbaum, M.D.
For more information visit www.ChildDevelopmentMedia.com or call 800-405-8942

May 26-28, 2006, San Francisco, CA. *Bridges of Hope: International Rett Syndrome Association Annual Conference.*

5/28, 1 pm. Presentation by, Lisa deFaria, LCSW, BCD, on "Floortime for the Child with Rett's Syndrome," For registration information visit: www.rettsyndrome.org or call 1-800-818-RETT.

July 6-10, 2006, Lansdowne, VA

Summer 2006 DIR[®] Institute. Contact: Serena Wieder, Ph.D., Director of Training, swieder@icdl.com

November 10, 11, 12, 2006

Pre-Conference Workshops, November 8-9, 2006.

ICDL 10th International Conference on Autism and Disorders of Relating and Communicating. Hilton McLean, Tysons Corner Virginia (Washington DC Metro Area). www.icdl.com.

PLEASE VISIT WWW.ICDL.COM and WWW.FLOORTIME.ORG

FOR UPCOMING EVENTS.



***Interdisciplinary Council on
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Infants, Children and Families is hosted by **Dr. Stanley Greenspan** and features a variety of guest speakers and topics; practical advice for parents, professionals and policymakers. Topics include early recognition and treatment of developmental difficulties; the misdiagnosis of autism spectrum disorders; learning to regulate moods and impulses; and pathways to empathy and thinking.

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