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**EXAMINING THERAPEUTICS AND AMALGAMATION OF YOUNGSTERS
WITH AUTISM INTO MAINSTREAM INSTRUCTIONAL SETTING USING A
NATURALISTIC APPROACH**

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ABSTRACT

The purpose of this Investigation was to evaluate the impact of a structured community intervention provided to 32 individuals diagnosed with disorder of autism spectrum during the early stages of life, six months post treatment ended, while they were enrolled in public institution. A therapeutic approach was utilized consistently for almost 6 months in a community day-care center. 13 among the young ones had scores lower than criteria for disorder of autism spectrum on the Autism Diagnostic Observation Scale-2 (ADOS-2), while all participators demonstrated clinical progress and noteworthy outcome on the Vineland Adaptive Scales and the Childhood Autism Rating Scale (CARS). While the majority did well in the classroom, 12 needed support in their academic progress.

Keywords: Autism, Therapeutics, Day-care center, Mainstream, Diagnoses

INTRODUCTION:

One indicator of appropriate psychosocial advancement is the young one's ability to transition from a preliminary diagnosis of disorder of autism spectrum, following intense therapeutic care, to an institutional programme designed for young ones with typical developmental patterns [1]. Meanwhile, it is unclear if some young ones with an early diagnosis of disorder of autism spectrum would still exhibit symptoms of the illness, for instance, challenges with social interactivity and intellectual abilities like language, even after being admitted to a mainstream school. An investigation made use of a battery of tests and questionnaires, and made a comparison of 34 people with the best results with 44 people with high functioning autism and 34 people with typical growth patterns, ranging in age from 8 years to 21 years. In accordance to the aforementioned investigation, the 34 people who had received an accurate diagnosis of disorder of autism spectrum in the past and had shown no signs of the illness were no longer exhibiting its symptoms [2]. When receiving therapeutic care other than experimental programmes in community settings, individuals with disorder of autism spectrum may exhibit a range of clinical outcomes [3, 4]. Nevertheless, there are minimal records on their progress in

regular classrooms. Eighty young ones, with age ranging from six to eight, participated in a parent-reported outcome research inquiry [5]. Of them, twenty percent had "optimum outcome," whilst the majority had a variety of issues (spoken language, social challenges demanding medication, needs-specific assistance in the class).

A subsequent research-based inquiry found that 73% of people with disorder of autism spectrum were persistent to meet the criterion for their diagnosis even after receiving a range of therapies from a young age to the years of schooling [6]. After going through earlier research, an investigation [7] noted that kids with disorder of autism spectrum who underwent earlier treatment can still struggle in academics and need continuing support.

This particular naturalistic research inquiry is carried out at Day-care center for individuals with range of developmental impairments in a rehabilitation center (name withheld, which is a health facility where young ones with developmental disorders inclusive of disorder of autism spectrum receive therapeutic remedies and diagnostic evaluations.

The prime purpose of the current research inquiry is to evaluate the long-lasting impact of preliminary intervention programme centered in the community on autistic

symptoms in a sample of younger kids enrolled in mainstream school setting. The inquiry focused longer on whether significant clinical improvements were actually made between timeframe “one,” which involved early entry to the rehabilitation programme, and timeframe “two,” which involved follow-up while enrolled in consecutive regular sessions.

METHODS:

Participators:

From a starting sample of fifty-one, 32 young ones with disorder of autism spectrum diagnoses were chosen from the ones who were referred successively to the Day Treatment Programme and deemed capable of attending elementary institution classes. And the same group served as the sample of the current research inquiry. The first 52 young ones were enrolled in a similar therapeutic programme, and over time, 20 of the participators were removed from the trial since it was determined that their severe autism symptoms and cognitive handicap prevented these young ones from attending mainstream school activities. Among the total participators of the study there were 27 male individuals and when the rehabilitation started, they were between the ages of 24 and 66 months. Both the Vineland and CARS questionnaires were completed at the moment of the preliminary examination.

Intervention:

After a handful of early sessions to acclimatize to the setting and the trained rehabilitation clinician’s, the kid started a structured programme consisting of occupational, speech, and behaviour remedial measures. The programme was implemented using the material and reinforcement based social fundamentals of Applied Behaviour Analysis (ABA) [8] and the child-initiated follow-through methods of Pivotal Response Treatment (PRT) [9]. Everyone responded enthusiastically to a welcoming atmosphere that aimed to increase the child’s affective participation. In accordance with the parental ability to attend scheduled appointments, the number of therapeutic hours ranged from four to six weekly. With a focus on linguistic, additional preparation sessions for groups were conducted.

Evaluation Post Therapeutic Period:

A second evaluation was scheduled and every young one with and their parents had been invited to the daycare rehabilitation center for a comprehensive evaluation that included the clinical procedures and assessments listed below. Inquiring with regard to the young ones behaviour in the educational setting, the unit’s social worker also called the young one’s instructor simultaneously, with consent from the parents.

Table 1: Outcome of 1st and 2nd Assessment- At Times One and Two of the Study

GENDER	N	M	F				
AGE	32	29	5				
1. Age at 1 st assessment	32	42.50	11.50	25	69		
2. Age at 2 nd assessment	32	98.84	15.07	77	135		
CARS							
1. 1 ST Ass.	32	39.76	6.8	51	51		
2. 2 nd Ass.	31	26.48	6.5	15	42	-43	.001
ADOS							
SA	29	8.03	4.64	0	18		
RRB	29	1.69	2.16	0	10		
Total	29	9.72	6.3	1	28		
Vineland 1 st Ass.							
Communication	31	19.39	8.77	9	44		
Socialization	31	16.6	11.1	3	59		
Daily Living Skills	31	22.7	7.7	12	48		
Vineland 2 nd Ass.							
Communication	31	91.10	21.9	57	159		.001
Socialization	31	76.7	24.6	37	147		.001
Daily Living Skills	31	81.1	24.9	42	122		.001

RESULTS:

Thirteen youngsters were no longer diagnosed with autism on ADOS-2, while twelve displayed minor signs and seven had clear indications of the disorder. It was shown that older kids were more likely to score well on the test without experiencing any nervousness. The main characteristic that distinguished the children with features of autism present was difficulty in forming relations with peers.

All individuals showed substantial clinical refinements, according to the CARS data (sign 2-tailed $P < .001$). The three Vineland scales demonstrated a substantial refinement ($P < .001$) (repeat meas.), and there were no

worthwhile changes found when comparing the current scale values with the respondents' age-appropriate standardized values. After the instructors evaluated the young ones, each of them were put in mainstream courses, but 13 of them were additionally allocated for receiving assistance from a teacher's aide, and two of the participators were directed to participate in integrated classes on an intermittent basis. A small number of youngsters, especially those exhibiting modest indications of disorder of autism spectrum, reported struggling academically in linguistics and maths, especially when it came to resolving problems.

Parental interviews and instructor's oral statement yielded insights that suggested general classroom behaviour was not very challenging to manage. Just 3 kids consistently struggled to abide by the regulations of the classroom. Eight children, or approximately quarter of the total, originally exhibited disruptive behaviour, but with passage of time, their behaviour significantly ameliorate. Four young ones—two with anxiety and one with ADHD that required medication—presented with signs of concomitant illnesses. Three youngsters have recurring mild issues with social interactivity. Subsequent follow-up revealed that there were no discernible relationships found between IQ and linguistic ability scores and gender, age at which the rehabilitation started, and the quantity of both individual and collective sessions.

Additionally, the investigation found no statistically significant differences in gender ($P = 0.900$), age at which the rehabilitation started ($P = .612$), CARS baseline score ($P = .652$), or the quantity of individualized ($P = .186$) and group ($P = .975$) therapeutic sessions among young ones who were no longer diagnosed with disorder of autism spectrum and those which were.

DISCUSSION:

The current naturalistic research inquiry demonstrated that a group of youngsters with disorder of autism spectrum which were given systematic rehabilitation at the outset demonstrated notable improvements in their abilities to adapt along with a notable suppression of their autistic signs and symptoms. They also adapted fairly easy to regular classroom settings. The educational outcomes for the bulk youngsters was satisfying although a handful amongst pupils faced varied scholastic challenges necessitating support by an instructor's aide. The behavioural issues did not seem to be severe or long-lasting. It is reported that 13 young ones did not meet the criterion for disorder of autism spectrum on the ADOS-2 (declination of autism diagnoses). There had been two kids taking ADHD medicine. The behavioural issues were not severe or long-lasting. Some of the young ones had trouble engaging with their classmates. A research inquiry found that preliminary rehabilitation improved abilities to adapt and reduced the severeness of disorder of autism spectrum. Furthermore, a previous literature found that between 3% and 25% of those with disorder of autism spectrum later renounced their diagnoses over time.

This might be questioned If the refinement that was seen over the period of schooling was

due to the preliminary, planned intervention or if it happened on its own as a result of how the kids were exposed to their educational environment and growing maturation. The present investigation's outcomes indicate that autistic symptoms are eliminated at the day-care center upon accomplishments of the systematic rehabilitation prior to students reach public school, but improvements related to maturity may still occur. There are various restrictions on research project. Because of its naturalistic beginnings, it only included a small sample of participators and lacked a group to act as a control.

Young ones who received referrals at the program's inception, while the day-care centre was continued to be in its early phases of operation and its personnel continued to receive training, were included in the initiative. Regardless of these flaws, the research inquiry emphasizes how crucial preliminary preschool systematic rehabilitation is, as well as how important it is for a substantial percentage of young ones with disorder of autism spectrum to adapt to mainstream educational setting later on in life. But it ought to be acknowledged that certain young ones might need more help from agencies to cope with issues of developmental concerns if they were having problems in educational setting.

CONCLUSION:

A number of early-referred young ones with disorder of autism spectrum to community-based systematic rehabilitation programmes may show significant clinical progress, enabling young ones to return to mainstream public educational settings. A few of them could need more help to overcome ongoing educational challenges. It's possible that a significant percentage of kids no longer receive the diagnoses of disorder of autism spectrum.

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CONFLICT OF INTEREST: -

I declared there is no potential conflict of interest with respect to this research study.

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