Hackney Learning Trust
Position Statement: Approaches to Autism


Introduction

Hackney has adopted the SCERTS framework to support educational intervention for children and young people with autism. Speech and language therapists, specialist teachers, portage, educational psychologists and teaching staff at The Garden have received additional training in this approach. HLT staff support teachers and practitioners in settings to meet the needs of children with autism.

SCERTS is an inclusive, evidence based educational approach and is increasingly being used around the U.K. It is a framework that draws on a range of practice from TEACHH, social stories and contemporary ABA and provides ‘developmentally grounded goals and objectives’ (Laurent, Prizant, Rubin, & Wetherby, 2010). It focuses on developing the child’s spontaneous communications across different social partners and natural settings to make progress in relevant and functional skills.

SCERTS focuses on social communication, emotional regulation and transactional supports. It therefore does not solely focus on developing the skills of the child but also on the skills and teaching resources needed to enable the child to function well in different environments.

What does the research say about intervention for children with autism?

The ‘gold standard’ of research design is randomised control trials (RCTs). These would allocate children at random to the intervention and control group so that the impact of the intervention can be measured in comparison to children not receiving this intervention. These can be difficult to arrange in a real life setting and as yet, there has not been any research conducted in this way in real life settings. However, RCTs are being funded to look at the impact of SCERTS in this way.

A review of evidence by The National Autism Centre in 2015 concludes that there is an established evidence base for a range of strategies and interventions including the use of visual schedules, social stories, social skills interventions, parent and peer training, self-regulation and behavioural interventions. However selecting the right interventions will require professional judgement, incorporating family preferences alongside building capacity in schools to implement and sustain the identified interventions.

Using a flexible approach has some support in the judgement expressed by Research Autism, a research organisation recommended by the National Autistic Society (NAS). They state: ‘there is no “one-size fits all” solution. Each person with autism is a unique individual with unique needs and abilities. The most effective interventions are tailored to meet the unique characteristics of each individual’ (Research Autism, 2015).

The NAS states in its position statement on therapies and interventions that:

“Autism is complex and what helps one person may not help others, so it is vital that each individual is supported as an individual and any interventions are adapted to their specific needs.” (National Autistic Society, 2017)

Such person-centred approaches are also in keeping with the recommendations of the revised SEND Code of Practice (Department for Education and Department for Health, 2015).
What do the NICE guidelines say?

The National Institute for Health and Care Excellence (NICE, 2013) guidelines about supporting young people with ASD tell us that we should:

- Focus on social communication intervention using play based strategies to increase joint attention, engagement and two way communication
- Use strategies that match the child’s developmental level and should aim to increase parent/carer understanding of and responsiveness to the child’s patterns of communication and interaction
- Use modelling and video feedback

What do the Department of Education guidelines say?

“The special educational provision made for a child should always be based on an understanding of their particular strengths and needs and should seek to address them all, using well-evidenced interventions targeted at areas of difficulty and, where necessary, specialist equipment or software. This will help to overcome barriers to learning and participation. Support should be family centred and should consider the individual family’s needs and the best ways to support them.” (Department for Education and Department for Health, 2015).

Autism Intervention – Hackney Learning Trust’s view

Hackney’s belief about intervention for children with autism is guided by the latest research into how people with autism experience the world.

Children with autism have fundamental differences in the way their brains perceive and process stimuli which need to be take into account when planning intervention. It is also important to recognise that children operate within different settings and environments and whilst it is always helpful to teach the child new skills to enable them to function better within these, it is equally important for those environments to make accommodations and adaptations to meet the child’s needs.

The SCERTS approach we have adopted in Hackney supports these principles. It focuses on developing the child’s spontaneous communication (including protests) and self-regulation skills whilst adapting the environment, learning resources and the skills of adults around them. Emotional regulation is a key focus because longitudinal research tells us that children with well-developed emotional regulation skills have better long term outcomes.

‘Stimming’ (flapping hands or other sensory-driven behaviour) or self-talk would be understood as helpful and self-regulating and not as pathological and needing to be suppressed and discouraged. This view is supported by the Autistic Self-Advocacy Network report (2017).

In Hackney we would want to see the following things included in supporting a child with Autism:

- Protest or refusal to be seen as a form of communication and responded to appropriately
- Stimming behaviour to be seen as a form of self-regulation and responded to appropriately so that it is allowed or replaced with a more functional behaviour
- The use of visuals and other transactional supports to increase the child’s ability to access the school environment independently
- Interpersonal support where adults adjust their communication to match the child’s level
- Include use of alternative and augmentative methods of communication where appropriate e.g. Makaton, PECS
- Reasonable adjustments made to the environment depending on the child’s individual needs
- Differentiation of the curriculum to harness the child’s special interests and skills
- Programmes in school to be overseen by a qualified teacher (usually the class teacher in primary schools, or often the Head of Year or Senco in secondary schools) with support from relevant other professionals (e.g. Speech and Language Therapist, Educational Psychologist, Specialist Teacher, Occupational Therapy)
- Skills to be generalised across different people and settings
- To be positively socially included with their peers, through increasing peer’s awareness of the child’s strengths and difficulties and how they can help

**Applied Behaviour Analysis (ABA) – Hackney Learning Trust’s view**

SCERTS draws upon behavioural principles that underpin a range of behaviourist approaches, including contemporary ABA (Applied Behaviour Analysis). However, we would not advocate a pure ABA approach to intervention for a child with autism.

ABA programmes often include:
- Behavioural emphasis with a focus on addressing each identified “deficit” by teaching the corresponding skill
- Discrete trial teaching – where each skill is taught by one-to-one instruction with stimulus (what is to be learned), response (from child) and reinforcer (reward)
- A focus developing the child’s to function in a mainstream school environment rather than focusing on adapting the environment to support the child’s needs
- Intensity – it is widely believed that as much as 40 hours a week are needed for the programme to be effective
- Family participation

ABA approaches often focus primarily on the child’s skills rather than learning resources, attunement, responsiveness and skills of adults and environmental adaptations.

Adults with autism can tell us about their experiences of behavioural intervention such as in a 2017 report by the Autistic Self-Advocacy Network in conjunction with the University of California. This states that ‘participants preferred treatments to focus on skills that would help them understand their own disabilities and coping with sensory overload, as opposed to therapies that made people look less autistic on the surface.’ (p.1). ABA approaches often focus on increasing neuro-typical behaviours and reducing ‘autistic’ stimming behaviours without always looking at the function they serve.
Conclusion

In summary, Hackney Learning Trust does not believe that one specific approach or intervention meets the needs of all children with ASD. Therefore we draw on a range of evidence based approaches and personalise these for the best possible outcomes for children with ASD. In line with this belief, Hackney Learning Trust has adopted the SCERTS framework which draws on a range of perspectives and interventions in an inclusive, developmental and evidence based approach.

Please use these links to read about some of the approaches that are used in Hackney:

- Social Communication, Emotional Regulation, Transactional Supports (SCERTS)
- Picture Exchange Communication System (PECS)
- Intensive Interaction
- Attention Autism
- Lego Therapy
- Social Stories
- Comic Strip Conversations
- Bridges in Social Understanding
- TEACCH and Workstations
- Sensory diets and interventions

More information about strategies and approaches can be found on the National Autistic Society website here

References


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