Using exercise and activity in physical education to reduce problem behavior and increase student engagement: an evidence based practice



Ann Griffin, agriffin@gwaea.org

Grant Wood Area Education Agency Cedar Rapids, IA Website:



Seattle, Washington

Using exercise and activity in physical education to proactively reduce problem behavior and increase student engagement: an evidence based practice for students with autism spectrum disorder (ASD).

Many teaching strategies and interventions exist for students with autism spectrum disorder (ASD), however, scientific research has found only 27 of these interventions to be effective. Exercise was identified in 2014 as one of the 27 evidence based practices.

This session will explore the use of this evidence based practice and help physical educators to understand student behavior in the context of sensory processing disorders, and assist them to select activities to proactively improve behavior and engagement and help students to "calm". Examples of student "behavior", activity solutions, and a variety of ways in which physical education programming has become an integral part of student behavior plans and school days will be shared.

http://fpg.unc.edu/sites/fpg.unc.edu/files/resources/reports-andpolicy-briefs/2014-EBP-Report.pdf



"The increased prevalence of ASD has intensified the demand for effective educational and therapeutic services, and intervention science is now providing evidence about which practices are effective."

Exercise: 2014 added as EBP due to sufficient empirical evidence

Many interventions exist for autism spectrum disorder (ASD). Yet, scientific research has found only some of these interventions to be effective. The interventions that researchers have shown to be effective are called evidencebased practices (EBPs).

Increase in physical exertion as a means of reducing problem behaviors or increasing appropriate behavior

What's exercise do for your brain?



- Clinical trials show that exercise is as effective as certain medications for treating **anxiety and depression**
- Exercise ramps up levels of serotonin, which calms us down and enhances our sense of safety
- Moving the body also triggers the release of gammaaminobutyric acid (GABA), which is the brain's major inhibitory neurotransmitter (and the primary target for most of our **antianxiety** medicines).

Sensory Processing Disorder (SPD)

Sensory Processing Disorder (SPD) acts like a neurological "traffic jam" that prevents certain parts of the brain from receiving the information needed to understand and respond to sensation. People with SPD misinterpret everyday sensory information, such as touch, sound, and movement. They may over-respond and find clothing, physical contact, light, sound, food, or other sensory input unbearable. Or they may under-respond and show little or no reaction, not even to pain or extreme hot and cold. A third option is sensory-motor problems, including weakness, clumsiness, awkwardness or delays in acquiring gross and/or fine motor skills.

Understand student behavior in the context of sensory processing disorders

Sensory processing ... the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioral responses..."

Sensory Processing Disorder... is a condition that exists when sensory signals don't get organized into appropriate responses.

http://spdfoundation.net/about-sensoryprocessing-disorder.html



Understand student behavior in the context of sensory processing disorders A Child's View of Sensory Processing

WATCH THIS VIDEO!

https://www.youtube.com/watch?v=D1G5ssZIVUw

Sensory Processing Disorder and ASD

More than 90 percent of children with autism spectrum disorders (ASD) demonstrate unusual sensory behaviors.

"When a child finds it difficult to process and act upon information received through the senses, this is called <u>sensory</u> <u>processing disorder</u> (SPD), a neurological condition which often leads to clumsiness, anxiety, depression, behavioral problems, and even learning issues."

<u>http://www.medicaldaily.com/sensory-processing-disorder-and-autism-linked-decreased-white-matter-connectivity-brain-295762</u>

Connect "behavior" to communication sensory need...issue? ...connect to activity and FUN

OBSERVE carefully...use your sensory processing "lens"

What is the student doing? Hypothesize What do you think the behavior means? What might he/she be "asking for"? What might the behavior indicate re: sensory needs? What do we have in our PE bag of tricks to meet these needs?

What might these behaviors look like in the gym?

What's she saying?



What is he saying?



Get me out of HERE!

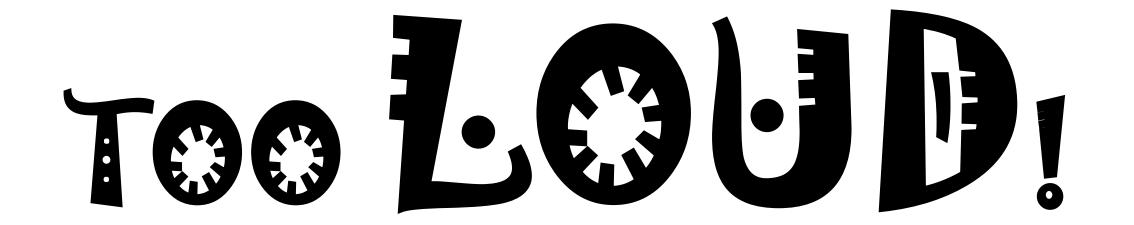
ANXIETY?

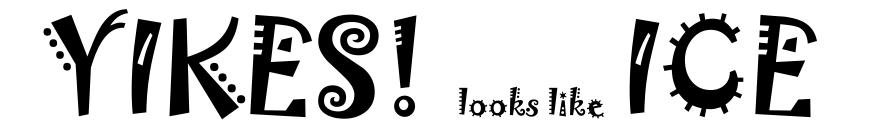
People who are anxious tend to immobilize themselves — balling up in a fetal position or just finding a safe spot to hide from the world.

What are they saying?

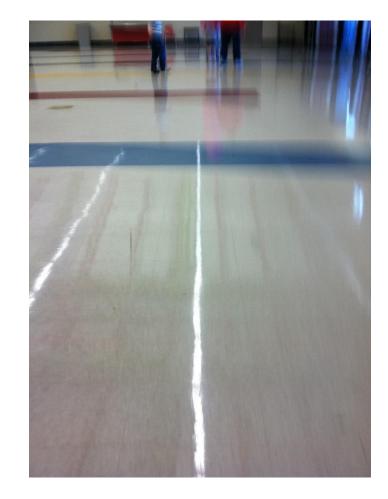






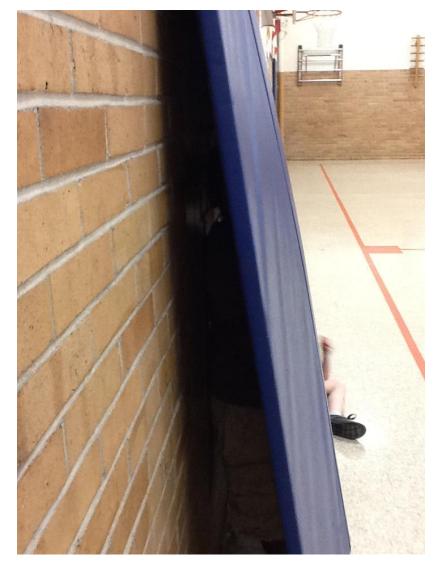






Small Space? Pressure?







Behaviors???? or NEEDS????

Spinning Laps Foot stomping or foot slapping when moving Body slamming walls or mats Jumping and crashing to the floor Jumping and flapping Rocking Head banging Grounding...sliding on the floor

Activities for FUN, action and exercise

What works???

GREAT instructors GREAT instructional strategies: ie EBP's FUN and engaging equipment ACTION!!!

PRESSURE seekers

Mat Sandwich Fitness Ball Squish Bolsters Massagers...Massage Chairs



River Rocks Railyard Fitness Razor Scooters Land Paddles Rollerskating Obstacle courses Indo Boards "Perching"

Balance



Rocking and Swinging

Net swings Hammock swings Airwalker Video Chair



Body Support

Ladders Chinning Bars Stall Bars Climbing Walls Uneven and Parallel Bars Climbing Rope **Playground Equipment**



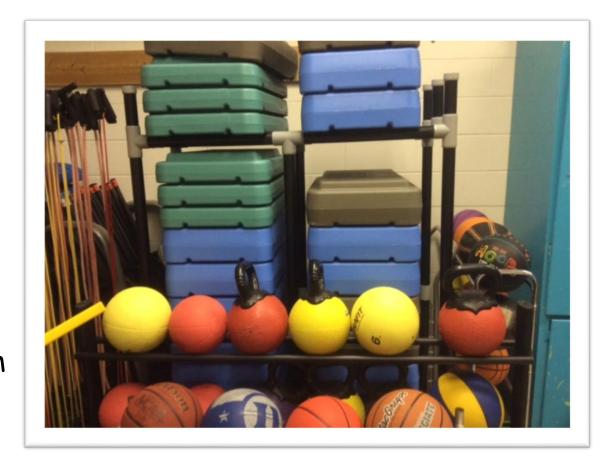
Spinning and Rolling

Dizzy Disc Astronaut Board 5-gallon bucket lid Mat car spins Bolster Spooner Board Ankle Spin



Fitness Room Equipment

Step Boxes Treadmills **Elliptical Machines** Stair Steppers Spin Bikes (with videos!!) **Recumbent** bikes Weight Machines Moon Walkers **Resistance Bands** Foundational Fitness wall train system Medicine balls **Rowing Machines**



Heavy Work/Resistance

Squairs Mat folding, moving Mat cars Bear Walk with scooters Pulling/pushing friends on scooters or parachutes Snow shoes Medicine balls Put equipment away (railyard, bowling mats...)



Stomping...Jumping...Bouncing...Kicking

Step n Launch Ball Stomper Jogging Tramps/rebounders Pogo Sticks Air Pogo Fitness Balls Jump DOWN from height Kicking: Wavemaster "Wrecking Ball"



Physical Education can be an integral part of a behavior plan

- Run laps with every class...scheduled vigorous activity every 40 minutes or as needed
- Join an older class for warm ups
- APE first thing in the morning...shake off the bus ride
- Scheduled prior to core (reading/math...difficult subject)
- Access to fitness room throughout the day
- DAILY physical education...prescribed in the IEP
- Individual PE teacher within GPE class

Integrated into classroom

Stand up desks Wobble stools Cushioned pads to stand on or sit on Rocking chairs Massage Chairs...iJoy Swings for bus transition Variety of seating...rolling, bouncing,

Keymakers: If you know a child with autism, you know ONE child with autism



Some people see a closed door and turn away Others see a closed door, try the knob, if it doesn't open, they turn away Still others see a closed door, try the knob, if it doesn't open, they find a key, if the key doesn't fit, they turn away

A rare few see a closed door, try the knob, if it doesn't open, they find a key, if the key doesn't fit, they make one