

December 6, 2018

Case Study

Aubrey Mansfield

Professor Steve Bell

RECTH 4300

Introduction

For my clinical rotation, I got assigned to Kauri Sue Hamilton. In this great school, I had the opportunity to work with a class of children, each with at least one intellectual disability, ranging from ages five to seven. I chose one of these students, Teddy, to be the focal point of my case study. I did a diagnostic protocol on him, interviewed him (and his main teacher who was the main source of information), and planned and implemented a small intervention for him.

Assessment of the client

Diagnostic Protocol

Diagnostic Grouping:

A disability characterized by significant limitations in both intellectual functions and adaptive behaviors, which covers many everyday social and practical skills. This disability originates before the age of 18.

Etiology:

- Genetic causes
 - I. Hereditary
 - II. More likely when one has certain medical conditions
- Environmental causes

Specific Diagnosis:

- Autism
 - I. Severe autism

Identified Problems:

- Cognitive (comprehension)
- Social
- Sensory
- Speech/ language
- Physical

Problems Related to Recreational Therapy:

- Interacting with others
- Communicating
- Physical limitations
- Difficulty following directions

Client Interview

For the clinical rotation assignment, I got assigned to Kauri Sue Hamilton. It is a school for children and young adults ages five through twenty-two who have disabilities. Most of the students have one or more moderate to severe mental disabilities or medical conditions that make it necessary for them to be educated in a different way than children in regular education. The dedicated teachers and staff in the school not only address the individual needs of their students in all aspects- physical, mental, and emotional and provide quality care for them throughout the school day, but also do their best to alter general curriculum to make it suitable and reasonable to both teach students and for students to have the ability to learn and excel on a daily basis.

The class which I was put in to observe and learn from has ten students who are kindergarten to first grade age and who all have different intellectual disabilities, many

with more than one. Only being halfway through my required hours, I have been able to learn and experience many concepts and strategies that will help me in my future professional experience in recreational therapy. It was difficult to choose just one of the students I work with to focus on for my diagnostic protocol and interview assignments, however I ended up choosing one of the kids with a quieter personality compared to his classmates and whom I felt could use some extra attention

Teddy is six years old. He is classified as a person with multiple disabilities, but the most significant one is his severe autism. Although he is nonverbal, Teddy has found ways of communicating his needs and thoughts. For the time I've been in his class as a volunteer, he has been very quiet, calm, and behaved the majority of the time. So much so that I was beginning to wonder how he, as mellow as he usually is, ended up in a class with a number of kids who have big personalities and often demand a great amount of attention and care. However, when Teddy is happy and excited or at the other end of the spectrum, upset and concerned, he makes sure to let everyone around him know. This is when his autism becomes noticeable, which is an expected symptom.

As mentioned before, Teddy is nonverbal. In my time observing and working with him, I have yet to hear him speak a word. Although the occasion is rare, he does use a communication board, as do the majority of the students at Kauri Sue, to point to mainly responses to questions he is asked a number of times. However, when I tried to ask him simple personal questions for the purpose of my interview, I could not get him to answer me using his communication board. I have had the opportunity of watching him expose little information about his life on random occasions during class activities where his

response is prompted and expected. For example, I've learned that he likes to go home to his family at the end of the school day through the daily class activity of going over the schedule for the day. Also, I've noticed that he likes Mickey Mouse, as he chooses to watch the fictional character's show whenever he gets chosen to pick a video to watch during free time.

As for conducting an interview, I resorted to asking the teacher of the class some questions to help me to get to know Teddy better. After asking about his family, I learned he has a very loving family that consists of a mom and a couple siblings. I asked about what Teddy likes to do and found out he likes to run and play with his siblings and kids his age. I also discovered he is a very affectionate little boy who enjoys hugs. Teddy is an amazing kid all around and I'm certainly grateful for the chance I've gotten to know him.

Intervention Planning for the Client

I wanted to do an activity with Teddy that he had most likely never experienced before in order to get that opportunity to witness and record those true first reactions and effects. As I was searching through articles about different interventions I could try implementing, I found one about yoga and how it could potentially benefit individuals with intellectual disabilities. Yoga seemed like a great modality of intervention to implement for Teddy. Reading through the article, I found that the author predicted that individuals with intellectual disabilities who did yoga might appear to be calmer than usual and more aligned with what was going on. I thought this assumption, explanation, and the article in whole was truly brilliant and something that I wanted to explore.

I spent a great deal of time thinking about what might be the best and most effective way to implement yoga into Teddy's day. I knew I wanted to do a yoga session with him when he was hyper and active to test my adopted theory based on the article that yoga would help Teddy calm down and gain focus, which was my main goal in doing this intervention with Teddy. The objective for our yoga intervention was: After doing a ten-minute yoga session, Teddy will sit in his chair and look at the teacher while she was teaching 75% of the time. Thinking about what setting to do our intervention in, I took into consideration that Teddy paid the most attention and was most willing to follow instructions in a quiet environment with few people around. With this information in mind, I wrote out a few different common yoga positions as my plan for Teddy's intervention. I decided it best to just pull him out into the hall and do a short and very informal session of yoga in order for him to feel comfortable enough to comply to the best of his abilities.

Implementation of Intervention

Fortunately for my ideal plan for Teddy's intervention, he was pretty excited and active the day that I chose to do it. Maybe a little too lively and ready to play for being in school, but nevertheless. I pulled Teddy out into the hall, as planned, and found a quiet space. The main teacher came along just to add support and help me to instruct Teddy for optimal understanding. We also brought treats to incentivize him to do what I wanted, but did not reward him until we were done with the activity. I simply instructed him to do different stretches and did them with him as to provide a visual example. It took him the first two stretches to get the hang of what we were doing, but he caught on

soon. Out of about ten stretches I instructed him to do and did myself, he did eight with me. We did a five-minute yoga session which seemed to be just the right amount of time as Teddy started to get restless during our last stretch. I would call this intervention highly successful as far as what I had planned for and expected.

Evaluation of Intervention

To my delight, Teddy was very compliant to my prompts and instructions. He seemed to enjoy getting to move his body and be in a quiet environment while he was doing this. He was fairly calm and focused during our activity, quite a contrast to his behavior in class. He also seemed satisfied after while he was eating his treat and I was jotting down a few notes. When we returned to class, his calm demeanor lasted for a while. The teachers even commented on it. I took note that based off of this test intervention, the author's prediction was proven to be fairly accurate.

Conclusion

During my process of working with Teddy, I got the opportunity to witness him achieve a couple different goals that were set for him by teachers, occupational therapists, swim instructors, and more. When he is focused and attentive, he is able to accomplish fantastic things. Although I did not get the chance to see Teddy go through the RT process or set an official one for him, I truly think that it would benefit him based off of what I learned and experienced with Teddy.

References:

- Rudy, Lisa Jo. (2018) What Makes Severe Autism So Challenging? From
<https://www.verywellhealth.com/what-is-severe-autism-260044>

- Rommel, T. M., & Anderson, C. J. (2013). Benefits of Yoga as an Intervention for Those With Intellectual Disabilities. *Therapeutic Recreation Journal*, 47(3), 212.