

# **THE SIGNIFICANCE OF FORMAL TRAINING IN CHANGING THE LANGUAGE BEHAVIOR PATTERNS OF AUTISTIC CHILDREN IN PAKISTAN**

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## **Abstract**

*Autism is a complex neuro-behavioral condition or disorder that includes impairment in social interaction, developmental language, and communication skills combined with rigid, repetitive behaviors. Autistic children need trained caregivers to help them thrive in the competitive world. Even though nothing cures Autism, early interventions applying both behavior modification and skills training have proven to work remarkably. It also elevates the chances of an autistic learner to attend a regular school and participate in regular activities. In Pakistan, many diagnosed autistic are left at home because their families are afraid of being stereotyped, carrying false beliefs, or having financial issues leading to deteriorated life conditions. A sample of 20 Autistic students was selected using Convenient Sampling from Lahore, out of which 10 children were school-going and 10 were kept at home for varied reasons. A mixed-method approach was applied to this research. The same ASD assessment scale was used on both school-going and non-school-going autistics and their results were quantitatively analyzed using column charts later a qualitative analysis was drawn to understand the different therapies being applied to school-going autistics, how they benefit from that, how non-school-going autistics are attended to and what are the reasons for their parent's reluctance to send them to special schools despite the diagnosis. The results showed that school-going autistics were doing a lot better with a remarkable difference in their behavior from the*

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*time they were enrolled in the school. With the help of a schedule and therapies, a lot of their behavior; social, and speech problems were resolved. Hence, the conclusion suggests that there are a lot of myths and misconceptions in the minds of parents in Pakistan leading to their Autistic child being kept at home. There is a dire need for autism awareness and more research on Pakistani autistics to bring about more functional autistics.*

**Keywords.** *Autism, Social Behavior, Myths, Behavior Modification.*

### **Introduction**

*Autism Spectrum Disorder is said to be a disability that needs prime care at the hands of caregivers to improve their living standards. If mishandled, it can deteriorate from worse to worse. In Pakistan without proper training families tend to keep their ASD children at home either afraid of being stereotyped or due to lack of funds to afford a special school which ends up increasing their chances of deteriorating from high-functioning to low-functioning Autistics.*

*Autism is a complex neurobehavioral condition that includes impairment in social interaction and developmental language and communication skills combined with rigid, repetitive behaviors.*

*According to the description by the American Psychiatric Journal, ASD is a developmental disability that comes to the surface in early childhood. Other ASD includes Asperger's syndrome, and Pervasive Developmental Disorder (PDD). Autism and the rest of ASD is tricky when it comes to diagnosis since the symptoms and degree of impairment vary from mild to severe and differ from child to child. According to some research, the severe form of autism leads the child to not be able to speak or communicate and might never make eye contact. However, many ASD children still manage to lead a comparatively normal life given the prime care they deserve.*

*Over the decades, the prevalence and occurrence of ASD has seem to increase and they keep on increasing at a steady pace; the recent estimate for the occurrence of ASD is more or less 1 in 68 children over the age of five years (CDC, 2014).*

*Researchers are of the point that people diagnosed with Autism needs to be treated immediately. Even though, nothing cures Autism, however, early interventions applying both behavior modification and skill-training has proven to work remarkably. Both behavioral and educational treatments handle the symptoms for ASD, social interaction, communication issues, and repetitive behaviors amazingly. It also elevates the chances of an autistic to attend a regular school and participate in regular activities.*

## **Statement of Problem**

Autism Spectrum Disorder is said to be a disability that needs prime care at the hands of caregivers to improve their living standards and if mishandled can deteriorate from worse to worst. In Pakistan without proper training families tend to keep their ASD children at home either afraid of being stereotyped or due to lack of funds to afford a special school and ends up increasing their chances for deteriorating from high functioning to low functioning Autistics.

## **Significance of the study**

**Practical significance** - it might present information to understand the importance of specialized care for ASD students and how much the children who are left unschooled miss on the opportunity to be more functional. The data will assist ASD students, their parents, faculty and staff at universities of higher education.

**Empirical significance** - the current data does not pertain to any information of the specific target population of this study. Almost all the studies on Autism are carried out in America over American citizens where there is a strong legal system to protect the rights of their special citizens and helps as the awareness tool and support system for those who have an autistic family member unlike the third-world country like Pakistan where people are unaware of Autism let alone the effective ways to deal with autistic learners. The ambition I hold from this study is to bring to notice the needs of this specific set of population; homeschooled/unschooled learners with ASD. The data retrieved may prove to be an eye-opener for parents who choose to keep their kids with special needs at home.

## **Research Objectives**

1. To compare the behavior patterns of Autistic learners; those enrolled in schools and those homeschooled/unschooled
2. To chalk out the effective therapies for Autistic Learners
3. To understand why despite the identification, people in Pakistan refuse to enroll their children in special schools

## **Research Questions**

1. Does formal education bring a difference in the behavior of Autistics in their personal and public life?
2. How do school going Autistics function differently from the non-school-going Autistics?
3. Why despite the identification, do people in Pakistan refuse to enroll their children in special schools?

Autism spectrum disorder (ASD) is a group of serious neuropsychiatric conditions that normally include impairments within reciprocal societal relationships in addition to within verbal exchanges (APA, 2000).

These impairments usually take diverse sorts, starting from those who have

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no verbal exchange to those who have fluent, grammatically proper dialogue. This is not surprising, due to the fact that communication demands a lot of skills, a number of which are generally impaired within ASD, for instance generating ideal prosody (Kanner,1943) in addition to “**theory of mind**” (Baron-Cohen, 2000).

There has been an ongoing debate regarding terminologies that either condition or disorder works well with Autism. Baron-Cohen et al., (2014) were of the view that ASC is far better than ASD as it is less stigmatizing. And highlights these people not only with their disabilities but also their cognitive strengths. (p.500).

### **Effect of gender on Autism**

An interesting and worth noting fact about autism is that it effects more boys than girls. Baron-Cohen’s 2015 study suggests that there are clear differences at cognitive, interpersonal and social level between the girls and the boys. The research also proves that the girls might possess an innate protective mechanism that hinders with the development of ASD (Lai et al., 2011). Yet another theory that categorically divides male and female autistics is the biological difference between how their brain functions and are built, people with ASD are said to have ‘extreme male brains’

The so called extreme male brains are closely associated to ASD, it is necessary that this term is well defined. Baron-Cohen 2002, believes that male brains are those, psychometrically speaking which are more systemized than empathetic while the female brains are said to have an opposite cognitive profile. The five different brain types identified includes, firstly, empathizing is more developed than systemizing. Secondly, systemizing is more developed than empathizing, thirdly, both empathizing and systemizing are equally developed. Fourthly, while the systemizing gets overdeveloped, the empathizing part remains underdeveloped (extreme male brains). Lastly, the fifth type suggests that the empathizing is overdeveloped and consequently the systemizing part is underdeveloped (extremely female brain). And just to clarify, empathizing means the drive to someone else’s emotions and thoughts to react with appropriate responses (Baron-Cohen, 2002). However, systemizing is defined as the processing of information using the famous if-then rule with minimal and even no regard for others’ feelings. Thinking is more like a computer process for these people and they tend to perform better when attention is paid to the details and when there are firm rules and regulations to follow, much like science and math (Teatro & Netly, 2013).

### **Speech and Language Delay in Children with Autism**

Maria Mody et al., notes that ASD individuals encompass a range of signs which may be followed through the symptoms such as impaired reciprocal social interaction, disordered verbal and nonverbal communication, restricted, repetitive

behavior or circumscribe interests.

Researchers believe that some individuals with ASD may have apraxia or oral-motor impairment impacting their ability to communicate. However, it is the absence of communication intent due to social deficits that often disguises itself as an expressive language impairment.

Barry Gordon (2007), suggests that children with autism tend to have problem with mostly all aspects that entails the production and understanding of speech and language. Since they are unable to acknowledge a social encounter might not find it necessary in indulging themselves in social interaction and might also find it hard to register how and why people respond to communicated messages.

The ASD individuals often find it hard to pay attention to any auditory stimulation. They need proper training so that they learn when and how to pay attention to the sounds. And sometimes while paying attention, the autistics might find it challenging to decode the meaning behind the sound and forming a thought triangle.

Children with autism have difficulty forming and articulating words and might have difficulty with the oral motor functions. At the brighter side, people with ASD tend to do well with visual material and are able to pay undivided attention to it. So it becomes a safe place for the caretakers to use visual aid to reach their beautiful minds these children express themselves. The caretakers are bemused by the endless prophesies and options regarding the treatments of their little ones. But what really makes a difference is the empathy and patience of the therapists dealing with such individuals. More often than not the therapists chalk out the same action plan as any other regardless of their poles apart believes about the treatment only because they are able to consider what reality is for that specific someone.

Researchers bring to notice the fact that whenever there is a social withdrawal in Autistics it is accompanied with language regression. This should not be taken lightly and should have an immediate action upon it. (Mody,2013). Individuals with autism also present echolalia early in language acquisition, though it wears out with time. It takes the form of repetition of a sentence or final word of the speaker and may be immediate or delayed and for the most part is vocal stereotype.

The characteristics of communication deficits in autism have changed, since, 1980, peculiar speech patterns were highlighted, such as echolalia, pronoun reversal, and unusual intonation (APA, 1980). However, now both verbal and non-verbal communication is believed to be the core deficit in the diagnostic criteria for ASD (APA, 1987;1994). This change highlights the recognition that children with ASD not only have difficulty in the acquisition of speech and language but also faces challenge in understanding as well as using non-verbal behavior during social

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interactions.

*In the article Communication Problems in Children with Autism Spectrum Disorder by National Institutes of Health states that, after the Autism Act 2006, much research has been conducted on the needs and deficits of the autistics which were funded by the government. The five institutes namely, the National Institute of Mental Health (NIMH), which is the principal institute for research at the NIH, along with the National Institute on Deafness and Other Communication Disorders (NIDCD), the Eunice Kennedy Shriver National Institute on Child Health and Human Development (NICHD), the National Institute of Environmental Health Sciences (NIEHS), and the National Institute of Neurological Disorders and Stroke (NINDS) formed the Autism Centers of Excellence. In these research centers the scientists investigate and explores the molecular and genetic factors of the ASD and the researches on the new behavioral interventions.*

*Most children learn to use echolalia purposefully in communication as an echolalia utterance is usually equivalent to either a single word or a situation label. Individuals with ASD are eventually able to break down the echolalic chunks into smaller units and as over the course of time learn to generate a language system for themselves according to Prizant and Rydeck, 1993.*

*One of the earliest efforts at teaching verbal communication to individuals with ASD as mentioned by Lovaas (1977,1981) used massed discrete trial methods to teach verbal behaviors by building labelling vocabulary and simple sentences.*

*Researchers believe that since ASD individuals are deficient in social communication, speech therapy is generally recommended while the occupational therapists establish challenging environment for autistic children to encourage them to engage in social activities.*

*Dr. Dennis Dixon points out that ABA program aims to the individual at large not just targeting one aspect of their disability. Any and every skill the child lacks can be taught through ABA as they mold their behavior, it requires an intensive assessment of the child to locate the problem and then help the child fix it.*

*There has been a noticeable increase in research on the initiation of communication in autistic children since initiating communication is described as a pivotal behavior; more often a child initiates communication, the more often it will trigger responses from others, which will in turn enhance and expedite the improvement of other communication and language skills. (Koegel, 1995).*

*Watson et al., 1989, concludes that generally getting a truly spontaneous self-initiated response from an autistic child is difficult but not impossible to teach and requires a combination of developmental and naturalistic teaching methods.*

### **Individuals with ASD in Education System**

ASD affects social and psychological skills, a lot of ASD individuals regardless of how academically advanced they are, have a problem in college life. (Shattuck et al., 2012). Consequently, people with ASD have hardships with loneliness, isolation, social interaction and self-advocacy (White et al., 2011). Moreover, they might end up in a surrounding they know nothing about and have difficulties with practicalities such as schedules and time management. In accordance with such problems, it's not surprising to find more and more autistics with mental health issues at university level (VanBergeijk et al., 2008).

Outside educational institutions a lot of ASD individuals needs continuous support from families to ensure success. (Heiwitt, 2011) some ASD children tend to be very close to their families or support services while studying (Jennes-Coussens et al., 2006)

### **Homeschooling students with ASD**

Since there is an increase in both ASD as well as homeschooling, people tend to homeschool their children more. However, there is not much work done in this area mostly because parents do not talk about it or reveal to the general public that they are homeschooling a child with special needs. The current literature shows that couples who opt for homeschooling a child with special needs usually are more educated than the general public educates children with a disability (Arora 2006; Duvall et al., 2004).

In order to encourage parents to educate their child with a disorder, the Individuals with Disabilities Education Improvement Act (IDEA) was established in USA which made sure that the individual who was diagnosed between the age of 3 to 21 years old under the provision of IDEA gets special education services which mainly consists of Speech and language therapy, physical therapy, occupational therapy, etc at no cost through the public school system matter where they receive their education (Hallahan, 2012). This act helps parents choose homeschooling with the satisfaction that they can take their special needs child for therapy to schools that is tailoring their child's schedule at home. Considering that many students work better in small groups and home education is an amazing way to provide the opportunity. However, many parents choose home education because they are concerned about the negative exposure their special needs child might get at the hands of their neuro typical peer students in the public schools, these concerns can stem from bullying, physical needs, etc., which might indeed bring about an increased inappropriate or negative behavior in children with special needs. (Hanna, 2012; Stoudt, 2012).

Nonetheless, there are parents who would rather send their special needs child to a public school in USA than homeschooling them for a number of reasons,

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*primarily because they aren't clear on the fact that IDEA secures the special therapies and services to all special needs students regardless of whether they attend a school or not. Secondly, some parents don't feel confident about their credentials to provide special education to their special needs children at home, there is also the fact that the expenses incurred to get the curriculum for their education is a strain on their budgets. Moreover, parents also believe that the time commitment needed to home educate these children is not something they are able to make, and more importantly, parents believe that there has to be some opportunity provided to these students to socialize with other people especially those with similar or different special needs than theirs to help learn and coexist (Ensign, 2000; Hanna, 2012; Stoudt, 2012).*

### **Formal education for students with ASD**

*By mid 1800s it was evident that schooling has begun to elaborate, including subjects and mandatory education laws began to be enacted by local and state governments, home schooling was legal and worked as the primary education method for a lot of families (Anthony & Benson, 2011).*

*Soon the parents allowed the teachers and schools to take care of the academics and were ready to share responsibility, freeing the mothers enough to choose to find a job or to concentrate on homemaking, (Gutek, 2011). Later the states and communities started giving up their control over education to the federal government and today, the federal government funds the education programs completely in the respective countries while many believe that they are now overstepping the limits of the constitution which hails the education rights to the federal government. (Gutek, 2011; Hanna, 2012; Van Brummelen, 2009).*

*Parents, however, still prefer homeschooling for several reasons which include special curriculum and surroundings, greater accomplishment than is possible in other schools, enhancing the relationship between family members, providing guided social interactions with more diverse and wider range of individuals, safety concerns, and adhere to a particular belief, value system (Ray, 2015).*

*Over past decades it has been established that the reason why parents chose to homeschool their children over sending them to regular schools includes three primary motivations. Firstly, the environment of the public sector, secondly, academic instruction does not meet expectations, and thirdly, the religious and moral issues (Aasen, 2010; Mazama & Lundy, 2015; Morrison, 2014; NCET, 2006).*

*Other reasons for parents to opt for homeschooling over regular schooling include factors related to the physical and mental health of the child," other special needs, interest in nontraditional approach to education, family time, finances, travel and distance" (Mazama & Lundy, 2015, p. 162).*

*Parents who wish to home school their children have a multitude of methods and options while educating their child ranging from traditional to more contemporary, to unschooling, electric. (Lively, 2014, p. 347)*

*While homeschooling is in question, socializing issues related to social skills always seems to be the concerns, however, researchers suggest that this concern is not justified since most of the homeschooled students have ample opportunities to develop social skills (Drenovsky & Cohen, 2012; Kranzow, 2013).*

*Parents tend to comprise service learning and other experiential learning activities to the homeschool curriculum in order to inculcate not only tremendous social abilities but also encourages commitment to the community and helping others (Reason, 2013).*

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### **Role of Counsellors and Psychologists Working in Schools**

*Children with ASD experience a range of different emotional and social changes say White et al., 2011, it can be argued that these children need more help and attention than the neuro-typical children to ensure a bright future for them. Counsellors and Psychologists work to address an extended range of social and emotional issues that people with ASD may experience, there appears to be a vital role of these professionals. They might not only provide advisory support to students while they are studying (Nevoill & White, 2011), but also provide assistance to students when they transition from secondary to a further higher education setting (Stodden & Zucker, 2004).*

*Psychologists and psychiatrists help diagnosing children as well as adults with autism and asses devising programs and treatments for these individuals, benchmarking and evaluating their progress over the years.*

*School psychologists and therapists help autistic learners engage with their peers, teach them ways to manage their stress and handle awkward interactions with bullies and general teasing. They might also help training the school teacher and the autism parents to help the students in a wider prospectus.*

*Psychologists help students deal with their anxiety and depression related issues also aiding them in managing self-stimulations, social interactions, understand social cues and help in gaining a grip of both school and personal relationships.*

*Behavioral therapist plays a vital role in developing and shaping the behaviors of autistic learners as they asses the autistic behavior and develop behavioral (ABA) programs to teach a vast range of skills and also help the parents and caregivers to manage aggression and other uneventful problems at home.*

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*Special educators learn how to create a learning environment which is suitable for every individual with special needs. Since light, objects and even other children can easily overstimulate the children with autism, a safe learning environment becomes a prerequisite for their learning experience. When a teacher understands the cognitive and physical characteristics of their student's abilities as well as their disabilities, they are in better position to eliminate any triggers for the child than compare to those with no prior knowledge or training in the field.*

*The counselors help special needs children to help them achieve their highest credentials, personally, academically and later professionally. In order to do so they work with ASD students on their social, emotional, behavioral and physical disabilities in varied situations, including in one-on-one counselling sessions, group counselling, in special schools as well as in regular schools. One of the most important work the special education counselor has upon them is to work with both special and regular education staff to help them understand the needs of the special education child as they counsellor tends to advocate on the behave of the special needs child. Much collaboration and consultation is also undertaken with other school psychologists, occupational and physical therapists and speech and language therapists to come up with the best plan to help these children.*

### **Autism in Pakistan**

*Autism spectrum disorder or Autism spectrum condition is a well-recognized and well dealt with disability in the West but has yet to be recognized and acknowledged in Pakistan, where there are only four ways to categorize disabilities, visual impairment, hearing impairment, physical disability and mental retardation as pointed out by Dr. Hashim Raza, Pediatrician at PIMS in an article published in dawn News. He further elaborates by saying that there is a stigma attached to the very word 'disability' let alone mental disability in Pakistan and it's still debatable whether this stigma is a product of social or cultural intervention but has certainly affected both the elite and rural class of Pakistan.*

*According to US research, 1 in every 59 children is autistic and a roughly 1.7 million people have already been affected by the condition and considering Pakistan's rapid growing birth rate, Dr. Raza says there might be an increase of about a thousand ASD children every year.*

*Most people in Pakistan have no clue about what Autism condition entails. In fact, not just public but even healthcare practitioners are highly unaware of autism. A survey conducted in 2011 in Karachi, reported in the Journal of Autism and Developmental Disorders, found that out of 348 general physicians, only 148 (44.6%) had previously heard of autism.*

Unfortunately, a vast majority of individuals live undiagnosed or are labeled under mental retardation since a large number of doctors in Pakistan are unaware of the condition and varied symptoms. Hence all the rural-based and some urban-based families take refuge in the traditional healers or religious Pir and if that doesn't work then secluding and even chaining the children is how they feel is their last resort. Director General (NHS) Dr. Asad Hafeez suggests that everyone needs to play a part in acknowledging those with autism and start treating them as if they deserve to be equal with all the rights as that of neuro-typical citizens. He also mentions that we should appreciate and extend our support to those parents, teachers, and caregivers who work tirelessly with those on the spectrum.

Dr. Raza notes that autism is stretched between ongoing social problems such as communication and interaction difficulty with the repetitive behaviors, along with their minimum interest or activities, lack of understanding of social cues, repetitive movements and self-destructive behaviors like head banging, hand flapping, etc. the severity of the symptoms varies widely among affected individuals.

According to Autism Resource Centre, 345,600 people are estimated to be living with autism in the country. However, the condition is thought to be severely underreported as a lack of diagnostic capability and general dearth of experts, increase the chances of misdiagnosis. Hence the actual figure is thought to be considerably high.

Autistic individuals, both children and adults may have mild to severe disability. Early intervention and treatment have been proven to reduce these difficulties but such services are almost absent in Pakistan. Even in high-functioning individuals, problems such as irritability and hyperactivity may make it difficult to secure a job. This leaves almost 350,000 people, unarmed with basic skills to take up regular employment and maneuver the workplace.

Rukhsana Shah, a mother of a child with autism said that even in current census, there were no specific columns to report the children suffering from autism. She says that there is a dire need to find prevalence rate of autism to prevent it in future.

Autism Resource Centre, Rawalpindi is a facility dedicated precisely to ASD children by Ghazala, a mother of two autistic children, made a mission of her life to start helping other children with autism and creating more awareness in this field so that the society can benefit at large. Over the course of years, they have 2 campuses of Arc in Rawalpindi, one for 18 months to 8 years old and the other for 9 to 14 years old autistic children. Each of the two facilities comprise of two clinical psychologists, two developmental psychologists and two special educationists. The staff work along the autism mothers to help them train and help with autistic children. Unfortunately,

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*there not many success stories like these because of how we see mental disability as a nation explains Ghazala. We need to change our attitude in order to build more high functioning autistics who can soon join the mainstream schools and lead a life they deserve.*

### **Results**

*Autism is usually diagnosed before the age of 3 years as mentioned by Filipek et al., 1999, children with autism may have difficulties using nonspeech behaviors depending on the severity of their autism. These children have minimal or no eye contact and only one out of the 10 school-going autistics had this problem resolved with proper school facilitation, their facial expressions, tones and gestures have been over shadowed by their disorder. They also lack the spontaneous seeking to share joy, interest or achievements.*

*As mentioned earlier, the research aims high at drawing a comparison between the social, behavioral and speech difficulties among the school going autistic children with that of the non-school going autistic children and why despite knowing that their children suffer from autism spectrum disorder, most Pakistani prefer to keep their children hidden, either homeschooled or unschooled. The research also wanted to figure out different learning styles that could be beneficial in bringing up high functioning autistics. The ASD scale was precisely adapted not only to identify their level of autism but also to understand how school going autistics functions as compared to those who are left at home. The four different aspects of the scale are further divided into different sub-parts to touch upon the more minute details within the broader perspective to understand the complexities and challenges these children face on daily basis.*

*The results suggest that there are evidently twice as many severe cases of autism in the non-school going autistics category as compared to the school going autistic children. The severity of autism has clearly been observed in non-school going autistics in reference to their social interaction, speech and language, behavioral difficulties along with the abnormal symbolic imaginary play. The non-school going autistics are far from being high functional given the lack of professional care they receive at the hands of their care givers. The research also took into account the different ways in which their behaviors can be resolved to assist them with a better life.*

*The selected sample included a rough ratio of girls' vs boys as 1:3, making it look considerably safe to assume that the researches suggesting that male autistics outnumber female autistics is true. As the research flowed out, it was observed that the individuals with autism work better when given a set of rules to follow rather than left*

to figure things out on their own, the ways are ingrained in their routines and minds that they are supposed to follow, making the claims of Krahn & Fenton believes that autistic children have an 'extreme male brain' right which means by the very nature they are drawn to systemization over empathy, explained by Baron-Cohen, 2002. Systemization tends to play a major role in shaping the behaviors of the autistics children in order to teach them the cause and effect relation of their actions. Positive and negative reinforcements are handed out fairly to nurture the behavior of these individuals.

The Global Institute for Autism and Special Needs (GIAS) is the special school in Lahore which was selected for this research. The school aims to provide individual attention to every child along with encouraging them to communicate with others. The schedules are made to accommodate every student on the individual needs basis and their days are planned out in ways that help to inculcate social interaction in them. Every student at school have an individual timetable with 7 sessions every day namely, one to one, speech, arts, occupational therapy, gemini, sensory therapy, snack time. This embeds a routine the child's mind. This chapter will use the results from chapter 4 and analyze it with reference to the observations made during the 6 weeks' field work at GIAS to determine why school going autistics tend to do better and become more high functioning.

### **Social Interaction Difficulty**

Myers et al., 2015 believe that autistics have hard time forming relations and brings about new challenges which differs from person to person and needs to be delicate and diligently catered and upon inquiry it was proved that school going autistics tend to be less affected by social interaction problems as compared to the non-school going autistics. There are more instances where the poor eye contact has been either resolved or brought down to a mild level in school going autistics as compared to non-school going autistics which is usually achieved with the help of one to one sessions with the therapist where they tend to use both positive and negative reinforcements to grab the attention of the individual and force them into making an eye contact with them over the course of time. Constant attention grabbing is very important; all distractions are eliminated from the environment to give the student no choice but to focus on the therapist sitting right in front of them. The therapist might resort to activities like using puzzles or pencil holding to improve the fine motor skills of these individuals. these individuals have the tendency to throw temper tantrums when not having it their way, one of the participants had the tendency to not sit for long time and in that case the therapist had to get hold of them physically and distract him them with different activities to help increase their attention span. Positive comments like 'good boy', 'excellent work' 'that's my guy', tend to sooth them down. Occupational therapy also comes in handy in tempering the mood swings of these

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children. Trampoline helps relax the children, help them excrete the excessive energy built up in them during the temper tantrums. During the Gemini sessions the students are encouraged to sit in the groups to listen to rhymes on a flat screen, this helps them to bear with their surrounding people and help them learn to co-exist. It also improves their social anxiety; they get accustomed to having people who do not belong to their comfort zone which results in less outbursts in public places.

Unfortunately, people in Pakistan who do not take their ASD children to schools or any special facilities are not too well versed with the proper techniques to introduce a social situation to their autistic child that when he is given a little exposure of the outside world they panic and end up with social anxiety. As Elizabeth Pellicano quotes that parents need to understand that autistics have a fair chance at understanding the feelings of others and sometimes the situation, given the right training, nonetheless, that's one of the major things a non-school going autistic has-lack of proper training.

### **Speech and Language Delay**

Barry Gordon (2007), believes that children with autism have problem with some or all of the aspects involved in producing or understanding speech and language. Since they are unable to acknowledge a social situation, they might not feel the need to communicate or interact and might not be able to understand how others are going to respond to a communicated message. School and class room environment plays an integral role in developing the social aspect of their personality resulting in an encouragement to learn to communicate and deliver their message. It is generally observed that speech and language delays are subject to change. The problem can be resolved given an effective speech and language therapy. School going autistics tend to have better grip over language because of their daily speech sessions with a well-trained speech therapist who perform different verbal and nonverbal exercises with them in order to provide the students with better access to words. Honey exercise play a dual purpose during a speech and language session, as it is placed on the upper lip of the student who is being positively reinforced for being able to listen to the therapist and also by placing the honey on the upper lip the therapist encourages the student to lick it, increasing the lip and tongue movement and help with articulation at large.

Mody, 2013 claims that whenever there is a social withdrawal in Autistics it is accompanied with language regression. This should not be taken lightly and should have an immediate action upon it. A number of students lose their acquired speech if not paid enough attention or are not being constantly reinforced. One of the students who went on a long break had already forgotten words like "Allah" "good" "mama", by the time she returned to school. Non-school going students were more prone to

losing their acquired speech because parents reported that when they forced their children in using more complex words other than what they were using, the children regressed and stopped talking altogether and when the parents tried to ease up on them, they got worst from worse. The parents blamed themselves for not being able to handle their children better and making their condition worse than it was.

Unfortunately, for the non-school going children the severity of losing acquired speech is way higher due to the lack of educational training of the parents and absence of constant speech therapy which plays an integral part in developing speech amongst anyone. Social withdrawal remains a constant factor in their speech deprivation.

As per Baron-Cohen, children with ASD lack a clear theory of mind which hinders their communication. Theory of mind is the thought triangle present in neuro-typical individuals which helps them voice out their imagination, thinking and understanding, for autistics this triangle is broken and they end up with magnitude of thoughts but no way to express it. Unless given proper training, they do not learn how to use words or even gestures to let the next person understand what they desire. This incompetency leads to social anxiety and unpleasant temper tantrums. These temper tantrums are more prevalent in non-school going autistics since they are left on their own or have everything delivered without having the need to at least try and voice out their concerns, leading to more speech and language delays.

Spontaneous initiation remains a challenge for all autistics since researchers found out that echolalia is more prevalent in autistics but with an effect SLP training, the repetition of words and phrases can be reduced to the minimal and has shown positive effects on the school going autistics.

### **Abnormal Symbolic and Imaginary Play**

Although researches suggest that it is hard for the autistics to develop imaginary and symbolic play as it tend to hinder with communication, the results show a considerable number of children indulged in it while the teachers and therapist makes an endless effort to reform their behaviors. More school going than non-school going autistics tend to have difficulty with the symbolic and imaginary play, but the severity still lies within the non-school going individuals with ASD. These children resort to flapping, head banging, self-mutilation, toe walking, spinning and obsessing over objects which needs immediate rectification with positive and negative reinforcements. Children act out of their frustration and in order to curb them, occupational therapy comes in handy, the mirror therapy, PECS boards, walking exercises helps in reshaping their postures and behaviors as their energy is depleted during the sessions. One of the students had a habit of thumb sucking and finger flapping and as a negative reinforcement the therapist tied their hands within their shirt sleeves and over the course of time the child realized the consequences of their

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actions and tried avoiding the flapping despite their urges. Meanwhile the student was restrained the therapist constantly played games and talked to them and in order to avoid their outbursts in frustration which could lead to further complications.

One to one sessions also help with obsessions, as the therapist would break the blocks for the students to remake, they would rearrange the toys which were nicely arranged by the students to help them accept the different shapes and sequences other than the ones they have been obsessing over. They also hide objects they were spinning to confuse them. All these activities lead to reinforcing ideas in the brains of the autistics unlike those unschooled who gets easily frustrated when not provided as they wish and are rigid with their routines and obsessions and are increasingly fixating to their practices which hinders in their functioning as an individual in the society.

Since parent here in Pakistan, lack basic knowledge into handling their autistics they would rather let them be than to correct them and there are very few families where the mother takes the initiative to homeschool their child or hire a therapist who would teach the child at home not realizing that the child needs an exposure to social situations to be able to function properly. Children at large needs to be taught properly about what is acceptable and what is unacceptable in a society but with autistics the challenge is multiplied by hundred times. And since Pakistan is still struggling through the initial phases of awareness there is no way for them to be in a position to homeschool their child in the most proficient manner.

### **Behavioral difficulties**

Every child be it autistic or a neuro-typical goes through behavioral problems growing up. Neuro typical more than the autistics get it tampered over time, given the right training and attention to details which would help their care givers rectify their behavior.

None of the participants of the research were said to have no behavioral difficulties, they were all fighting at some level and so were their teachers and parents to handle them. However, the results still showed that more non-school going autistics than the school going autistics were having behavioral difficulties. The autistics have a tendency to ignore and refuse to listen, they might also act inappropriately in public places like taking off their clothes, start dancing, calling out names, or licking themselves, they are also prone to hurting self and others. These children to react to triggers and now it's the parents and teachers' responsibility to pay attention in order to avoid triggers and help them learn to avoid triggers. School going autistics were learning faster to deal with the triggers and one of them had already been moved to the resolved category with the help of their therapists.

Children with autism tend to be rigid about their routines and rituals and

anything remotely near changing will become a trigger. They like staying in their comfort zone and follow the same path and flow of instructions. However, at GIAS they tried making a couple of changes every now and then to see how the child acts upon the new instructions which might drag them out of their comfort zones. Children would throw tantrums to the newness but would cave if the therapist is skilled enough to make them comfortable with it. Since most of the parents are not well versed with the techniques to tend to the behaviors of their autistics and are still adamant on keeping them at home, lets their child be and help them fossilize their behavior because nobody corrects them. Autistic children have sensory sensitivity and if not taken care of can put them in fits of laughter or crying and sometimes both simultaneously, teachers at school pay full attention to their behavioral and sensory needs during the assessment period at school in order to devise a plan for their students to get the best results. Very few parents tend to do that or would end up locking their kids at home to avoid public embarrassment rather understanding their problem and solving it. Unfortunately, the not so learned family members always resort to the easy way.

At a special school not only children are taught how to be self-sufficient and more public friendly but also the parents are given training about how they are supposed to be handling their child with special needs so that the new behaviors are being nurtured both in school and at home to get the best desirable results.

### **Recommended Therapies; The behavior modeling of children with Autism**

People say that an autistics lacks the basic theory of mind but what the parents and teachers lack is the understanding of their autistic child's theory of sensory and perception. People object as to how the autistic is behaving not realizing his/her triggers and how is their world different from how you see the world. This basic empathy and understanding at the hands of the caregivers is proven to bring a brighter change in the attitudes and behaviors of these individuals. Try to find the hidden meanings behind their actions and reactions, develop the idea that they too find it hard to understand what you want and feel, much like you do. This practice also helps during the therapies we use to accommodate the autistic learners.

Remodeling and shaping the behaviors of this young lot is the biggest challenge faced by both the parents and the special educators. There is an ongoing debate whether ABA techniques is better or is the Son-Rise technique that helps shape the behaviors of these individuals better. GIAS tends to be using ABA technique. It is intended to eliminate undesirable behaviors and teach desired behaviors and skills. For example, ABA may be used to reduce outbursts and tantrums or to teach a child to sit quietly, use words to make requests, or wait their turn in the playground. ABA can also be used to teach simple and complex skills, for example ABA can be used to reward a child for brushing his teeth correctly, or for sharing a toy with a friend.

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ABA is intended to build behavior and is not intended to build emotional or social skills, it might teach the child to greet the next person but it cannot force them to feel the connection with the person they shook hands. In order to use ABA one has to be fully trained to avoid repercussions and instill negative behaviors among the autistic children. School environment plays a plain field in applying ABA and hence the school going autistics prove to be better at handling behavioral difficulties as compared to those who do not go to schools.

Therapists at GIAS religiously follow the ABA technique stating that they have more desired results with in first three months of the program than parents tend to get in over years and parents tend to agree with them. Although Son-Rise program is said to be more natural and putting the kids more at ease with their environment, therapists at GIAS beg to differ by showing evident results of how well the kids acquaint with the ABA program and show miraculous results. From rigid and rote to flexible and spontaneous learning, children at GIAS showed that learning is passive but possible.

Children at GIAS have also been introduced to Cognitive Behavioral Therapy (CBT). This intervention helps the children with mild autism. It helps them understand their own triggers and are introduced to different ways to get hold of it. They are taught to deal with a stressful situation and calm their nerve when it comes down to it. As much as this therapy is effective with the mild autistics and to some level with the moderate autistics, it doesn't work with severe autistics, they are a long way from understanding the social and practical response to their panic mode. But ABA on the other hand works with all different levels of autism

### **Reasons of parents avoiding enrolling their children in Special Schools**

In the West, over the past decades, it has been established that the reason why parents choose to homeschool their children over sending them to regular schools includes the three primary motivations. Firstly, the environment at public schools (safety, violence, bullying, drugs, negative peer pressure, etc.), secondly, academic instruction does not meet expectations, and thirdly, the religion or moral concerns (Aasen, 2010; Mazama & Lundy, 2015; Morrison, 2014; NCET, 2006).

However, reasons tend to slightly differ in Pakistan, parents have more concerns and insecurities when it comes to enrolling their children with autism to special school despite knowing that their child has a mental disorder.

Dr. Hashim replies to this question partially by saying that there is a stigma attached to the very word 'disability' let alone mental disability in Pakistan and it's still debatable whether this stigma is a product of social or cultural intervention but has certainly affected both the elite and rural class of Pakistan.

Upon asking, the reasons provided by the parents ranged from the fact that special schools in Pakistan are way too expensive for a middle class family, who already struggles so that both ends meet, that they prefer keeping their mentally unstable child at home than to compromise on the studies of those who have a chance at a bright future. Another reason is, that given the current crime rate of Pakistan, parents don't feel comfortable sending their autistics to school knowing that in case of an emergency they won't be able to defend themselves. The parents also had a problem with the fact that their child will be stigmatized and they would rather hire an expensive therapist than to put them in an autism center and be labelled. One of the parents of the non-school going autistics mentioned that they don't mind spending extra money as long as their child get complete anonymity and that is why they keep their 10 years old autistic as far away from the society as possible because they can't afford to be associated with a child of special needs, in their circle.

One of the mothers also mentioned that for 6 years she was blamed for her child's state, telling her that her kid was only having problems because she was not giving what it takes to be a mother, leading her to depression and also aggressive towards the child who is already fighting a mind battle on daily basis. Along with the blame game, she is not allowed to seek professional help to handle the child and she came to the screening without bringing it to anybody's notice.

Other reasons included the fact that the rural based and some urban based families take refuge in the traditional healers or religious Pir and if that doesn't work then secluding and even chaining the children is how they feel is to be their last resort. They think it's an ordeal from God and no therapy could help them get this better but the Pirs who claim to recover these children from their "absent mindedness".

In Pakistan people have more self-presumed reasons to not send their Autistic children to special school than the reasons to send them to schools.

### **Recommendations**

The purpose of this research as mentioned earlier was to draw a comparison between the school going autistics and non-school going autistics and how their behaviors are affected by the type of care they receive at the hands of their care givers. Hence, on the basis of the findings of this research, following recommendations can be given to not only the parents of the autistics but also the special schools and their therapists and teachers as well, that can help them to deal with this problem:

1. Majority of Pakistanis' still don't have the concept of Autism and what it entails, despite the awareness campaigns being run throughout the country, people are reluctant to get their special children diagnosed. There needs to be a door to door survey and screening test across the country as we have for polio. And if diagnosed they should be encouraged to get a proper assessment from a child psychologist.

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2. *Government can take an initiative to help educate the autistic children by giving subsidies and child care funds so that the factor of affordability can be eradicated.*
3. *More special schools can be made available, with a fee structure affordable even to the lower middle class and there is a need for immense publicity of such schools.*
4. *Given the current statistics and the growing prevalence of Autism there is a dire need for our youth to get involved in the autism awareness campaigns, for which education on Autism should be made a compulsory course at undergrad level for students of all fields. So that people can get information about autism from the ones they trust and the youth can also look up for signs of autism in the children around them. And create awareness amongst their families about the importance of special schools.*
5. *As for the security concerns, the parents can appoint somebody to accompany their child to the special school or can ask for the access to the CCTVs of these special schools for some time. This way they won't have to worry about leaving their kids with strangers but will also be able to see their child's progress on daily basis.*
6. *There needs to be a thorough training of the parents who wish to homeschool their children in order to facilitate learning, and only with the proper certification should they be allowed to homeschool. They need to be taught that without proper training they are endangering their child's welfare and would be doing more damage than good. And a proper certification would ensure that the parents have a fair idea of how to handle the child and do damage control if the need be.*

*There needs to be more counselling camps for the autism parents to help them with their stress and depression and to provide a guideline which facilitate the autistic children. If the parents are stressed and depressed themselves, the chances of them being patient with their special needs child when they have an outburst are next to none. Autistic children need their caregivers to be immensely patient and tactful while handling them.*



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