

EFFECT OF RECREATIONAL ACTIVITIES FOR IMPROVING AGGRESSION AND SELF INJURIOUS BEHAVIOUR OF AUTISTIC CHILDREN

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ABSTRACT:

To facilitate this study and reach up to the valid conclusion ten (10) autistic children from Mini Bright Future Mentally Challenged Scholl Gosianpur Punjab (India) were selected as subjects for this study randomly. All the subjects were divided into two equal groups namely Experimental Group (Recreational Training) and Control Group. All subjects were between the age group of 8-14 years of age. Ninety weeks' selected recreational activity training programme, based on the interest of samples was given to the autistic children. Before administration of recreational activity training programme pre test data were obtained through self made standardized scale filled by teachers and parents of autistic children. Post test data were collected by imparted recreational activity training programme to the subjects six days in a week in two sessions in a day i.e. morning (7 to 9 am) and in evening (5:30 to 7:30). Recreational activities inculcated to the subjects were i.e. Bowling, Tambola, Rapid Fire, Crazy Eight, Hit on the goal, On the spot jump, Hide & Seek, Arrange the circle, Musical Chair, Match the colors of balloons, Singing, Dancing, Blowing the Balloons, Soft Ball throw etc. No experimental treatment given to control group. Pretest and posttest was recorded for the statistical analysis. Pre and post aggression and self injurious behaviour status were checked by self made Scale which was standardized with the suggestion of national and international experts. To compare pre and post test of experimental and control group, analysis of covariance ANCOVA was applied. The results were significant at 0.05% level of significance. The outcomes of the investigation show that there are positive effects of recreational activities over the various dimensions of aggression and self injurious behaviour.

Key Words: Activities, Aggression behaviour, Self injurious behaviour, Autistic Children

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Introduction:

Autism, a situation in which an individual is not involved in any social activity hence, an isolated self. In recent scenario, Autism term is not new, review of studies shows that, this disorder was customary in the books more than 100 years. "Eugen Bleuler a Swiss psychiatrist was former of the word autism in 1908" (Hirari, 1968). Autism spectrum disorder (ASD) has been seen before the age of 3 and last throughout a person's life, although symptoms may improve over time. Some autistic children give an idea about hints of upcoming problems within the first few months of life. People with autism spectrum disorder (ASD), the impairments make life very challenging. These impairments related to social skill, communication and Unusual Interests and repetitive Behaviors.

Aggressive behavior is commonly seen in autistic children and it depends on severity of a child's autistic symptoms (Jang et al., 2011). Aggressive behavior in autism spectrum disorder imports harmful effects on care givers and are known to increase family stress. Prevalence estimated aggressive behaviors in children with autism spectrum disorder (ASD) vary widely, ranging from 8% to 68% (Mazurek et al., 2013) and seen higher with male sex as compared to female sex.

Self-harm present in every individual to some extent or other. There are many secret actions that can individual do to themselves in intentionally, which are harmful or injurious to the self (Camelot Foundation/Mental Health Foundation, 2004), self injury as a range of inside behaviour. Behavioral complication, personality disorders, and depression are three common situations of autism in which self injurious behaviour occurs. Level self injury increased in autistic children due to poorer expressive functional language and more severe impairment on the communication, socialization and daily living (Baghdadli et al., 2003).

Every one noticed autistic individual have higher levels of isolation and social dissatisfaction than normal children and recreation make a path to contact people with each other and form a relationship. Individuals with autism can display a range of challenging behaviors. Behaviors, such as physical aggression, self-abuse have been found to decrease when individuals are engaged in appropriate recreation activities. Participation in recreation activities also can enhance self-control and help calm and relax during times of anxiety. Recreational activities are associated with positive reinforcement in general. Role of recreational activities has not been

rigorously examined with regard to autistic children treatment. Recreational activities provide an opportunity to become physically active and provide some therapeutic benefit also.

Objective of the Study:

1. To observe the effect of recreational activities on aggression behavior of autistic children.
2. To examine the effect of recreational activities on self injurious behavior of autistic children.

Method and Procedure:

Sampling

Ten (10) autistic children between the age group of 8 to 14 years from Mini Bright Future Mentally Challenged Scholl Gosianpur, Punjab, India, their parents and teachers were participant for the study. Prior Permission was taken from school Authorities to conduct the experiment. Autistic children their teachers and parents were signed an informed concerned form for their true, honest and active participation in the study. The involvement in this was emphasized on voluntary basis.

Training Design

After the suggestions given by the expert a recreational activity programme was prepared on the basis of the interest of the subjects. Training of selected recreational activities was imparted to the subjects six days in a week for ninety (90) weeks. There were two session in a day i.e morning (7 to 9 am approx) and evening (5:30 to 7:30 approx). Recreational activities includes: Bowling, Thambola, Rapid Fire, Crazy Eight, Hit on the goal, On the spot jump, Hide & Seek, Arrange the circle, Musical Chair, Match the colors of balloons, Singing, Dancing, Blowing the Balloons, Soft Ball throw.

Tool

Self made scale was prepared by the investigator to find out the effect of recreational activities on aggression and self injurious behavior of autistic children. The scale was constructing and

standardized by the investigator by means of sending or with personnel interaction to more than 100 national and international professional and 10 psychiatrists for validity of the scale. Apart from this, the researcher gone through review of related literature, various test and books for self observation. The suggestions of 40 experts were incorporated for the better validity of the scale.

Statistical Design

Analysis of covariance (ANCOVA) along with descriptive statistics was used as the statistical technique on SPSS at 0.05 levels of significance.

Results:

Table no. 1

Descriptive statistics of Recreational activities of Experimental and Control Group Pretest Post test of aggression behaviour of autistic children

S.No.	Descriptive Statistics	Different Groups			
		Experimental Group		Control Group	
		Pre Test	Post Test	Pre Test	Post Test
1	N	5	5	5	5
2	Mean	31.2000	25.6000	30.6000	30.8000
3	Std. Error of Mean	.20000	.67823	.24495	.37417
4	Std. Deviation	.44721	1.51658	.54772	.83666
5	Variance	.200	2.300	.300	.700
6	Skewness	2.236	1.118	-.609	.512
7	Std. Error of Skewness	.913	.913	.913	.913
8	Kurtosis	5.000	1.456	-3.333	-.612
9	Std. Error of Kurtosis	2.000	2.000	2.000	2.000
10	Range	1.00	4.00	1.00	2.00
11	Minimum	31.00	24.00	30.00	30.00
12	Maximum	32.00	28.00	31.00	32.00

Table no 2

Analysis of covariance of comparison of post test means of Experimental group and Control group of autistic children in relation to Recreational activities

	Sum of Squares	df	Mean Square	F	Sig.
Contrast	58.000	1	58.000	40.600	.000
Error	10.000	7	1.429		

*Significant at 0.05 level $(1, 7)df = 5.59$

In Table no. 2 the Sig value was found .000, which is less than 0.05 and the calculated f-value = 40.600 was found to be greater than tabulated value = 5.59 at 1, 7 df, therefore it shows significance difference.

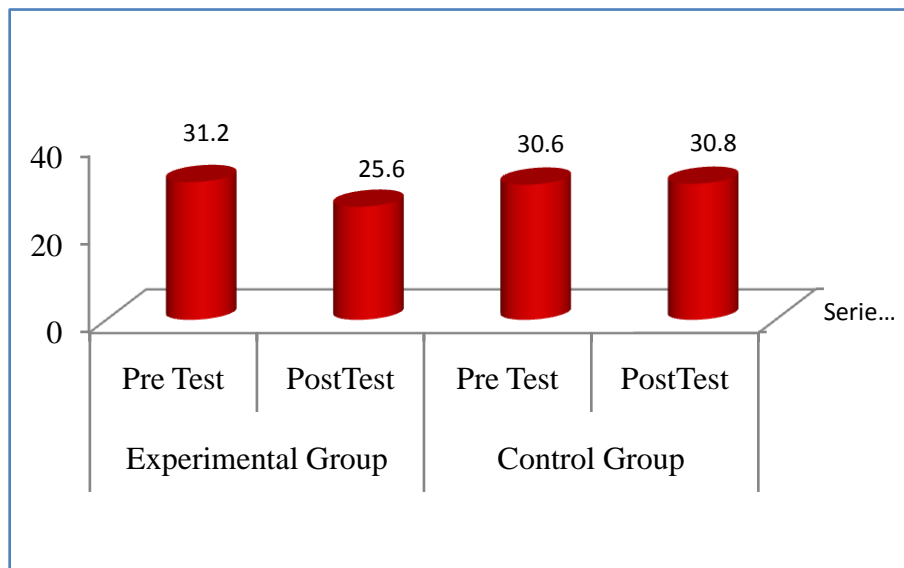


Table 3

**Descriptive statistics of Recreational activities of Experimental and Control Group Pretest
Post test of self injurious behaviour of autistic children**

S.No	Descriptive Statistics	Different Groups			
		Experimental Group		Control Group	
		Pre Test	Post Test	Pre Test	Post Test
1	N	5	5	5	5
2	Mean	47.6000	38.000	48.0000	48.6000
3	Std. Error of Mean	.50990	.83666	1.51658	.92736
4	Std. Deviation	1.14018	1.87083	3.39116	2.07364
5	Variance	1.300	3.500	11.500	4.300
6	Skewness	-.405	1.145	.577	-.236
7	Std. Error of Skewness	.913	.913	.913	.913
8	Kurtosis	-.178	2.000	.488	-1.963
9	Std. Error of Kurtosis	2.000	2.000	2.000	2.000
10	Range	3.00	5.00	9.00	5.00
11	Minimum	46.00	36.00	44.00	46.00
12	Maximum	49.00	41.00	53.00	51.00

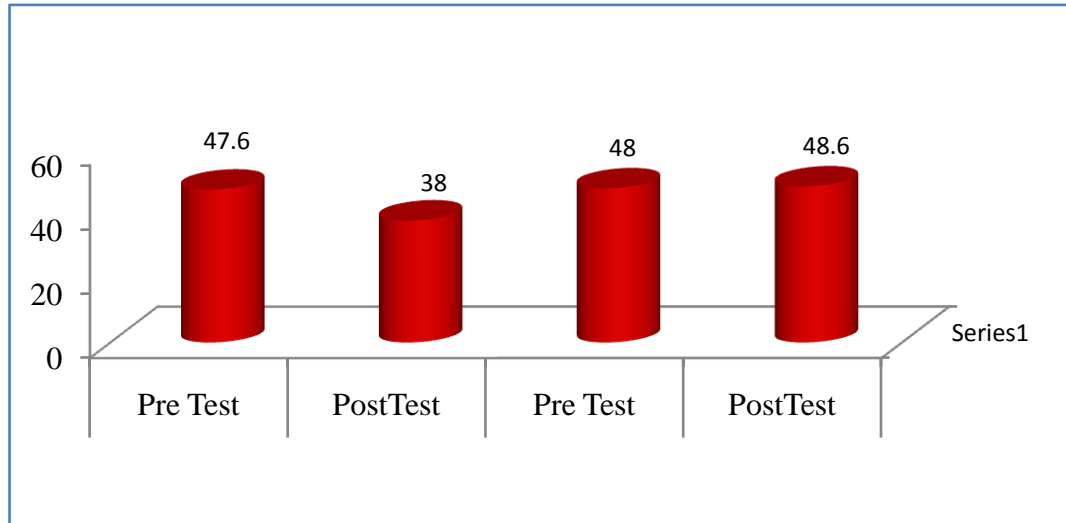
Table 4

**Analysis of covariance of comparison of post test means of Experimental group and
Control group of autistic children in relation to Recreational activities**

	Sum of Squares	df	Mean Square	F	Sig.
Contrast	271.782	1	271.782	74.445	.000
Error	25.555	7	3.651		

*Significant at 0.05 level $(1, 7)df = 5.59$

In table no. 4 the Sig value was found .000, which is less than 0.05 and the calculated f-value = 74.445 was found to be greater than tabulated value = 5.59 at 1, 7 df, therefore it shows significance difference.



Conclusion:

1. The obtained or calculated f-value = 40.600 was found to be greater than the tabulated value = 5.59 at 0.05 level of significance. The results showed that there was significant ($p < .05$) effect of recreational activities on aggression behavior of autistic children.
2. The obtained or calculated f-value = 74.445 was found to be greater than the tabulated value = 5.59 at 0.05 level of significance. The results showed that there was significant ($p < .05$) effect of recreational activities on self injurious behavior of autistic children.

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