

Márta Nagyné Klujber, PhD

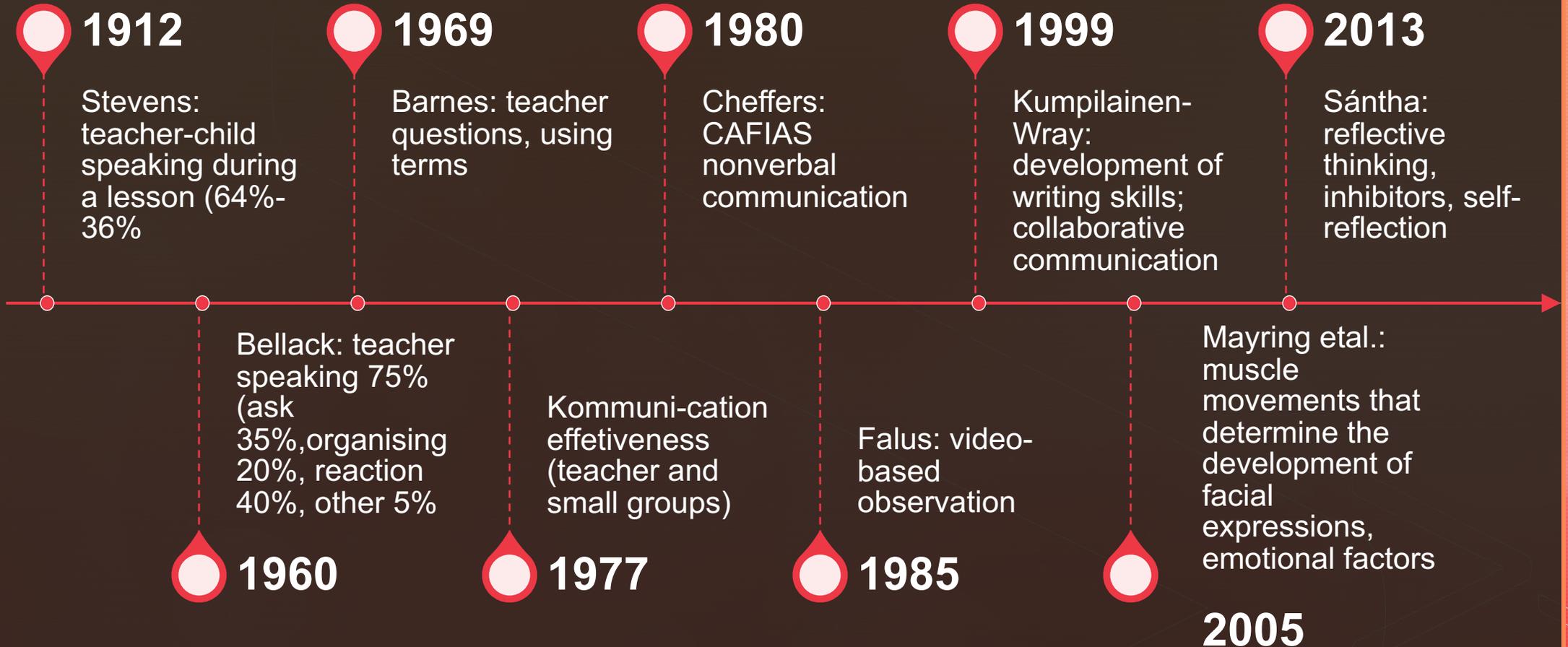
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An Analysis of Child- Therapist Interactions in Sensory Integration Therapy

Research on teacher effectiveness



Interaction research and ASI

Observing interaction
(Bakeman, Gottman, 1997)

Children's **play** and teacher-child interactions
(N. File, 1994)

Caregiver–Child Interactions on Play Occupations
(Daunhauer, Coster, Tickle-D, Cermak, 2007)

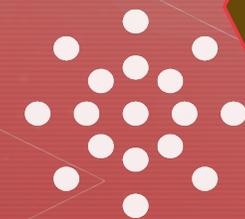
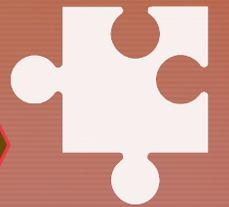
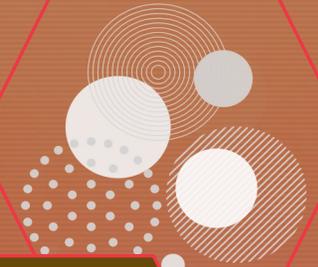
Coster W., Tickle-Degnen L., Armenta L. (1995)

Caretakers **communication** with autistic children
(Warren, 2010)

Managing challenges occurring during sensory integration treatment
(Dunkerley et al., 1997)

Nonverbal behaviour during the development of therapeutic relationship
(Tickle Degnen, Gavett, 2003)

Fidelity Measure for Research on the Effectiveness of the ASI
(Parham, et al. 2011)



Child-Therapist interaction during Sensory Integration Therapy (Ayres, 2005; Parham et al. 2011)

▪ Child

- **collaborate** with the therapist in activity choice
- **activity, self-direction, intrinsic motivation** are important
- **child's interests and choices guide** the therapist
- some children require more external **direction and structure**

▪ Therapist

- **help to become more capable** of learning any motor skills
- **gets the sensory input** he needs and makes the adaptive responses that organise that input
- **imagination and sensitivity** are important



Child-Therapist interaction during Sensory Integration Therapy

- Choosing equipment
 - **Therapist guides the child** to an appropriate choice
- Therapeutic atmosphere
 - inner direction (selfconfidence is based on the ability to direct oneself)
 - The therapist tries carefully to balance structure and freedom in a way that leads to constructive exploration



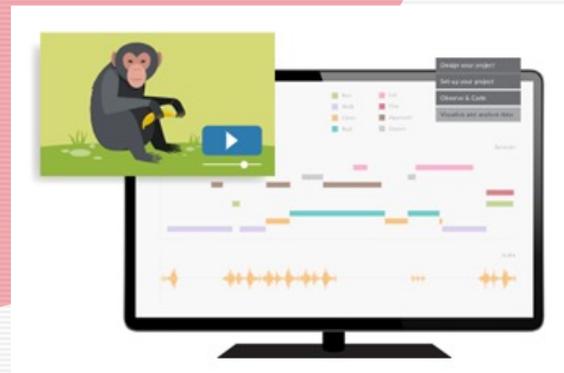
An Analysis of Child-Therapist Interactions in Sensory Integration Therapy

RESEARCH GOAL

- to investigate the effect of the therapist's guidance on the child's initiative in a therapy situation

MATERIALS AND METHODS

- an analysis of **five video recordings**
- **two-minute** long intervals **randomly** from the middle minutes of the treatment sessions
- with **three qualified therapist** and **children** of the age **between 3 and 6** in Germany
- the **Observer XT**
- **open coding** technique
- **descriptive statistical methods**



Coding scheme

Subject Name	
<input type="checkbox"/>  Continuous Samp	
 child	
 therapist	

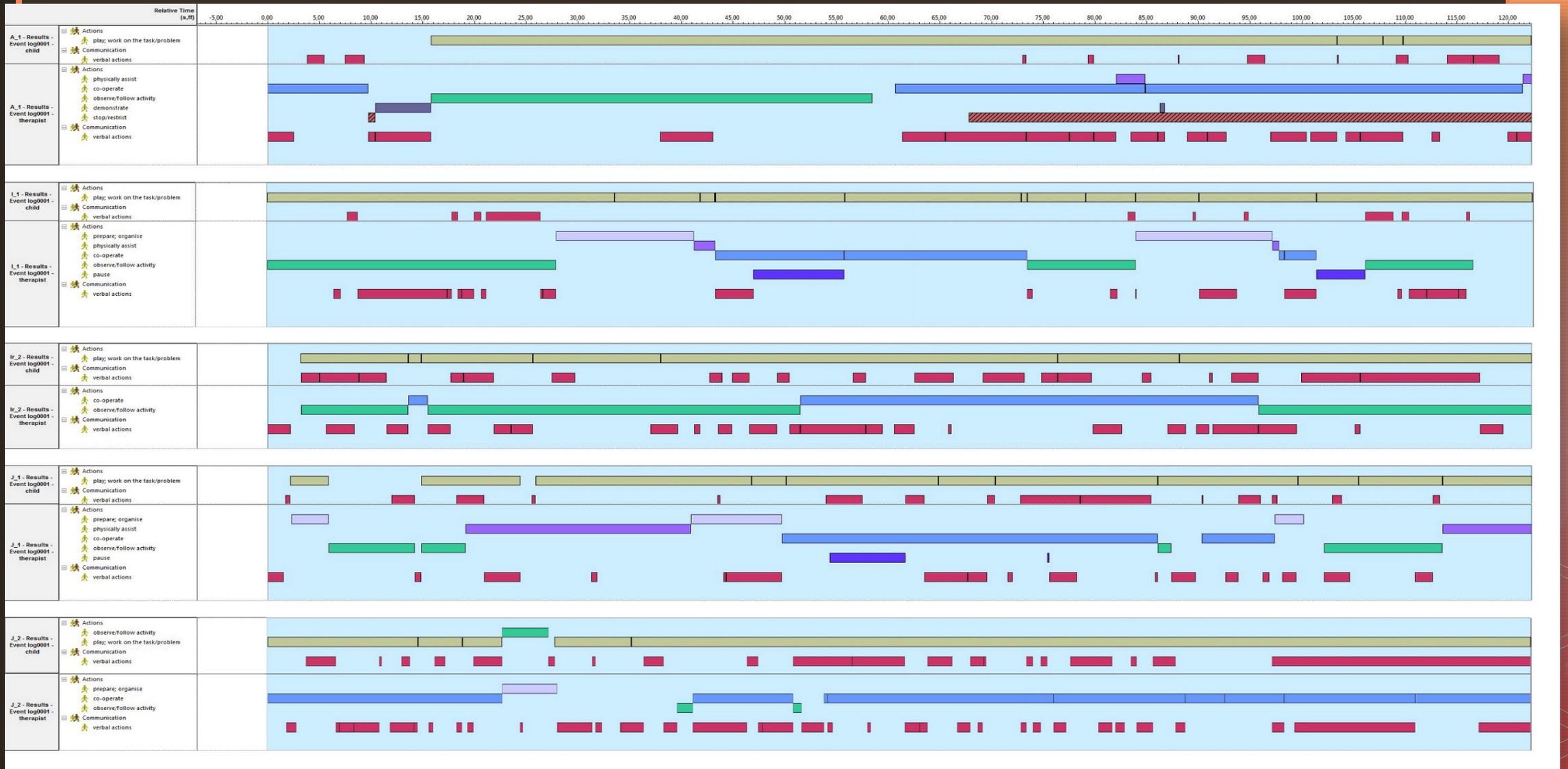
Behavior Name	
<input type="checkbox"/>  Actions (Start-Stop)	
 prepare; organise	
 physically assist	
 co-operate	
 observe/follow activity	
 demonstrate	
 stop/restrict	
 play; work on the task/problem	
 pause	
<input type="checkbox"/>  Communication (Start-Stop)	
 verbal actions	

Modifier Name	
<input type="checkbox"/>  Verbal phrasing (Mutually exclusive, Nominal, Must be scored)	
<input type="radio"/> ask	
<input type="radio"/> instruct, dictate	
<input type="radio"/> suggest	
<input type="radio"/> exclaim	
<input type="radio"/> request	
<input type="radio"/> state	
<input type="radio"/> assume	
<input type="radio"/> encourage	
<input type="radio"/> nonverbal communication	
<input type="checkbox"/>  Mutuality (Mutually exclusive, Nominal, Must be scored)	
<input type="radio"/> follow	
<input type="radio"/> mutual action	
<input type="radio"/> independent action	
<input type="radio"/> initiate	
<input type="radio"/> receive_no answer	
<input type="radio"/> answer_adequate yes (accept)	
<input type="radio"/> answer_adequate no (reject)	
<input type="radio"/> receive_answer_adequate yes (accept)	
<input type="radio"/> receive_answer_adequate yes (accept)_initiate	
<input type="radio"/> receive_answer_adequate no (reject)	
<input type="radio"/> receive_answer_adequate no (reject)_initiate	
<input type="radio"/> receive_answer_inadequate_initiate	
<input type="radio"/> receive_answer_inadequate	
<input type="radio"/> repeat question	



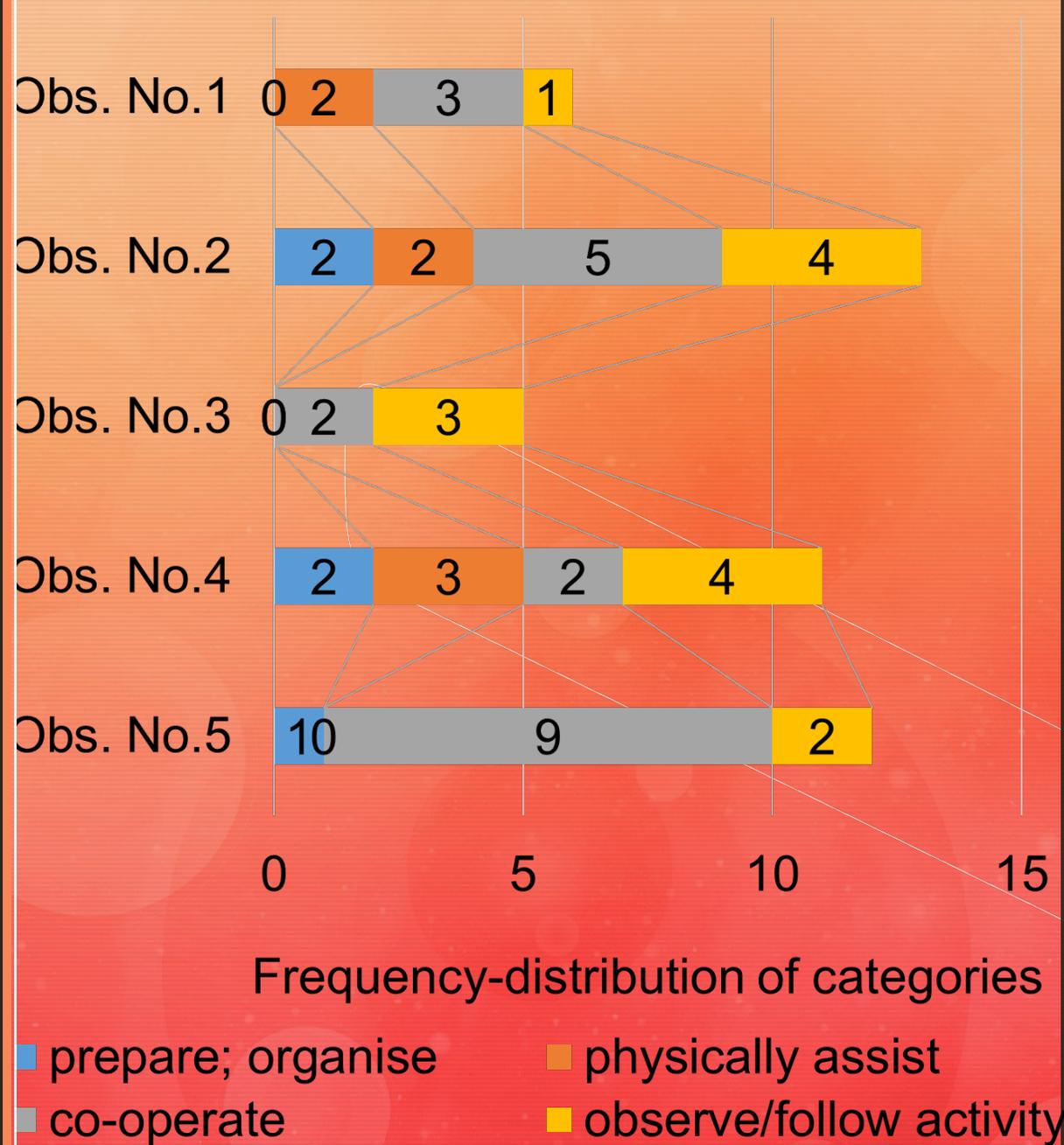
Results

Frequency and duration of the occurrence of analization criteria during treatments



Transcript a part of Observation No.4

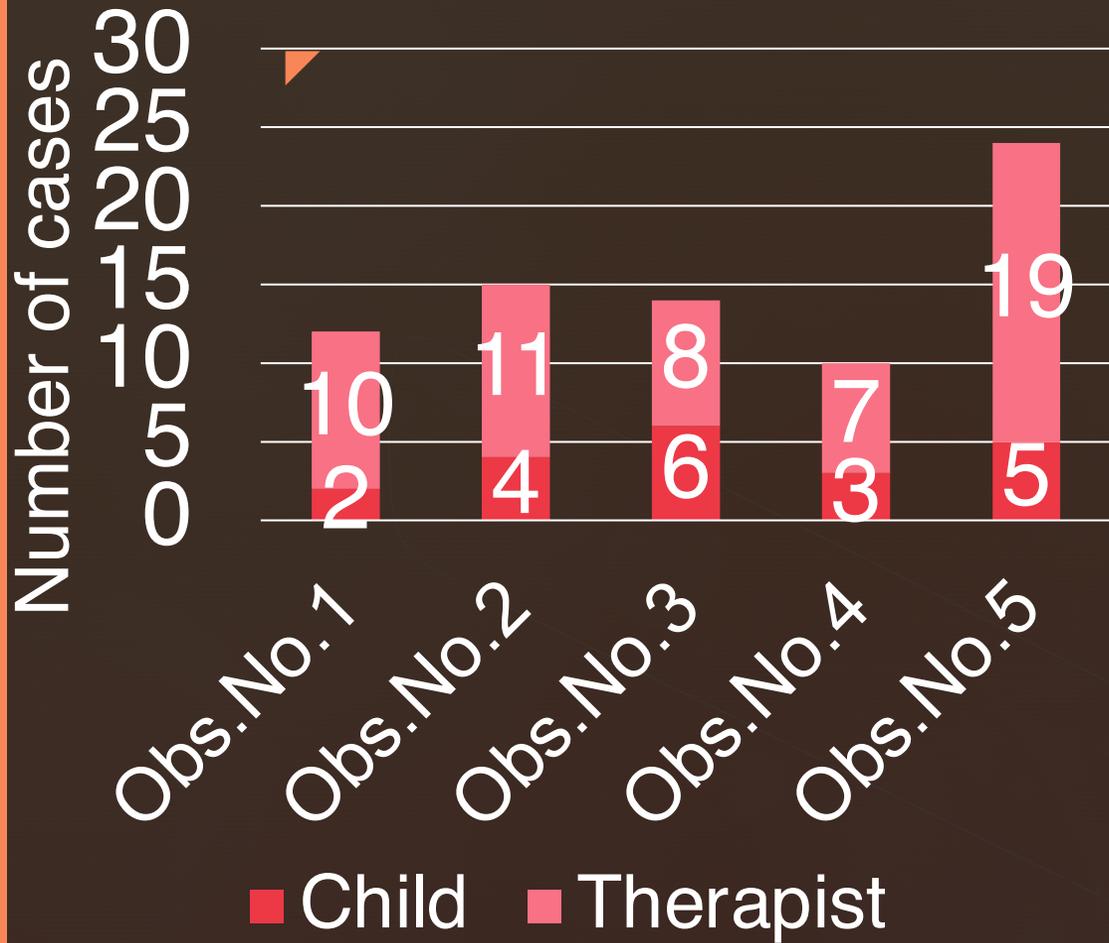
Who?				How?	What?
Child		play; work on the task/problem		receive_answer_ad equate yes (accept)	She is slipping the matrass along the slide as she watch it with her eyes.
	Therapist	observe/follow activity		independent action	She watch how the matrass slide.
	Therapist	verbal actions	explain	Initiate	Look, it is the same size that the one before.
Child		verbal actions	allow	receive_answer_ad equate yes (accept)	Yes, it is.
	Therapist	co-operate		Independent action	She put on the matrass.
	Therapist	verbal actions	give feedback on event/action	Initiate	You have already had three [matrass].
Child		verbal actions	answer	receive_answer_ad equate yes (accept)	But it is enough.
	Therapist	verbal actions	give feedback on event/action	receive_answer_ad equate yes (accept)_initiate	Is it?



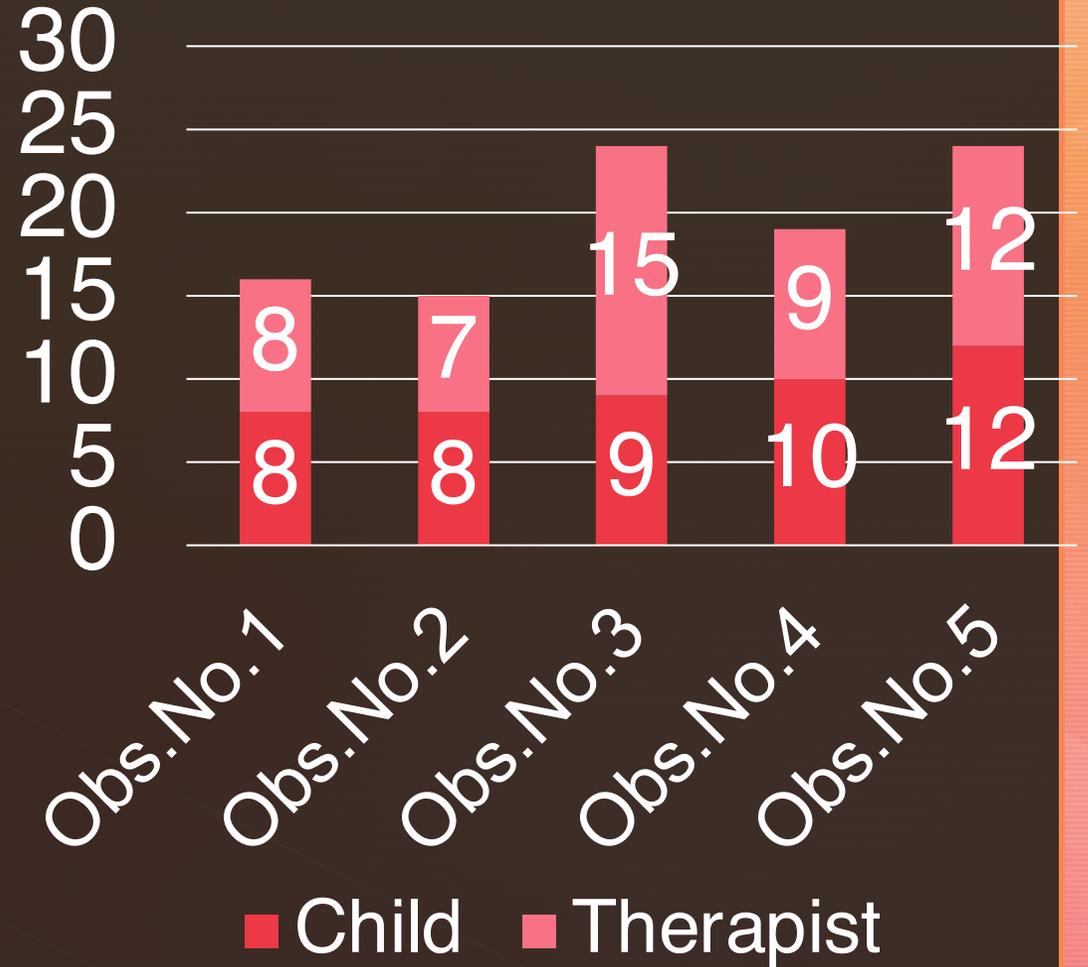
Distribution of therapist actions during the treatment

Duration of verbal actions during the treatment			
	Child	Therapist	Total duration of the observation
Obs.No.1.	12,76 sec.	56,36 sec.	122 sec.
Obs.No.2.	12,76 sec.	51,40 sec.	148 sec.
Obs.No.3.	54,40 sec.	49,00 sec.	123 sec.
Obs.No.4.	30,82 sec.	32,68 sec.	128 sec.
Obs.No.5.	61,64 sec.	60,08 sec.	127 sec.

Duration of verbal actions during the treatments



Frequency of initiation during the treatments



Frequency of answers during the treatments

CONCLUSIONS

- ✓ Therapists were talking on more occasions and for longer periods than children, the **communication was focused on performing the tasks**, and the most frequent actions were **instructions and giving answers**.
- ✓ Children mostly **made statements** or **asked questions**, while therapists mostly **gave instructions or made statements**
- ✓ The verbal behaviour of the children was dominated by **answering questions or expressing emotions**
- ✓ The participants mostly accepted the initiative of the other party, and activities were continued accordingly
- ✓ Therapists were more initiative than children, however both participants gave answers at the same rate
- ✓ Interaction → 2-4 steps (initiation – answer – answer – answer)

RESEARCH VISION

- Using video-stimulated interviews
 - to foster reflexion
 - to develop profession
- Observe the development of therapeutic process



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▶ **Thank you for your
attention!**

