Evidence Informed Educational Interventions
to support Children and Young People with an
Autism Spectrum Condition

Research and Position Paper

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Distributed for comment to representatives from: East Yorkshire Parent/Carer Forum (EYPCF), The Young Leaders of East Riding (TYLER), Children's Commissioning and Quality Monitoring Teams, Futures+, East Riding Special Schools, National Health Service (including Clinical Commissioning Group, Speech and Language Therapy, Clinical Psychology).

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This paper provides research informed guidance when considering and choosing educational interventions for children and young people (CYP) with Autism Spectrum Conditions (ASCs).

**Rationale**

East Riding of Yorkshire Council (ERYC) is committed to meeting the needs of all CYP as learners, including vulnerable groups, such as those with ASCs. ERYC, health services and other partners have a joint responsibility for developing, implementing and reviewing the Autism Strategy and the corresponding action plan for this group. This process is underpinned by collaborative working with CYP, their parents/carers and representatives from local services.

Central to the Autism Strategy is the support that is provided throughout education. It is important that the needs of each individual are identified, a clear plan of support is developed, implemented and reviewed, in partnership with the CYP and their family.

Parents, professionals and local authorities can often focus on debates over which educational is “best” e.g. the Picture Exchange Communication System (PECS), the Treatment and Education of Autistic and Communication related Handicapped Children (TEACCH) approach, Applied Behaviour Analysis (ABA) etc. and it often becomes one intervention “versus” others. In light of this, it is important for ERYC to:

- Consider and briefly summarise the evidence-base behind ASC educational interventions
- Set out ERYC’s ‘philosophy’ which underpins educational interventions informed by what the research tells us.

**Summarising ‘Autism Spectrum Conditions’**

Prior to considering the evidence base, it is helpful to summarise what autism is. Whilst there are many terms in the field, in East Riding, we use the term ‘Autism Spectrum Conditions’ (ASCs) to demonstrate that the condition is a *spectrum* of need,
with differing levels of difficulty across abilities. Whilst there are variations in presentation, those with an ASC all tend to have differences in the following areas:

- How they understand what people say (including eye contact and body language) and how they are able to communicate with others.
- How they understand the social world, including their own feelings and the emotions of others, social rules, friendships and relationships.
- How they grasp and adapt to situations and ideas outside of their everyday experience and how they like things to be.
- How they process sensory information (sights, sounds, smells, tastes, touch, movement and balance) and how they seek or avoid certain things.

**Defining what we mean by ‘intervention’**

In East Riding, we consider an ‘intervention’ as any kind of activity that is designed to improve ‘something’ for someone with an ASC. Educational interventions vary significantly in terms of their aims, design, method, evaluation and impact. Whilst some do lead to improvements for those with an ASC, it is useful to consider the evidence behind their effectiveness to better understand what the research tells us in order to avoid being misled.

**A synopsis of the research into ASC interventions**

Reviews of single interventions fail to support the use of any one to meet all needs of all learners (Jordan, 2011). This means there is not, as yet, any evidence that one educational intervention supersedes all others. The ‘Research Autism’ website provides an objective evaluation of evidence behind the range of interventions (e.g. ABA, Discrete Trial Training, Cognitive Behaviour Therapy, Social Skills Groups, Theory of Mind Training, TEACCH, Music Therapy etc.) and clearly states that there is no ‘one-size fits all’ solution. Unsurprisingly, research has indicated that there are significant individual differences in responses to intervention (Fonagy et al, 2015) and that educators should consider which components of different autism-specific interventions work best for each pupil and under what conditions (Howlin, 2010).
other words an eclectic approach, consisting of different interventions, based on a careful analysis of a particular individual's needs, is most likely to provide the flexibility that is needed to personalise appropriate support for a young person’s education (Fonagy et al, 2015).

The National Autistic Society’s View
In line with research evidence, the National Autistic Society’s (NAS) schools use elements of several ASC interventions (e.g. TEACCH, PECS, SCERTS, functional analysis, social stories and sensory circuits) based on the strengths, interests and needs of the child or young person. They focus on a tailor-made approach with collaborative working with parents/carers at the centre. NAS schools base their choice of interventions on pupils having clear structure, the adults providing positive approaches and expectations, staff being empathic and providing pupils with a low arousal curriculum. They also emphasise the importance of partnership working between education settings, parents/carers and the CYP.

Our Position
In East Riding, we are guided by several key documents, including:

- East Riding SEND Strategy (2018-2021)
- East Riding Autism Strategy (2019-2024)
- SEND Code of Practice (2015)
- Evidence-based research (including that which is available via Research Autism).
- National Autistic Society’s advice and recommendations.

Informed by the documents above, ERYC has developed a set of guiding principles which provide a framework to inform our choice of ASC interventions:

- The CYP is unique; with their own views and feelings to be respected.
- The CYP has their own developmental/learning profile and interests which are not the same as others.

- The CYP is an ‘active part’ of the learning process (the development, delivery and evaluation of their curriculum).

- The CYP should enjoy and engage in meaningful and purposeful positive learning experiences within a range of social/cultural contexts (e.g. 1:1, group, class).

- The CYP’s parents/carers know them best and should always be part of planning the learning experiences in partnership with other professionals.

- ASC expert knowledge and views from across professions should inform the choice of interventions to support the CYP’s progress in a holistic way.

- No single intervention is recognised as being ‘better’ than others for all CYPs, and education settings should adopt a flexible approach in accordance to individual needs.

- Staff supporting the CYP should be trained in ASC strategies (to the appropriate level) so they have relevant understanding and expertise of the support required to address the social communication, social interaction, flexibility/adaptability and sensory needs of those with ASCs (for example, understanding the need for clear structure & routines, positive approaches, expectations and aspirations, empathic teaching style, reducing arousal levels).

This draws parallels with the NAS SPELL (Structure, Positivity, Empathy, Low Arousal and Links) which can be found here: www.autism.org.uk/SPELL

- Behaviour is a form of communication and should be viewed through the ASC “lens” to enable staff to consider how best to respond

The principles above should be used to guide educational planning for children and young people with an ASC. In line with what the research currently tells us, NAS recommendations, and our key policy documents, East Riding advises against the implementation of a single intervention to support these children and young people. Rather, that the needs of each individual are identified, a clear plan of support is
developed, implemented and reviewed, in partnership with the child or young person and their family.

References


