

PARTICIPANTS

The participants in this study were 3 students attending a public middle or high school. They each had a full Functional Analysis Assessment completed and received an activity schedule as part of their behavior intervention plan. All participants had a diagnosis of Autism Spectrum Disorder; 2 participants were female and 1 participant was male. Each participant received SAI support through their IEP and attended a public school district that has 19.5% of students are eligible for a reduced meal program. Each participant had a trained para educator throughout the school day.

| Participant | Age | Diagnosis |
|-------------|-----|-----------|
| A | 18 | ASD |
| B | 10 | ASD |
| C | 11 | ASD |

The goal of an Activity Schedule is to teach students to transition from a preferred to a non-preferred activity without emitting problem behavior, delay the length of transitions and increase task engagement. The topography of an Activity Schedule has many forms, it can be written, video modeled or in picture form. Children with Autism Spectrum Disorder (ASD) often have difficulty processing and retaining verbal information. Activity schedules are used to maintain attention, assist in comprehension of spoken language, and organize the environment (Banda, Grimmer, & Hart, 2009; Dettmer, Simpson, Myles, & Ganz, 2000; Flannery & Horner, 1994). Activity Schedules are highly effective in the reduction of problem behaviors, and are a beneficial part of a treatment package for individuals with Autism and other disabilities. Lequia et al, 2011, reviewed the effectiveness of activity schedules across the following conditions: self-regulation, independence, transitions and play. Examples of the effectiveness of the Activity Schedule include: decreased aggression and increased compliance during transitions, increased acquisition of appropriate behaviors and maintenance of acquired skills.

Regardless of the intended purpose of the activity schedule, interventions including activity schedules were effective in reducing challenging behavior. (Lequia, Machalicek, Rispoli, 2011). The participants in the studies were males and females aged 3-13 years old.

REFERENCES

- Lequia, Machalicek, Rispoli (2011) *Effects of activity schedules on challenging behavior exhibited in children with autism spectrum disorders: a systematic review.*
- The Building Language Independence (BLI) Assessment (Corwin, A. & Howarth, M., 2013)

ABSTRACT

This study examined the effects of an Activity Schedule on rates of self-injury and aggression pre and post intervention. The study was completed with 3 participants, 2 middle school students, and 1 high school student enrolled in public schools. The activity schedule consisted of 5 activities; beginning with all preferred activities and systematically adding non preferred activities as problem behaviors decreased across participants. The schedules were presented to the participants in list form and students referred to the schedule to begin the activity, complete the activity, clean up and indicate completion of the activity. The dependent variable was the rate per hour of aggression and self-injurious behavior, and the independent variable was the implementation of the activity schedule program. The purpose of this study was to determine whether the implementation of an activity schedule resulted in changes in the rate of targeted problem behavior. The results of this study show that overall, each participant decreased in their rate of occurrence of aggressive and self-injurious behavior following intervention.

VARIABLES

Dependent Variable: The Dependent variable for this study was the rate of aggressive and self-injurious behavior.

Independent Variable: The Independent variable in this study was the implementation of an Activity Schedule.

PROCEDURE

Activity Schedule Implementation

Each student was presented with a visual activity schedule with a sequence of 5 activities, taught in the following phases:

Phase 1: 5 preferred tasks, with a potent reinforcer as the last step.

Phase 2: 2 preferred tasks, 1 non-preferred task, then 2 preferred tasks.

Phase 3: 1 preferred task, 1 non-preferred task, 1 preferred task, 1 non-preferred, and 1 preferred task (reinforcer).

Phase 4: 4 non-preferred tasks and 1 preferred task (reinforcer).

Phase 5: 3 non-preferred tasks and one “surprise” task (indicated by a question mark) placed anywhere in the first 4 steps. The “surprise” should be a reinforcer in this phase. The final step is a preferred activity.

Phase 6: 2 non-preferred tasks and 2 “surprises” (one preferred and one non-preferred) indicated by a question mark. The final step is a reinforcer.

Phase 7: 2 non-preferred tasks, and 2 non-preferred “surprises,” followed by a preferred reinforcer.

Phase 8: Same as phase 7, except one set of the non-preferred materials has the note “cancelled” attached and should not be completed.

Phase 9: Same as Phase 6 (2 non-preferred and 2 “surprises” (one preferred and one non-preferred) listed with a question mark. The preferred “surprise” is cancelled. The final phase is a reinforcer.

Phase 10: A random combination of phases, with the last one being a reinforcer.

(The Building Language Independence (BLI) Assessment (Corwin, A. & Howarth, M., 2013)

(The Building Language Independence (BLI) Assessment (Corwin, A. & Howarth, M., 2013)

DISCUSSION

The results from this research review demonstrated that an Activity Schedule is an effective component of an intervention package to reduce problem behavior and increase skill acquisition. Limitations include: lack of detail regarding the cognitive and communication abilities of each participant and the concurrent implementation of other strategies. Further research should include a component analysis to determine the effectiveness of an Activity Schedule as a single component of an intervention package, an expansion of the setting to include fully included classrooms and the use of a schedule tailored to the communicative needs of each participant.

RESULTS

The study was conducted as an AB design and each participant was observed and baseline on aggression and self-injury were measured before the activity schedule was implemented.

Participant A had a rate per hour of 5.25 occurrences of aggression and after the implementation of the Activity Schedule, aggression decreased to .25 occurrences per hour.

Participant B had a rate per hour of 27 occurrences of self-injury and after the implementation of the Activity Schedule, self-injury decreased to .5 occurrences per hour.

Participant C had a rate per hour of 15 occurrences of aggression and after the implementation of the Activity Schedule, aggression decreased to .2 occurrences per hour.

Overall, the participants’ demonstrated a decrease in aggressive and self-injurious behavior.

