Why Play?

Play

- **verb** 1. engage in games or other activities for enjoyment rather than for a serious or practical purpose.
- **noun** 1. activity engaged in for enjoyment and recreation, especially by children.

*Compact English Dictionary Online; Oxford University Press (2011)*

The dictionary definition of play includes enjoyment as the key defining feature. It suggests that playing is about ‘having a good time’.

Anyone who has spent time observing children in pre-school and school settings, as well as at home, either as a professional or a parent, will have seen for themselves that play is an enjoyable activity. Smiles, laughter and shrieks of delight all feature in children’s ‘enjoyable’ play.

Equally, those working or living with children will have heard youngsters’ sadness explained by phrases such as, ‘He won’t play with me’. ‘She spoilt our game’ or, ‘I can’t find anyone to play with’.

Enjoyment is clearly a key factor ... but is there more to it? Is playing just about having fun? Research suggests that there is far more to play than that.

Early signs of play behaviour are evident in most children in the first months of life and follow a predictable developmental course. Babies engage in sensorimotor play, for example, banging or spinning objects and oral exploration from about three months of age. From 12 months, relational play is evident. This includes activities such as piling up toys or putting objects into things. Shortly after, at about 14 months, the first signs of pretend play develop in the form of functional play. This can be described as the appropriate use of an object or the conventional association of two or more objects, such as a spoon to feed a doll, or placing a teacup on a saucer. (Ungerer and Sigman, 1981) This stage is followed at 20 months by the beginnings of symbolic play, e.g. pretending that one object is something else.

While this pattern of development is evident in typically developing children, in children with autism these developmental stages of play are impaired and often absent.

Typically developing play has a number of distinct characteristics (Wolfberg, 1999):

- Firstly it is pleasurable, having a positive effect; children often smile and laugh when playing.
- Play requires active engagement. Children become absorbed in their play while they explore, experiment and create. It is not an aimless activity.
- Play is voluntary and intrinsically motivated, as children freely choose the activity. Motivation to play comes from within the child, with no external demands or rewards; it is self-imposed, not imposed by others.
- Play involves attention to means over ends. In other words, there is a greater attention on the process of playing rather than what one ‘gets out of it’. Any goals in play tend to be flexible, self-directed and are changed frequently.
- Play is generally open ended.
- Play is flexible and changing. During play, children are free to do the unexpected; they can (and do) change the rules and experiment with new, untried behaviours and ideas. Play can change as children build on and alter their ideas.

- Finally, play tends to be non-literal. In play, children treat objects, actions or events ‘as if’ they were something else; either using items as something completely different or playing at something real, e.g. ‘play fighting’.

Play has been linked with advances in:
- cognitive
- social
- language
- emotional development.

(Rubin, Fein and Vandenberg, 1983). Wolfberg (1999) described the contribution that play makes to all these areas of a child’s development.

Firstly, play is believed to contribute to and requires a certain level of cognitive function. Children obtain knowledge of functional, spatial, causal and categorical relationships from early play activities as well as being introduced to thinking about meanings and limitations. In order to play, children, therefore, require a degree of flexibility and creativity in both their behaviour and their thinking. Both of these are also developed through play, leading to an increase and improvement in more original problem-solving. Play also gives children an opportunity to experiment with new and unusual behaviour.

Play also develops social competence, through engaging in intimacy and affection, which often lead to the formation of friendships. Play requires negotiation and compromise and frequently requires the interpretation of subtle social cues. Play allows children to test out their ideas about possible relationships (Wolfberg, 1999).

Through play, children experiment with different forms of language and some of its rules. This experimentation leads to the development of new skills. The introduction of a narrative structure often begins during play and this later gives rise to a child’s literary imagination. Playing encourages children to express themselves as individuals and helps them to interpret and make sense of the world (Wolfberg, 1999).

For most children, playing can also be a way of dealing with stress and upset in their lives and sometimes helps them to work through difficult times and experiences. It allows them to suspend reality and pretend to be someone or somewhere else.
Play in Children with Autistic Spectrum Disorders

There is a general consensus that autism, or autistic spectrum disorder, encompasses a set of three major diagnostic criteria which are closely connected to the main early observations of Leo Kanner and Hans Asperger, who first identified autism and Asperger syndrome respectively. These are delays in the areas of social relatedness, communication and behaviour and/or imagination. Traditionally these three main areas of delay are known as the ‘triad of impairments’.

More recently it has been proposed that the ‘triad’ may be better described as developmental differences rather than impairment (Jordan and Jones 2001). These are, after all, developmental areas, not behaviours. Jordan suggested that the triad is social interaction, communication and flexibility in thinking and behaviour (not imagination); an essential desire to be in control. She proposed that children with autism do have some difficulties in creating something entirely from their imagination, but that this does not mean they cannot be exceptional artists in visual, musical or even the language arts. Cumine et al. (2001) described the third impairment as ‘social imagination and flexibility of thought.’

Children require a degree of flexibility and creativity in both their behaviour and their thinking in order to engage in play (Wolfberg, 1999). As deficits in this area of development are clearly evident in autism, this may offer an explanation as to why children with autism rarely engage in play.

Wolfberg (1999) describes the way in which children with autism tend to engage in more repetitive play, for example, manipulating objects, carrying out routines, lining objects up and following obsessive interests, with an emphasis on sensory stimulation. This behaviour is closely linked with the third part of the triad, namely impairment in ‘imagination’. She argues that without specific teaching children with autism are unlikely to engage in functionally appropriate play.

In free play, children with autism also typically avoid or resist social interactions, tending towards watching others, playing alone or alongside their peers. They rarely initiate play themselves. (Wing and Atwood, 1987).

People play an important role in introducing children to the proper use of things, through joint attention and imitation. Williams (1998) argues that because children with autism tend not to include others in their use of objects, or use them to guide their own actions, they miss out on lots of information about how to use things in an appropriate way.

Similar arguments suggest that problems in using other people as a source of guidance for how to use objects may also account for reduced variety, without guidance from other people, children are left with their own, more limited ideas of interesting actions.

Children with autism do not join in with others in the typical shared pretend play situations but may show an ability to ‘imagine’ within their own narrow play routines. It is with sharing in the imagination of others and creating joint play scenarios that they have most difficulty, resulting in further difficulties in generalising learning to new situations, problem-solving and broadening interests outside the ones that dominate their thinking and behaviour.

Differences in the play of children with autistic spectrum disorders and typically developing youngsters can affect the child’s behaviour. As described previously, the benefits of play, which may be missed if a child with an autistic spectrum disorder is unable to independently engage in typical play behaviour, result in enhanced cognitive, social and emotional
skills. Impairments or delays in these key areas are likely to result in challenging behaviour as the child attempts to communicate and get their needs met (Thornton and Cox, 2005).

Thornton and Cox (2005) ran individual play sessions with youngsters with autistic spectrum disorders specifically to address challenging behaviour. They incorporated techniques which included rapport and relationships, imitation, gaining attention, turn-taking, enjoyment and structure. Their research found that such play interventions did impact on the children’s behaviour, with a reduction in challenging behaviour following the structured play intervention.

In their work, Sherratt and Peter (2002) found that play activities tend to generate an emotional response, and will therefore target the part of brain that seems to be underfunctioning, according to some theories, in children with autism.

They maintain that play can be made to be memorable because it is fun, exciting, pleasurable and intriguing; sometimes even annoying and frustrating. They promote play-based approaches because they are live, energising and beneficial and hence tend to reinforce a sense of self. They create natural opportunities for children to access shared meaning within an experience. For these reasons, Sherratt and Peter (2002) suggest that play approaches and experiences are extremely important for children with autistic spectrum disorders. They argue that simultaneously activating the areas of the brain associated with emotions and generative thought and explicitly teaching children with autism to play will lead to success. Sherratt and Peter (2002) call it the ‘learning how to do it while doing it’ approach. They say:

In a rapidly changing, fast moving and culturally diverse world, if children with autistic spectrum disorders are to be able to cope with and embrace the unexpected and unforeseen, and to have dealings with a diversity of people, then their capacity for creative, flexible, imaginative thinking needs to be developed. (p10)

The implications from the research are that children with autism require direct teaching of object function and toy use in structured situations (Sherratt and Peter, 2002; Wolfberg, 1999).

Whilst child-initiated and free-flow play clearly have their place in early years’ settings, for children whose differences directly link with the very skills required to develop play, and who find choice, flexibility and creativity intrinsically challenging, more structured teaching of play is necessary.