

A BRIEF REVIEW OF FUNCTIONAL COMMUNICATION TRAINING FOR CHILDREN WITH AUTISM

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***Abstract:** Functional communication has had many positive effects on children; this article will be mostly on how effective FCT is with students with autism. FCT is a treatment that can replace aberrant behaviors with a positive form of communication and that will eventually eliminate or reduce most aberrant behavior. Electronic and manual searches were conducted in Psych Info, ERIC, Web of Knowledge, as well as the reference sections of the materials that were located. The overall outcomes in this brief review indicated the FCT is an effective intervention strategy for students with autism.*

***Key Words:** functional communication training (FCT), special education, behavior disorders, at-risk students, education, autism*

Introduction

People and young children with autism (ASD) is a developmental disability affecting the lives of lives of thousands of children, (1 in 88). The essential features of ASD included impairments in social interaction and communication skills (Richmond, Conroy, & Taketo, 2006). Also when students with ASD have those impairments in communication skills they can often exhibit higher levels of aberrant behavior, such as hitting, biting, screaming, self-injurious behaviors, and many other behaviors that can be harmful to themselves or others.

In recent studies researchers have studied the relationship between aberrant behaviors and communication skills, (Bott, Farmer, & Rhode, 1997). In these studies they have found that usually impairment in communication skills will cause the aberrant behavior and there is a strong relationship between these two things. In a study with Sigafoos (2000) found that impaired communication development may actually cause aberrant behaviors because of people with a high speech skill deficient displayed, aberrant behaviors such as self injury and aggression. This could be because of the people not being able to communicate what they want and then having this that turn into frustration. This frustration often becomes a setting event for aberrant behavior (Carr & Durand, 1985)

Functional Communication Training

A treatment that has been proven as an effective way of introducing a way of communication to children with ASD has been functional communication training. This treatment is an evidence-based practice that has the potential to impact the communication skills and aberrant behavior with children with ASD (Carr & Durand, 1985). FCT was developed in the mid 1980's. FCT requires a functional analysis (FA) be carried out through all the functions of behavior. These functions include escape, attention, tangible, or sensory. Next, the functional analysis will assess the function of behavior through these various conditions. Once the behavioral function has been determined, this will eventually lead to replacing the aberrant behavior with a communicative response that serves the same function (Machalicek, O'Reilly, Rispoli, Davis, T., Lang, Franco, et al., 2010; Carr & Durand, 1985).

To obtain more information regarding the child or person, a FA usually employs interviews, direct observations, and analog probe assessments. The interviews we will usually ask the caregivers, parents/guardian behavior related questions that have to deal with their aberrant behavior, such as when does it occur, are there any signs of build up before the behavior happens, and so on. Direct observations also happen in the natural environment, clinic settings, home, and anywhere the person usually will be at, at any point of the their life on a daily bases, also through the interview the behaviorist can make hypothesis based on where the behavior happens the most.

After this process is completed, the interventionists can identify a communicative response to teach the person that will replace the aberrant behavior. This communication can be verbal language, picture communication, gestures, or assistive technology (Brady & Halle, 1997). For example when there is a task placed on a person like reading, we can give them a break card to let them cool down and become less frustrated, also we could use this as a help card if they need to ask for help.

Then the final step in this process involves ignoring (extinction) the aberrant behavior and prompting to use the communicative response that replaces the aberrant behavior. FCT shows that it is effective treatment because it should increase the communication and decrease aberrant behavior.

Sample Studies on FCT

Mancil and Bowman. (2010) worked a four-year-old boy with autism who seldom used spontaneous verbal language to communicate his needs and wants. His mother wanted a technique that would help in communicate in the home and school environment. This participant was delayed across all areas of development. The primary behaviors that were evaluated were the tantrums (throwing items on the floor, screaming, etc.) and how many communication response the participant gave. In Mancil's experiment they used a multi-element design (Kazdin, 2011). There was a total of 24 sessions and there were four demands, demand A was consisted of two conditions baseline, and intervention which were verbal mand, and spontaneous communication. Mand B, C, and D consisted of three phases, verbal mand, spontaneous

communication, and a distracter. At the end of this experiment the researchers found that FCT was shown to be effective because the aberrant behavior decreased dramatically and his communication increased in the home setting. Some limitations they said to think about were that there was only one participant who was higher functioning, so it could be viewed as a weakness for children who are functioning at different levels of severity.

Hines and Simonsen, (2008) employed young children with autism and taught picture icons. The setting was in an afternoon preschool with a 3-½ year old male diagnosed with autism. He engaged in a great number aberrant behaviors. They decided that FCT was the best treatment. The study had three phases, baseline, teaching, and maintenance. The training phase included the implantation of picture cards. After this the prompts were faded. Overall the participant learned how to appropriately use picture cards to request desired items, this also decreased the disruptive behavior and increase appropriate engaged behavior.

Conclusions

The research reviewed showed that FCT was a very effective program to employ with children with autism. Showing this is very important because in our world today we have a lot more cases with children with autism and usually effective communication is affected by this disability.

Yes there are some limitations to this treatment, some of which most of the studies are single case designs and most of the time are higher functioning children with autism. Also sometimes not all settings or environments in the child's life will generalize these treatments. The goal is to get more communication out of children who have very limited communication skills and functional communication training does do this. It shows that it is effective in the aspect of taking the aberrant behavior replacing it with an appropriate way of communication and in the process decreasing the aberrant behavior and increasing the communication in children with ASD.

If implemented more in the schools and home setting one could potentially teach children with ASD to communicate in a more appropriate way. Teaching them functional skills such as being able to communicate could prevent them from being overly noticed in society and this should lead to less stigmatization (Mancil, 2006). With FCT we can have a quick and easy way to communicate, especially with all the new technology we now have that can go anywhere with children and would hopefully generalize faster because of this equipment (Mancil, 2006; Koegel & Kern-Koegel, 2006)

Over all this treatment has been shown effective and really can assist children with ASD to communicate what they want and what they need (Koegel & Kern-Koegel, 2006). In the past, this has been very difficult for them to do. FCT is an effective treatment that does and will help more children with communication problems (Kurtz Boelter, Jarmolowicz, Chin, & Hagopian, 2011; Mancil, Conroy, Nakao, & Alter, 2006). We would recommend these procedures to any parent who wants to help their child have more communication. This is because FCT has shown to have impressive outcomes. Also, it can help parents as well as therapists determine what function or functions a client's behavior has. Once this has been determined, FCT can be

implemented to suggest a replacement behavior with a different communication skill. How FCT is individualized should be determined on a client or child-by-child basis.

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