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Drama Therapy Interventions that Support Students with ASD During COVID-19

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Drama Therapy Interventions that Support Students with ASD During COVID-19

Capstone Thesis

Lesley University

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Drama Therapy Program

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Abstract

Due to the coronavirus (COVID-19) pandemic that began in December 2019, many people experienced traumatic losses, environmental stressors, and overall daily challenges. One of the populations most at risk during this time were those with an autism spectrum disorder (ASD). Those with mental health illness and developmental differences are experiencing the pandemic in different ways. Individuals with ASD tend to have both developmental differences and mental health challenges that motivate individuals to seek medicinal and therapeutic help, along with other services to support their daily needs. This literature review addresses the negative and positive impacts COVID-19 has had on the ASD population. There will be a focus on children and adolescents with ASD, who are experiencing virtual learning and how their social and emotional skills (SEL) might be at risk during this time due to these unforeseeable factors. Drama therapy techniques and interventions such as role-play, storytelling, projective tools, and embodiment will be explored as therapeutic options for the ASD population to work through areas of anxiety, depression, isolation, social-emotional learning skills, and overall wellness. The literature supports how these drama therapy interventions complement the ASD population in therapeutic services and can be a prominent benefit to combat the stressors of the COVID-19 pandemic.

Drama Therapy Interventions that Support Students with ASD During COVID-19

Introduction

Students of all ages around the world have been forced into virtual learning due to the global pandemic. In December 2019, there was an outbreak of a new virus called the Coronavirus or COVID-19. The virus first appeared in China and quickly spread throughout the world causing a global pandemic (Sani-bozkurt, Bozkuş-genç, and Yıldız, 2021). Since this epidemic began, lives have been lost, people have fallen ill, families have quarantined, and countless have lost their jobs. Another major effect caused by this pandemic has been student instruction.

During the time of COVID-19, schools have closed and children have experienced a new style of learning, which is virtual. Although students across the globe are struggling with distance learning, those facing developmental disabilities such as autism spectrum disorder (ASD), raise a higher concern. The ASD population of students are one of the most vulnerable and high-risk populations impacted by COVID-19. Their daily routines and physical interactions with others have changed and shifted. For example, due to the style of virtual learning, students join their classes by audio and screen sharing online. This automatically places a stronghold on the developmental factors needed for students with ASD to be successful in learning. For example, social emotional learning skills (SEL) are of great importance for young individuals with autism to develop and grow in. Drama therapy techniques such as storytelling, role play, embodiment, and the use of projective tools are interventions that can be used to support such individuals combat the negative effects of COVID-19, especially those facing ASD. As I reveal the effects the pandemic has had on students with ASD during forced virtual learning, this paper also explores the possibilities in how drama therapy techniques can support their SEL skills.

The concerns to be investigated involve exploring the aspects of distance learning. For example, some schools and/or teachers requests all cameras on during instruction and others do not. Children with ASD are not receiving the full support from educators online compared to inperson schooling. For an individual facing a developmental disorder and struggles with social interactions, understanding facial cues and expressions poses a great threat to their SEL progression. Without being able to have in-person instruction, parental guardians are also being forced to play several roles such as parents, educators, counselors, etc. This places a strain on parent ability to perform wholesomely and applying overwhelming stress to their households. These concerns are discussed throughout this literature review along with how drama therapy interventions can support the autism student community and aid in the healing process that the pandemic has caused to their everyday lives and regression in their academic and SEL production.

Literature Review

History of COVID-19

It is important to understand the historical context of the corona virus. It has caused students to resort to virtual learning and has kept the ASD population at risk. The first outbreak and discovery of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), or coronavirus (COVID-19), was in China, late 2019 (Sheposh, 2021). Within a short span of only a few months, the coronavirus had spread to over 189 countries and territories. The outbreak quickly caused illness and deaths all over the world. By March 2020, the World Health Organization (WHO) declared the outbreak a pandemic. During this month, many schools and cities around the world began to close and society was placed on lockdown in hopes of stopping

the spread of the virus and to keep people safe. Unfortunately, that was not case. Cases of the virus began to increase daily along with death rates.

The Center of Disease Control (CDC, 2021) advised citizens to avoid crowds, stay sixfeet apart, and wear masks while being in the company of others. During this time, many businesses were forced to close due to the health risks involved. Schools, day cares, and health care organizations such as therapy services closed and resorted to online platforms until they could determine safety measures. This is when virtual learning took on a new meaning. Especially for those with ASD and others who may have a developmental difference, the pandemic created a major shift for such individuals. This is the primary focus of the literature review, to discuss interventions of drama therapy for individuals with ASD to provide social and emotional support during the COVID-19 pandemic.

Due to the coronavirus being discovered in late December 2019, and this literature review being composed in April 2021, it is worth noting that there is constant evolving information and scientific advances being released and uncovered daily. For example, since the WHO declared the virus outbreak a pandemic in March 2020, scientists and researchers began clinical trials all around the world in search of vaccinations that could possibly combat the virus. In November 2020, the US-based drug manufacturers Moderna and Pfizer had announced promising results from their clinical trials and thus vaccinations were approved for an emergency use by the US Food and Drug Administrations (FDA). By April 1, 2021, there had been 129.17 million reported cases of COVID-19 that had resulted in 2.82 million deaths across 192 countries and territories all around the world (Sheposh, 2021). Therefore, the vaccinations released were groundbreaking news and yet not everyone can receive their first dosage. There are certain populations who were first in line to receive the vaccinations. The aging population and healthcare workers were the

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first ones in line to be vaccinated (CDC, 2021). Next in line were educators, in an effort to reopen schools. Unfortunately, vaccinations for other populations were not set to be given just yet. Therefore, other populations that are at high risk during this time will have to wait in line for their turn to be vaccinated, keeping many groups of people on edge and longing for some normalcy, such as the ASD population.

COVID-19 & the ASD Population

From late December 2019 to current events in April 2021, there had been research to uncover the effects of the coronavirus pandemic with individuals with ASD. For starters, the CDC has stated that "people with developmental disabilities who have serious underlying medical conditions may be at risk of serious illness" (CDC, 2021). Some people with developmental disabilities may have difficulties accessing information on the pandemic, understanding, or practicing preventive measures, and communicating symptoms of illness with care providers. It is important to note that individuals with ASD not only have mental health conditions to monitor, but also have co-occurring physical conditions that they experience on a day-to-day basis. These conditions can become exacerbated due to the pandemic. Their levels of anxiety and overall wellness need to be monitored.

Some of these underlying conditions of individuals with ASD or other developmental disabilities can be gastrointestinal, manifested sleep problems, ADHD, anxiety, and depression (Ameis, Lai, Mulsant, & Szatmari, 2020). These conditions are said to be heightened when an individual is under stress. First, I examined the impact of the environmental changes caused by the pandemic and how daily routines have been disrupted to the ASD population. These interruptions are unique and different for each person with ASD, along with their caregivers. For example, reduced access to specific foods have impacted autistic individuals who have a

selective eating diet (Ameis, Lai, Mulsant, & Szatmari, 2020). This impact could potentially lead to poor nutrition and elimination problems and constipation for the digestive and gastrointestinal systems.

Although, being at home can allow for a greater pursuit of special interests, it also challenges caregivers and can provide high levels of anxiety and depression for individuals with ASD. There is a greater risk of aggression ranging from verbal to physical interactions with others. It is often directed toward caregivers, as well. This issue relates to the heightened frustration of performing daily activities in the same space each day and not being able to go outside or having a more freeing routine. Establishing a new routine for people with autism may generate challenging behaviors that cause resistance (Patel et al., 2020). The demands of the pandemic places pressure on both the individual with autism and the caregiver due to little or lack of external support services that have been briefly stopped until there is a new way to deliver them. Therapeutic services were paused for a moment until mental health professionals were able to establish their online platforms to support their clients (Narzisi, 2020). These new forms of therapy consisted of Zoom meetings, Ring Central, and other video conferencing platforms to ensure safety and precaution measures. However, there are also some cons to this change that are discussed later in the literature review.

As COVID-19 continues to exist, there has been an increase of distress for people with autism (Patel et al., 2020). Not only are their physical conditions being impacted or elevated during this time, but due to the increase use of hygiene and sanitation, along with social isolation and social distancing have interrupted their daily routines causing distress. Caretakers were not able to provide warning and prepare their family members with ASD on these changes, creating potential friction in relationships and aggravations at home. Ameis, Lai, Mulsant, and Szatmari (2020) mentioned how when schools and businesses gradually reopen, after the first wave, the numbers of COVID-19 cases were only going to increase, forcing organizations to close again. They were correct. This had caused a challenge for the ASD population due to the back-and-forth transitioning phases and adjustments to society reopening and closing again. One of these shifts that have been dominantly and widely seen globally has been the transition to online learning. The shift to online learning has had great potential to jeopardize the wellbeing of many individuals with ASD, as well as some positive effects for many individuals with ASD.

ASD & Virtual Learning

All of these concerns contribute in different ways for each individual. For those who already experience such behavioral difficulties or dysregulations in their sleep, attention span, anxiety, and depressive symptoms are the ones who will most likely see a heightened problem in their ASD condition; due to the new changes brought on by the pandemic and societal lockdown. As one can imagine, there are many pros and cons to outweigh about virtual learning. Many factors need to be considered when it comes to remote learning. For example, access to internet and technological devices, at-home dynamics and complications, social and emotional learning, social interactions, anxieties, as well as academic and cognitive growth. It is imperative to understand the dimensions of social participation of students with ASD in order to support, transform, and enhance their inclusion in not only the general education settings like before (Mamas et al., 2020), but now for the virtual educational settings.

Tina Nazerian released an article titled "The Pandemic Pivot: The impact of COVID-19 on early literacy instruction" (2020). She writes about the many impacts the pandemic has forced on students in virtual learning and strategies for educators when working with the students during the online platform. Nazerian's (2020) article discusses how young learners have limited opportunities to interact with their teachers and other students on a personal basis. For students who have ASD, this is one of the top concerns. Many students with ASD struggle with social and emotional skills and this is where school interactions with educators and peers help them develop these skills. The virtual platform has blocked this progress for many students with ASD because they are not always necessarily required to interact with their teachers or peers. Most school systems resorted to using Zoom, which is a video conferencing tool used to allow groups to interact via shared camera, audio, screen sharing, and chat features etc. However, entering this new platform has actually been a positive for some students with ASD who have anxiety, providing an outcome of reduced stress (Ameis, Lai, Mulsant, & Szatmari, 2020). This is especially important to note since school tends to be a setting where some students with ASD are faced with challenges due to academic difficulty. As well as co-occurring ADHD or anxiety disorders, students with ASD may be at high risk for bullying and cyber bullying from peers. All in which contribute to trauma, depression, anxiety, and even suicidality. Therefore, the pandemic and staying home for school brought some alleviation of these daily stressors to students with ASD who might have been victims of these negative situations brought on by the school environment.

Not just students with autism, but many children and students in general may not have a caretaker at home during the pandemic to assist with the virtual learning process. Many parents also had to resort to teleworking and/or have other children and family members to tend to making the home environment a challenge in general (Nazerian, 2020). In order to assist with these home-life challenges, educators were encouraged to place trauma-informed practiced and instruction at the forefront (Nazerian, 2020). Children operating under stress and trauma might

exhibit some challenging behaviors such as impulsivity, withdrawal, defiance and resistance, aggressiveness, and even perfectionism. These are some indicators of trauma and stressors developing and are not supposed to be seen as a choice that students make, but rather an issue that needs addressing. Other triggers for students, especially students with autism, are sensory overload, unpredictability, and frustration. These triggers can look like many things. For example, sensory sensitivity can be a student with ASD doing virtual learning at home and during instruction their dog starts barking loud and excessively. Perhaps, it happens throughout the online sessions and it becomes too much for the young student. This can lead to avoidance of the virtual learning altogether.

Overall, the virtual platform has given educators and students the ability to stay connected during a global pandemic (Surkhali & Garbuja, 2020). Although it might not look the same to everyone, being able to continue with schooling and following a weekly schedule has helped provide a regular routine for all students. This especially includes those with autism who tend to struggle with it the most (Ameis, Lai, Mulsant, & Szatmari, 2020). Other pros consist of the ability to continue their schooling anywhere with the simple use of technology, meaning students can take their laptops or Chromebooks out of state for family events and continue their education without any repercussions. The students go at their own pace and can even accelerate their learning process. Students with ASD and in the general population can even have peace of mind knowing they are safer at home than in school while the coronavirus is still very present in the world.

Some of the disadvantages discussed in the literature also exposes the true fact that many do not have internet access and cannot afford internet connections or electronics (Surkhali and Garbuja, 2020). Therefore, school systems will have to provide these tools and yet some school

systems are not funded enough to make such a provision to their community. This stronghold can lead to disengagement and disturbances during the online sessions. Ultimately resulting in a feeling of isolation and hopelessness for students. These feelings will then take a deeper precedence within the ASD community. The feelings and emotions of many students, especially with ASD, may not be made fully aware to their teachers either. The nonverbal cues and behaviors of students with ASD may not be noticed by teachers due to the platform set up. The same goes for students requiring praise and positive feedback. If a student is performing well academically and understanding the material well given the online platform, the teacher can easily not notice a student's actual isolation. This can cause the student to sink lower into isolation and become resistant to support, increasing anxiety levels and depressive symptoms. The difficulty in regulating the time spent on screens, is yet another concern, which has drastically increased during the pandemic (Kawabe et al., 2020). Kawabe et al. discussed a study where screen time was studied and compared with general education students and students with autism. The findings showed how before the pandemic, screen time and the use of technology was higher within the ASD population compared to students without ASD. However, once the pandemic hit and young people had to resort to online learning, both groups involvement in screen time and technology use increased drastically. The extended amount of time spent in front of a computer or any electronic device could produce negative physical effects (Surkhali & Garbuja, 2020). Negative physical effects can include visual discomfort and potentially impairment, exhaustion and fatigue, as well as muscle and joint aches. These dangerous effects are especially hazardous for individuals with ASD that may already have some of these impairments or challenges. The advantage and disadvantages of virtual learning for students with ASD are different for each student. However, the lack of socialization and isolation may

ultimately result in a decrease in academic achievement and greater mental distress for the ASD population as whole. Interventions are recommended in this literature review to help combat some, if not all of these stressors and effects from the pandemic. Drama therapy will be a focus in the intervention and support needed for individuals with ASD during the pandemic. Implementing drama therapy techniques and interventions for individuals with ASD can help formulate strategies to prevent the decrease in SEL skills and overall wellness of the ASD population.

From CBT to Drama Therapy

Therapy practices tend to use a number of interventions to support their clients with ASD. Again, since individuals with ASD are considered to have social skill limitations as a defining characteristic, there is generally a heavy focus on social and emotional skills within the therapeutic space. Social skill difficulties also remain an area of vulnerability even for the most cognitively able individual on the autism spectrum (D'Amico, Lalonde, & Snow, 2015). Therefore, many therapists lean toward cognitive-behavioral therapy (CBT) to first help support the anxiety component in children with ASD. Therapist utilizing CBT exercises, originally would have their clients perform and practice certain tasks and activities. For example, the therapist would leave the office so that the client can interact with others or have the client start a conversation with a peer, order food from a restaurant, or invite a friend over to play. However, due to the global pandemic of COVID-19, these approaches had to be modified. Therapists had to establish interaction exposures from home such as answering the home telephone (if there was one), making phone calls or video calls to family members, or even calling local businesses to ask questions about products or orders that were placed (Kalvin et al., 2021).

Cognitive behavioral therapy (CBT) exposes how daily tasks can be used as interventions for the ASD population, however, this therapeutic process can be brought to a higher level utilizing the tools and techniques of drama therapy. A simple CBT exercise can be transformed into a drama therapy activity. For example, having a playdate with a friend or peer can be first practiced by using projective techniques such as playing with toys and have dialogue back and forth with the therapist or even in a group with other children. The use of puppets can also be used to assist children with ASD but acting as a medium so that the child can openly express his, hers, or their feelings. Also, masks can be another great tangible tool when having to confront other people in social interactions or expressing oneself.

Drama Therapy Interventions

Drama therapy is known to be an intentional and systematic use of drama techniques and theatre processes to achieve psychological growth and change (Emunah, 1995). As a main focus for this paper, the discussion about utilizing drama therapy techniques and tools such as role play, storytelling, projective techniques, and embodiment exercises will be of key importance during this conversation. Drama therapy interventions for students and children with ASD have always been prominent in their treatment process and success stories.

Role Play

Role play can be described as a core process in drama therapy. It is said to be a highly relevant process in developing social skills amongst children and adolescents with ASD (D'Amico, LaLonde, & Snow, 2015). It opens up a door where participants can learn skills such as effective communication, cooperation, and developing a self-awareness. It is a technique used in therapy, theatre, and psychology to address personal issue while still maintaining a reflective

distance from those issues (Cook, 2020). Role play is stepping into another person's shoes and trying to think and feel like that person or thing (Feniger-Schaal & Koren-Karie, 2021).

Roles can be played to practice and develop skills such as social and emotional learning skills or gain personal qualities such as self-esteem or communication standards (Jones, 2007). This technique is used to explore life events that have occurred currently or occurred in the past. This is exactly why the use of role play can serve as top intervention for the ASD population; simply because the current time of COVID-19 already consist of many events that are triggering stressors. For example, if a child with ASD is having a difficult time being separated from a parent out of fear for the parent of contacting the coronavirus, then the use of role play can be used to help express the child's feelings toward the parent and situation as well as possibly developing an understanding of why the parent must leave the house. Another scenario that could be brought on by the pandemic restrictions is a child living with a caregiver that is supposed to be assisting with the virtual learning such as a sibling, parent or family member. The child can take on the role of the other person to explore those frustrating feelings about the virtual learning process or the feelings developed toward the family member. This is part of the process of exploring other roles. Jones (2007) claims "role taking or role playing refers to processes such as someone playing themselves, or an imaginary character or a person taken from life experience within a role play or improvisation" (p. 94). Ways to explore these role plays consist of utilizing their own body, like their face and voice, as well as the use of space and interactions with others. Role play can even be explored by using masks, objects, make-up, costumes, and props.

Storytelling

Another drama therapy technique that would be used to support the ASD population with SEL and other impacts caused by the pandemic is storytelling. Storytelling is one of the most unique ways to encourage communication, build relationships, and engage in spontaneity and develop creativity. Many social skill interventions used by therapists involve written scripts known as "social stories" (D'Amico, Lalonde, & Snow, 2015, p.23). These 'social stories' involve providing assistance for how to act in social circumstances, teaching theory of mind and other interpersonal-perspective skills through explicit and systemic instruction. The process of the social story making involves warm-up activities that include interactions. Storytelling and script making is for clients to use a piece of writing or text they created or even use an existing text work from (Jones, 2007, p. 153). The therapist is not of focus during this storytelling process, but the client's themes and potential meanings of their script is what is of significance. The therapist needs to take note of any images, interactions, characters and reactions that may arise during the client's storytelling process. The use of story making and telling is for selfexploration and self-expression without judgement. A client can sit and write out their own text and script or even compose a monologue for an object in the room. From there, the therapist is able to pull apart themes and meanings that might be relevant in the text and story created. For children and adolescents with ASD this gives them the opportunity to be as creative as they want. It allows the client to take ownership and control over their own life and story. They get to choose their own character and their own setting and scene. Storytelling does not have to take form in a written manner but by using props and projective tools to help the client tell a story. For example, for a child who cannot write yet, they can use toys, puppets or masks as a medium to help them tell their story.

Projective Techniques

Projective tools as discussed previously make up items such as masks, toys, or puppetry. Play work with objects, sculpting, and improvisation in movements are all part of dramatic projection. Jones (2007) speaks about how "in dramatherapy individuals can take on a fictional character or role, play with small objects, create scenery or enact myths" (p. 83). As clients utilize these tools, they project their feelings, emotions, and expressions all into the dramatic mediums. There are countless ways projective tools can be used in the therapeutic realm for children and adolescents with ASD. For example, perhaps a child or adolescent is having difficulty communicating with peers or is getting bullied at school and due to lack verbal skills or fear of social interactions, the child cannot stand up for themselves. The child can choose a toy, mask, or puppet to help channel those emotions and express the worries and fear of school and interacting with that certain individual or group of people. Jones (2007) claims the use of dramatic projection helps "create a vital relationship between inner emotional states and external forms and presences" (p.83). Individuals with autism have a hard time connecting with what they feel on the inside and communicating it on the outside. This social and emotional learning process is especially challenging for school-aged children and adolescents to master. During the COVID-19 pandemic, many SEL factors for these students have decreased. For some making progress with their SEL skills before the pandemic hit, now must rebuild the progress they lost. Dramatic projection can be an easy and non-threatening way for children, adolescents, and even families as a whole to address life stressors and issues.

Embodiment Exercises

Embodiment is one of the most used techniques used in drama therapy. Embodiment exercises cause a client to embody and express a feeling, emotion, person, or physical movement

or sound. For theatrical use, the body helps express an actor's imagination and discover ideas through movement, sound, and interaction with others. In many cultures, when it comes to theatre and drama, the body is used as a vessel of communication (Jones, 2007, p. 113). The understanding of embodiment is that the body is the primary source of communication between the self and other. When a client is being active in an embodiment exercise, they are being present and expressive in the "here and now" portion of the session and what is occurring in the moment. The "here and now" consist of the present moment. Examples of embodiment exercises could be role play. Again, this can be taking on the physical representation of another person, place or thing. Embodiment is also the use of sculptures. This can involve a therapist requesting their client to pose as if they are about through a punch, for example, this could be an activity used for anger or bullying purposes. The therapist can shop through an array of actions and emotions for the client to hold in a sculpture to understand what those actions and emotions feel like for them. Individuals with autism can use this tool as a helpful way to self-regulate emotions, if they are overwhelmed by virtual learning or frustrations from being at home during a pandemic. Releasing pent-up stress or anxiety from the impact of the pandemic will also be another way to use embodiment, by moving one's body and releasing inner emotions. Physical activity during the pandemic can alone help alleviate stressors for children with ASD (Yarimkaya & Esenturk, 2020). Some of the physical activity recommended for individuals with ASD by Yarimkaya and Esenturk (2020) is walking, home-based exercises that can be mimicked from the videos online, educational games that require movement, climbing stairs, and taking active breaks. All of these activities can even help self-regulate students that are dealing virtual learning stressors or are staying in front of their technology screens for too long. Therapists can and have used these physical activities as a part of their embodiment interventions. Any type of

movement with music, rhythm, group members etc. all contribute to the idea of embodiment, therefore the physical movement and body exploration is connected and of great benefit for individuals with ASD during the pandemic.

Drama Therapy Research

Parvathi (2020) discusses goals and outcomes of a seventeen-year-old boy who is on the autism spectrum. The discussion is based on an arts-based intervention that was provided to the seventeen-year-old boy. It is important to note the physical condition of the boy due to there being a wide range of differences on the autism spectrum. The boy initially appeared to be tall and handsome as he is flapping his hands, bouncing, and engages in high self-talk. Appearing to be hyper-active and not fully grounded in the reality of his surroundings.

The therapist engaged in arts-based sessions with the boy that lasted for ten months. The interventions utilized during these sessions were embodiment, drawing in story-board form, clay sculpting, singing and acting (theatre). Parvathi (2020) emphasized the use of Gestalt theory when working with this client. Claiming that the Gestalt theory focuses on the whole of anything that is greater than its parts. This idea is particularly fascinating for this population. Providing opportunities for a child with ASD to separate objects and identifiable roles to potentially offer connections that lead to a "whole" understanding of oneself.

For example, role play was an arts-based intervention utilized during the ten months. The boy dressed up and acted out family members based on his perspective of them. In doing so, this allowed the 17-year-old boy to identify his role within his family and better understand the roles that are in his own life, such as family roles. It even allowed the therapist to view the family roles based on the boy's perspective. The ten months of utilizing these dramatic techniques were successful in the boy's production of self-expression. The boy improved on his goals in building relationships, developing object consistency, and idea closure. This suggests that arts-based interventions such as drama therapy tools may expand nonverbal expression in a creative way that may bring a positive outcome for children with ASD.

Chincholkar, Veeraraghavan, & Mangla (2019) also review results pertaining to a study done on nine children with ASD. The children were randomly selected for two months of artsbased interventions of drama therapy. The main interventions used were embodiment-projectionrole (EPR) in clay and free scribble drawing. As a result of these interventions, there was a significant increase in the levels of vocalization and self-expression in children. This revealed how regular music and art involvement can build a child's brain anatomy, increase target behaviors, and promote a composite increase in a child's motor, cognitive, and executive functioning.

Cook (2020) established quantitative research that explored theatre production to initiate self-advocacy skills and assertiveness in certain individuals. The participants were individuals with disabilities, medical conditions, and mental illnesses. The measurement tool used in this research investigation was the drama therapy role play intervention (DTRPI). The DTRPI is a measurement tool used for participants with disabilities to explore role-play. Cook (2020) utilized the DTRPI as a pretest and a posttest with results scoring higher for participants in the posttest. The assessment was rated on a 21-point checklist scale on a score sheet. It contained four categories such as follows directions, focus of attention, spontaneity, and assertiveness. The results section of Cook's (2020) research mentioned scores being calculated by a percentage agreement that rated scores within two points of one another or the variables in those four categories. Thus, confirming theatre productions in the form of therapy can teach self-advocacy skills and assertiveness for individuals with disabilities such as ASD.

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Artistic Reflection

Throughout the development of this literature review, I took several journal entries to help record my processing thoughts. Along with being a graduate student, I am a special education paraeducator for Montgomery County Public Schools (MCPS) in Maryland. I have personally witnessed the ups and downs that students with ASD and other special needs have encountered and identified with during virtual learning. The journal entries were normally composed at the end of the work week, when I was able to glance at what events occurred during the work week. These events were taken from the latest news reports, issues, topics, or situations that occurred in my virtual classrooms that week, and/or any personal emotions that had arisen in reference to work, my students, and the pandemic.

The journal entries were an important way for me release some stress from the work week and organize my thoughts surrounding the literature review. In the last few days leading up to my completion of the literature review process, I created a visual that would help sum up all of what I had discovered and explored. Since there were so many layers of focus for this review such as COVID-19, the ASD population, drama therapy as an intervention source, and a concern about SEL skills, it was challenging to organize my thoughts at times. Therefore, for my artistic representation, I decided to create a visual, see figure A.

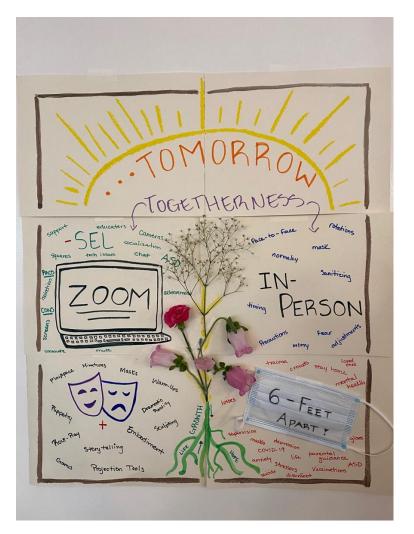
I taped six pieces of watercolor paper together to form a poster board that resembled a windowpane. I then taped it to my basement door and used it as a canvas to create on. I The artistic tools I used consisted of watercolor paint, markers, and pastels. Other items I used involved a disposable mask and live floral arrangements. The image I created was meant to appear like a window with the flowers coming up from the bottom center with drawn roots at the end. There was a painted black border around the papers to help signify the window and in the

spaces above, there was a yellow sun with the words in orange that read "TOMORROW." Below are two other windowpanes put together with the first square containing a visual image drawn out in marker of a Chromebook screen reading "ZOOM," then the box to the right reads "IN-PERSON"; which represents in-person learning. The bottom two boxes that are adjacent to each other has the drama symbol of the two masked faces "happy" and "sad," followed by a disposable mask that reads "6-FEET APART!" In each box with an image or word displayed, there are smaller words that relate or connect to the image. For example, in the "ZOOM" square, there are words such as 'pros' and 'cons', screen, achievement, and support etc. This box also contains larger words, SEL and ASD, to show the top importance of that image in relation to my project. The small associated words are of either a positive or negative connection to general focus in that square.

In creating this work of visual art, I was able to get out a lot of pent-up frustration that had built up during the work of my thesis. Again, journaling weekly and evaluating the events that occurred throughout my work week of virtual learning brought many stressors as an educator. I worried for my students and their wellbeing constantly. I wondered what their home life was like every time I did not get a response from them in a zoom break out room or when I would see their grades constantly plummeting. There was also a good amount of journaling brought on by the pandemic and what I was constantly seeing on the news about deaths and racial injustices etc. The time of Covid-19 was not only a fear of contracting the virus for our students, family members, professionals and people as a whole, but so many life changing events have taken place during this time that also contributed to many pages in my journal. In referring to figure A, I was able to channel all that energy and compose all of my thoughts and feelings with words and organized images. My visual art piece is not messy, or abstract, it is rather symmetrical and appears to be created by teacher, which is very fitting for me and my profession. Overall, once I finished the art representation, I felt lighter and at peace with the work I had done throughout this literature review.

Figure 1.

Artistic Representation



Note. An artistic reflection on the research process of COVID-19 and its impact on autisitc students during virtual learning.

Discussion

There is a considerable amount of information available suggesting drama therapy interventions are a prominent source of support for individuals with ASD. Research has shown how utilizing drama therapy techniques such as role-play, projection, story making and embodiment, can help individuals with autism and other developmental disabilities increase in self-awareness, self-advocacy, and social-emotional learning skills. Especially during the time of COVID-19, where students are struggling with fears, anxieties, depression, and isolation, these dramatic tools can provide support and aid for individuals with ASD.

Although the virtual platform for continuing education for students has posed a threat to the progression of SEL skills for those with autism, research shared has also indicated that many students with autism have soared during this time and academically been more successful online compared to in-person instruction. Reasons for these findings indicate how with in-person instruction, students with ASD are often faced with challenging moments of socialization, such as working with a partner or in a group, being called on by the teacher, or simply being present in the building and being too shy or nervous about how peers might be seeing them. With the online platforms of learning such as Zoom, these individuals get to hide behind a screen and participate silently. Some rarely even have to interact with the teacher or verbally answer questions etc. This scenario has been a pleasant change brought on by the pandemic and many students with ASD responding in this manner. Whereas for others, this new learning platform has only increased their anxiety levels, finding that the Zoom screen squares are intimidating, and they become anxious wondering when the teacher will call on them. We have also discovered how the pandemic is impacting students with autism and their families at home. Many of which are suffering from depression, separation anxiety, and general fear of the virus. As all of these

concerns come in to play, literature and research has shown us that drama therapy is a reliable and well distinguished type of therapy that can support the ASD population overcome all of these obstacles.

Reviewing the positives and negatives of virtual and remote learning, there still is an undeniable fact that technology has helped people stay connected. Despite some anxieties these video conferencing systems offer some people, we must understand how beneficial they have been in the attempt of establishing some type of normalcy. Many drama therapists and mental health counselors have utilized the use of video conferencing to stay in touch with their clients during the pandemic and to continue the services they had in-person but modifying the intervention to fit on screen. Clients can still engage in role play, embodiment exercises, story making, and even using projective tools all with what they have in their own homes. Some other examples for drama therapy in a virtual setting can involve the use of writing tools such as google docs. Google docs is a great example for how a therapist and client can share creative ideas such as story writing, collage creating, and reflection taking. The therapist will be able to view what the client is expressing with the use of this tool. To use Google Docs in this manner, therapists must be HIPAA compliant and the stored data must be encrypted.

In conclusion, there are benefits to the use of technology during the pandemic, as well as some flaws in the use of technology; especially when it comes to the ASD populations. Drama therapists, education professionals, and caregivers are all encouraged to examine their individual clients, students, and children to determine what route will be most fitting and beneficial for their current and future success. Mainly, since research has shown how some students with ASD are flourishing during the pandemic, where others are struggling. Drama therapy will be a productive

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choice for those individuals who do find themselves struggling during the pandemic and a way to improve and enhance their SEL skills.

References

- Ameis, S.H., Lai, M-C., Mulsant, B.H., & Szatmari, P. (2020). Coping, fostering resilience, and driving care innovation for autistic people and their families during the COVID-19 pandemic and beyond. *Molecular Autism* 11, 61.
 https://doi-org.ezproxyles.flo.org/10.1186/s13229-02000365-y
- Centers for Disease Control and Prevention. (2021, March 2). People with Developmental Disabilities. <u>https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-</u> <u>with-developmental-disabilities.html#print</u>
- Chincholkar, V., Veeraraghavan, S., & Mangla, P. (2019). The Unfinished Painting- An Arts
 Based Therapy Approach as an Early Intervention Module for Children with Autism
 Spectrum Disorder. Journal of Evidence Based Medicine and Healthcare, 6(40), 26632665. <u>https://doi.org/10.18410/jebmh/2019/551</u>
- Colizzi, M., Sironi, E.Antonini, F., Ciceri, M.L., Bovo, C., & Zoccante, L. (2020). Psychosocial and Behavioral Impact of COVID-19 in Autism Spectrum Disorder: An Online Parent Survey. Brain Sci., 10(341), 1-14. <u>https://doi.org/10.3390/brainsci1006034</u>
- Cook, A. (2020). Using an inclusive therapeutic theatre production to teach self-advocacy skills in young people with disabilities. *The Arts in Psychotherapy*, 71. <u>https://doi.org/10.1016/j.aip.2020.101715</u>

D'Amico, M., Lalonde, C., & Snow, S. (2015). Evaluating the efficacy of drama therapy in teaching social skills to children with Autism Spectrum
Disorders. *Drama Therapy Review*, 1, 21. <u>https://doi.org/10.1386/dtr.1.1.21_1</u>

Feniger-Schaal, R., & Koren-Karie, N. (2021). Using Drama Therapy to Enhance Maternal Insightfulness and Reduce Children's Behavior Problems. *Frontiers in Psychology*, 11, N. PAG. doi.10.3389/fpsyg.2020.586630

Jones, P. (2007). Drama as therapy: Theory, practice, and research (2nd ed). Routledge.

Kalvin, C.B., Jordan, R.P., Rowley, S.N., Weis, A., Wood, K.S., Wood, J.J., Ibrahim, K., & Sukhodolsky, D.G. (2021). Conducting CBT for Anziety in Children with Autism
Spectrum Disorder During Covid-19 Pandemic. *Journal of Autism and Developmental Disorders*. <u>https://doi-org.ezproxyles.flo.org/10.1007/s10803-020-04845-1</u>

```
Kawabe, K., Hosokawa, R., Nakachi, K., Yoshino, A. Horiuchi, F., & Ueno, S.-I. (2020).
Excessive and Problematic Internet Use During the Coronavirus Disease 2019 School
Closure: Comparison Between Japanese Youth With and Without Autsim Spectrum
Disorder. Frontiers in Public Health, 8,
<u>https://link/gale.com/apps/doc/A645371186/HWRC?u=les_main&sid=HWRC&xid=f52d</u>
```

<u>f72d</u>

- Landy, R.J. (2011). Forward. In Chasen, L. R. Social Skills, Emotional Growth and Drama Therapy: Inspiring Connection on the Autism Spectrum. Jessica Kingsley Publishers.
- Mamas, C., Daly, A., Cohen, S.R., & Jones, G. (2020). Social participation of students with autism spectrum disorder in general education settings. *Learning, Culture and Social Interaction, 28.* <u>https://doi.org/10.1016/j.lcsi.2020.100467</u>
- Narzisi, A. (2020). Autism spectrum condition and COVID-19: Issues and chances. *The Humanistic Psychologist*, 48(4), 378-381. <u>https://doi.org/10.1037/hum0000221</u>

Nazerian, T. (2020, September/October). The Pandemic Pivot: The impact of COVID-19 on early literacy instruction. *Literacy Today*, 38(2),38-41, <u>http://viewer.zmags.com/publication/ac63aa7d#/ac63aa7d/1</u>

Parenteau, C. I., Bent, S. Hossain, B., Chen, Y., Widjaja, F., Breard, M. & Hendren, R.L. (2020). COVID-19 Related Challenges and Advice from Parents of Chidlren with Autism Spectrum Disorder. *SciMedicine Journal*, 2(0), 73-82. <u>https://doi.org/10.28991/SciMedJ-2020-02-SI-6</u>

- Parvathi, G. (2020). Arts based therapeutic intervention on an adolescent living in autism spectrum. *Indian Journal of Health & Wellbeing*, *11*(4-6), 265.
- Patel, J.A., Badiani, A.A., Nielsen, F.B.H., Unadkat, V., Patel, B. Courtney, & Hallas, L. (2020).
 COVID-19 and autism: Uncertainty, distress and feeling forgotten. *Public Health in Practice*, 1
- Sani-bozkurt, S., Bozkuş-genç, G., & Yıldız, G. (2021). Reflections of COVID-19
 Pandemic on Autism Spectrum Disorder: A Descriptive Case Study. *Eğitimde Nitel Araştırmalar Dergisi*, 9(1), 28-50. Retrieved from https://dergipark.org.tr/en/pub/enad/issue/60131/871191
- Sheposh, R. (2021). Coronavirus Disease 2019 (COVID-19). Salem Press Encyclopedia of Health.
- Surkhali, B. & Garbuja, C.K. (2020). Virtual Learning during COVID-19 Pandemic: Pros and Cons. Journal of Lumbini Medical College, 8(1), 1-2, https://doi.org/10.22502/jlmc.v8il.345

Yarımkaya, E & Esentürk, O.K., (2020) Promoting physical activity for children with autism spectrum disorders during Coronavirus outbreak: benefits, strategies, and examples, *International Journal of Developmental Disabilities*,

DOI: <u>10.1080/20473869.2020.1756115</u>