

The Importance of Play for Children With Autism, Cerebral Palsy, and Intellectual Disability

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Abstract: Play is a normal expression in children, which can be influenced by ethnicity, language, religion or other cultural aspects. Play has an exceptional meaning for optimal child development. Its importance is recognized as a fundamental child right. In the developmental process of social skills two dimensions have a crucial role in the game: symbolic and social. Not only is it central, but it is crucial for a child's development, the intense motor and sensory stimulation that results from play helps normal brain development and prevents neuronal loss. On the other hand, the game is not only important for promoting normal child development, it also has invaluable therapeutic power. Play is one of the most beautiful children activity, and it has an invaluable role in their mental, physical, aesthetic, emotional and ethical development, as well as in the development of their identity. Play is also one of the ways to independence, and therefore has a unique place in the life of every child. It is a natural process in which natural conditions allow the child to react easily and show his emotions, moods and desires. That way, the child is equal with other children and can cooperate with them.

The main goal of the study was to determine the frequency and type of play activities preferred by children with disabilities, as well as to emphasize the therapeutic power of play. The method of comparative and descriptive analysis and the method of generalization were applied. From the technique's analysis of the contemporary literature and a scale for assessment of play activities were applied. The sample consisted of 32 children with developmental disabilities aged 7-12 years.

The obtained results emphasized the importance of using play therapy in children with disabilities, given that in 72% of respondents, the most common activity is watching TV or using a computer.

Keywords: Play, Play Therapy, Children With Disabilities, Sensory Motor Stimulation.

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INTRODUCTION

The first appearance of the game was recorded in the first historical records of mankind, changing its structure and setting depending on the development of social culture, poetry, music, dance, philosophy and social structures (Drewes, 2006). The importance of play for child development was emphasized by the United Nations (1989) in the Convention on the Rights of the Child, explaining that play is the most appropriate and powerful developmental medium for building a strong and healthy child-adult relationship, for developing causal thinking and control. of impulsivity, for overcoming stressful situations and learning social skills. The game not only contributes to the child's development, allowing him to learn, participate in various activities and develop new abilities, the game is also an indicator of the child's progress and development. As the child grows and develops, so does his play. The effects of the game on the development of the child positively affects the physical development and mental functions of the child. It leads to the emergence of repressed emotional energy, needs and desires in the child. The child learns social rules, moral standards, appropriate gender roles through play. The learning of the child is facilitated by play and the child's creativity develops and increases (Ulutařdemir, 2007). Children's play is essential for their physical and health development. The game satisfies the needs for movement, develops sensory organs, and more psycho-physical structures. A child with a disability is a very active observer of his environment, and other children and adults are the easiest to imitate in the game. The child not only imitates other children while speaking, drawing, writing, etc., but also discovers his relationship and attitude towards what surrounds him, gets to know relationships among peers, builds his relationship with the world, through play is most easily motivated for activities or child is socialized and humanized because the game corresponds to the child's overall psycho-physiological characteristics, and his biological, psychological and social needs (Hatibovic et al., 2008). When choosing a game, one must keep in mind the educational impact, and it must start from the developmental possibilities of the child, acquired experience, and motivation for play that is closely related to the emotional state of the child (Kelava, 2019). The character and content of the game depend on the age of the child, the conditions in which the game takes place, the influence of the environment in which the child lives, the influence of conscious action and the type of material. Children with special needs are a special challenge when it comes to play and play activities, especially emphasizing the creation of a suitable environment for play, above all safe, the choice of toys, adaptation of special devices and assistive technology. There is no precise research that reveals details about play in children with different types and degrees of developmental disabilities. The analysis of the contemporary literature points out that play in children with disabilities is significantly different from play in their peers, the repertoire is limited, and the frequency is reduced (Li, 1981; Kaplan & Kopp, 1988). Looking at different types of disability it can be noticed that in children with physical disabilities the game is mostly solitary, static and short-lived (Jennings, Connors, Stegman, Sankaranarayan & Medolsohn, 1985; Bergen, 1991), in children with

cerebral palsy and other types of severe physical disability shows a delayed onset of role-playing games and imaginary games (Martin, 2014). Children with intellectual disability often play games for children younger than themselves. Because their intelligence age, needs and interests show that age characteristic. (Vural Kayaalp, 2000). Florey (1971) observing children with combined disabilities noted that their play activities are passive, in a sitting position, with limited availability of materials and reduced to small motor activities (Mistrett, Lane, Goets, 2000). For the children with intellectual disability, the game is monotonous, without creativity, they prefer games without rules, role-playing games are scarce (Ajdinski, 2007). Children with autism enjoy the game, but in line with their characteristics, the game is too limited by the inflexible use of a small and limited number of toys and they realize it in a repetitive way. The involvement of social and communication skills requires individual play in most cases with resistance to the participation of others in the game (Lash, McCoy, 2010). With visual impairment, children face problems and difficulties in observing and copying the model, so there is a lack of information and knowledge about how to play with appropriate objects or role-playing games, poor symbolic games. Also, limited mobility in these children causes longer persistence of the research phase (Aslan, 2015). In addition to limitations as a result of the clinical picture and abilities of children with disabilities, social deprivation occurs as a result of the attitude and attitude of parents. Their role as a partner in the game has been replaced by that of a caregiver, medical observer, or coordinator; spontaneous parent-child interaction is inhibited by parental anxiety about the medical condition and deterioration of the clinical picture (Mistrett, Lane, Goets, 2000). Although toys have the potential to create a strong and positive impact on social and cognitive development, they can sometimes create frustration in children, especially when they do not know how to deal with them and instead of being facilitators of the learning process, they can make it difficult. Lack of interaction with toys and peers, as well as the effort to create control over the physical and social environment, can create a negative impact on further development (Bradley, 1985). Playing is an anthropological need by which a child satisfies the need for activity, expression of emotions and fulfillment of certain social roles. Despite the fact that children with disabilities are in a much more unfavorable position than their peers in typical realization of their needs, children's play is an area in which it is possible to realize compensatory programs and encourage development as a whole. With children with disabilities in preschool age, it is necessary to perform all independent, directed and combined activities through games in which they are maximally engaged, and their senses are active in perception, which should be organized and verbalized. It is necessary to encourage children with developmental disabilities to get involved in the most diverse forms of stimulating games: research, energy, skills development games, social games, imaginative games, problem game (Maksimovic, Jablan, 2007).

Types of play suitable for children with special educational needs

Interesting and well-organized games and interesting toys are an important part of educating and raising children. As such, the game:

- is a means of organized learning (playing expands, improves and strengthens children's knowledge);
- contributes to team creation and teamwork development;
- promotes the development of individual characteristics and creativity of children;
- helps to solve basic problems in communication with others, acquiring new skills, knowledge and forming opinions about various things;
- nurtures friendship, care for others, self-control and respect for the opinions of others;
- contribute to the physical development of the child (Randic, Sataric, 2011).

By enriching games with episodes from real life, the child experiences real life and forms his attitude towards the surrounding world. Real-world perceptions are reinforced, clarified, and happen again in the game. Games can always be adapted to the equal participation of children with disabilities, which will contribute to their integration into the community and the creation of a climate of mutual tolerance and solidarity (Budiman et al., 2020).

Role games: These are games in which children develop and express their ambitions, desires, creativity, impressions, opinions and attitudes and are mostly creative by nature. Through the game, children imitate the actions of people who are in their environment (the mother feeds the child, the nurse arranges the patient's room, the driver drives the cars). The game uses various toys (objects), which makes children happy, and their use also contributes to the improvement of their overall development. They help the child to present reality correctly, as well as to create imaginary characters and take on their roles. For example, a girl playing with a doll plays the role of a mother. She cares her, loves her, feeds her, protects her ..., as a real mother would do (Dadson et al., 2020).

Didactic play. Didactic plays are widely used as a method in special education. These activities acquire different knowledge and skills. In addition, they are used to correct misunderstood knowledge, as well as to improve and organize it. Unlike creative role-playing games, in which the content and flow are determined by the players themselves, didactic games are completely prepared for children with special educational needs. They have a task, action, rules and result (conclusion of the play). Task solving requires mental effort and commitment of children, through which they: think, practice memory and perceptual abilities, develop imagination, attention, establish good relationships with other children, become more active, improve hearing and speech functions, develop discipline and self-awareness, acquire the ability to classify subjects ... It is important to remember that the purpose

(task) of a didactic game must correspond to the characteristics and abilities of every child (Ikhtiyorovna, 2020). When there are children in the group with developmental disabilities, with different knowledge and mental abilities, as children who do not have the skills to follow the tasks and rules of the game, it is necessary to especially encourage their participation and adjust their tasks. This is important because it provides an opportunity for each child to be active, achieve results and develop their skills and knowledge. Although children learn a lot in these games, they should not lose the feeling of playing at the same time (Smogorzewska et al., 2019).

Action play. Action plays satisfy children's needs for physical activity. They develop physical skills and abilities. According to the content, action games are divided into games with scenarios and those without scenarios. Games without a script are similar to sports games. In them, children simply perform different types of movements and improve their speed, flexibility, ... Scenario games are organized on different topics from life and in them, children, in addition to performing various movements, get roles through which they further improve their knowledge and skills. Action games generally encourage children to compete and through them they are encouraged to achieve their goals (Ku et al., 2020). Some of the features of these games are as follows:

- The action game includes all forms of movement (running, jumping, walking, climbing, throwing and crawling).
- Different movements not only make the game more interesting, but also prevent fatigue in children.
- Children participate together in action play, respecting the rules of the game that are mandatory for all. All this teaches them good behavior, because during these games, they strengthen self-control, develop an awareness that they need to help their friend, learn to overcome difficulties and change the types of movements according to the rules of the game (Schneider et al., 2020).

These games help develop children's imagination, attention, observation skills, memory and create positive emotions. Through them, the child's nervous system is strengthened and their ability to move is increased. During the game, children talk and can recite songs, which contributes to the development of speech. In order for action games to best contribute to the physical development of children, they must be appropriate to their age, skills and physical ability (Krutsevych et al., 2020).

Play therapy. There are several types of play therapy, classified into three basic categories (Rasic-Canevska, 2016):

- directive or structured play therapy - the therapist has an active and leading role in the child's play, pointing out the structure, direction and way of interpreting the game. Some

of the popular forms of direct or directed play therapy are: cognitive-behavioral play therapy, liberation play, etc;

- indirect play therapy, with central placement of the child - the therapist has a supportive, not guiding role, the child has the opportunity to direct and lead himself, to choose a game that he prefers from the offered ones, to choose toys and materials for work;
- Family play therapy - the main feature of this category of play therapy is the support and stimulation of the parent-child relationship, which helps parents to develop skills for better connection with the child, perceiving and solving behavioral problems in their child. Family play therapy can be aimed at adults or children.

Play therapy is applied as an optional type of intervention in the treatment of children, but also adults in mental health institutions, schools and preschool institutions, day care centers, hospitals and etc. Research shows that play therapy helps children become more responsible for their behavior and develop more successful strategies; to develop new, creative solutions to problem situations; to increase self-confidence and acceptance of oneself and others; to learn to experience emotions and to express them; to learn about empathy and respect; to develop new sensorimotor ability; to improve cognitive abilities (Reddy, Files-Hall, & Schaefer, 2005).

With specially selected toys, games and materials, through therapeutic and natural stimulation, the child can discover his subconscious conflicts, through the mediated defense mechanisms of the person such as: projection, substitution and symbolization (Klein, 1955). Play can help children relive stressful and traumatic experiences, while developing feelings of power and control over them. Through repetitive stressful activities, mental tolerance in children is increased and bad thoughts and feelings are overcome. Children show a natural tendency to face external events and trauma through play (example: after watching horror scenes, many children in the game build towers of cubes and shoot down planes in them). Post-traumatic play is most effectively used to induce internal changes in the personality of the traumatized child (Terr, 1990). Children's anxiety as a result of stressful life situations, such as moving the family, starting school, giving birth to a sibling or visiting a doctor, can be alleviated through symbolic play at similar events, such as preparing the child. (Wohl & Hightower, 2001). Of particular importance for children with special needs is the creation of a strong and healthy relationship with parents. Play is a basic medium for establishing a positive emotional connection between the child and the parents. The step-by-step sessions instructed by the therapist are used to create positive experiences between the child and the parents directly through joint involvement in different types of games. After the sessions, there is a better empathy in the parents, positive changes in the family environment, better perception of the problems faced by the child, the possibility of his adjustment and self-image in the child, etc. (Van Fleet & Guerney, 2003).

METHODOLOGY

The importance of playing for the overall development of the child as a bio-psycho-social creature led us to conduct research that will determine what types of play activities children with different types of developmental disabilities prefer, but also how often they engage in play activities. A suitable sample was used with 32 respondents aged 7 to 12 years, of which 7 with cerebral palsy, 14 with autism and 11 with mild and moderate intellectual disability. The sample was selected according to students age and functional assessment listed in students' file. This research was conducted in April, 2020 in four special institutions in North Macedonia. The methods of comparative and descriptive analysis were used, as well as the method of generalization, and for data collection, an evaluation scale with an offered inventory of 14 activities was applied. The data were processed using descriptive statistics.

RESULTS

The respondents were obliged to answer which of the 14 offered activities they most want to realize in their free time, and to state the frequency for each of them.

Table 1. Types of preferred activities

Type of activity	Are you doing this activity?		Do you like this activity?		How often do you do this activity?		
	Yes	No	A lot	A little	Very often	Often	Rarely
Card game	31.25 %	68.75%	60%	40%	20%	40%	40%
Visit to the park	81.25%	18.75%	80.77%	19.23%	42.30%	53.84%	7.69%
Picture book review	59.38%	40.62%	47.37%	52.63%	42.10%	36.84%	15.79%
Playing with a ball	56.25%	43.75%	66.67%	33.33%	50%	50%	/
Watching TV	100%	0%	81.25%	18.75%	81.25%	18.45%	0.03%
Listening to music	96.86%	3.21%	75%	25%	80.64%	6.45%	12.90%
Pet care	28.12%	71.86%	44.44%	55.56%	11.11%	55.55%	33.33%
Singing	43.75%	56.25%	64.29%	35.71%	50%	28.57%	21.43%
Playing with blocks	65.62%	34.36%	61.90%	38.09%	42.86%	38.10%	19.05%
Drawing and coloring	56.25%	43.75%	38.90%	61.10%	22.22%	38.89%	44.44%
Role-playing games (cooking, etc.)	9.36%	90.62%	/	100%	/	/	100%
Playing with plasticine	56.25%	40.63%	55.55%	44.44%	38.89%	33.33%	33.33%
Going out with friends	46.86%	53.13%	53.33%	46.66%	46.67%	40%	13.13%
Computer use	81.25%	18.75%	84.61%	15.38%	61.53%	30.77%	7.70%

From the offered activities in Table 1 it can be noticed that the majority of the respondents 81.25% state that the most common activity is watching TV, 80.64% state that they listen to music, and 61.53% state that they use a computer. Regarding the offered games, most of the received answers refer to ball games, in 50% of the respondents, in 42.86% the cubes are often used in constructive games, 42.10% in their free time look at picture books, and 38.89% prefer games with plasticine and modeling. The smallest number of respondents indicated role play.

Table 2. Frequency of card games

Activity:	Diagnose:	Are you doing this activity?		Do you like this activity?			How often do you do this activity?		
		Yes	No	A lot	A little	Very often	Often	Rarely	
1.Card Games	Cerebral Palsy	1	6	1	0	1	0	0	
	Autism	2	12	1	1	0	0	2	
	Intellectual Disability	7	4	5	2	2	2	3	

$\chi^2 = 8.1832$; $p = 0.016712$; $p < 0.05$.

If the answers regarding the type of disability are considered, the presence of a statistically significant difference for certain types of activities in terms of the frequency of occurrence can be noticed by applying the quadratic test for contingency tables. The card game is mostly played by the respondents with intellectual disability (Table 2), which is due to the characteristics of the respondents, ie mobile disability and solitaire games in people with physical disabilities and impaired communication and interaction skills in people with autism.

Table 3. Frequency of ball games

Activity:	Diagnose:	Are you doing this activity?		Do you like this activity?		How often do you do this activity?		
		Yes	No	A lot	A little	Very often	Often	Rarely
1.Ball Games	Cerebral Palsy	4	3	3	1	2	2	0
	Autism	4	10	2	2	1	0	3
	Intellectual Disability	11	0	10	1	8	3	0

$\chi^2 = 13.048$; $p = 0.001468$; $p < 0.05$.

Ball games are found in all categories, with those with intellectual disabilities most often using it, and people with autism playing it, but rarely (Table 3).

Table 4. Frequency of games with blocks

Activity:	Diagnose:	Are you doing this activity?		Do you like this activity?			How often do you do this activity?		
		Yes	No	A lot	A little	I don't like it	Very often	Often	Rarely
1. Games with blocks	Cerebral Palsy	4	3	2	2	0	1	3	0
	Autism	5	9	4	1	0	1	4	0
	Intellectual Disability	11	0	6	3	2	4	4	3

$\chi^2 = 10.9714$; $p = 0.004146$; $p < 0.05$.

Most people with cerebral palsy and autism do not like games with blocks, but those who do, play it often. Of the respondents with intellectual disability, everyone plays it, but the number of those who want to play it and those who do not have the desire for it is almost equal (Table 4).

Related researches

Besio and Carnechecci (2014) in their study pointed out that in children with disabilities, depending on the type of functional limitation, spontaneity and play activity become problematic.

They noticed that children with cognitive and intellectual disabilities find it difficult to cooperate with peers during the game, so they play more often alone, they like repeating the same activities, and they lack symbolic play.

Hestenes and Carroll (2000) made a comparison between the choice of activities and the type of the game, noting that there is no difference between peers with and without disabilities in terms of choice of play activity, but there is a difference in the form of play, children with disabilities more choose independent play without cooperation and interaction with others.

Thomas (2011) studied the effect of using play therapy in 3072 respondents with emotional, behavioral and mental health problems, where 74% of respondents with milder problems showed improvement, while as many as 83% of respondents with more severe forms of problems showed positive effects from the play therapy implementation.

Developmental limitations in expressive and receptive language skills, limited vocabulary, and limited abstract thinking make it difficult for children to communicate effectively. One of the greatest powers of the game, described in the literature is its communicative power. In the game children are able to better express their conscious thoughts and feelings, than expression through words, they feel free in the application of specific play activities and materials. The use of symbolic representation and expression through various dolls allows emotional distancing from emotional experiences, thoughts and feelings. Through indirect expression in play, the child can develop awareness of problematic influences and memories and begin a healing process (Schaefer, 1999).

DISCUSSION

The results from this research show that children with disabilities have reduced play activities. Most of the respondents preferred watching TV and computer use. With the increasing use of modern technologies in the daily life of both adults and children, elementary games that are an inseparable part of children's lives are being neglected. At the same time, the focus is always on the overall development of the child and a holistic approach to his development. Although the sample is small and convenient, and based on that the results cannot be generalized, they still support the research so far, emphasizing the need to organize play therapy in children with disabilities in order to provide stimulating environment for optimal development of remaining abilities. Play is an integral part of every child's development. The development of mental and physical characteristics, mental and creative abilities, the adjustment of the rules of life in society, are realized through play. Every game implies a certain physical and mental effort. On the one hand, it enables the liberation of the child from adult dependence, and on the other hand, through play, it is possible for each child to realize his / her identity, to determine his / her social status among peers. The feeling of pleasantness, the natural environment and the ability to create, to master the basic concepts and activities, leads to the fact that playing for children with special educational needs is a basic method of learning.

CONCLUSION

It is essential to discover methods that would enable increased participation in the play activities of children with disabilities. Creating a safe and stimulating environment where the child can play without interruption, getting to know themselves and the world is a challenge for parents, teachers, therapists and all profiles involved in the treatment and rehabilitation of children with special needs. All children must have time to play, a time in which they will feel free and beyond the boundaries of the world around them, which can sometimes be stressful. It is through such experiences and interactions that children become confident, independent, able to use their imagination, control their bodies, and develop their intellectual, social, and emotional abilities.

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