



INCLUVISION

Empathize Educate Empower
Vol 1. Issue 2 June - Aug 2018

SYNERGY
2018

**EARLY
INTERVENTION:
THE FIRST MILESTONE OF
SEND EDUCATION**

JESS:
A Role Model



Creative, Versatile & Determined
JIFU BUNNIK

Winner of Determined Ones Logo Competition

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Learning in a world of differences 2018



JSS Private School, Dubai, celebrates Determined Ones' spirit through a day wide event Synergy.



Creative Versatile & Determined

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Winner of Determined Ones Logo Competition

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Let's meet Krishna and Ashu two amazing Determined Ones. Also featuring some of the brilliant art works of unappreciated geniuses of our Determined Ones across UAE.

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ABA intervention is proven successful in:

- Developing language and communication skills
- Social skills
- Functional living skills
- Adaptive and self-care skills
- Coping and tolerance skills
- Play and leisure skills
- Attention skills
- Pre-academic skills
- Vocational skills
- Behavior management

- Applied Behavior Analysis (ABA) is a structured teaching program built on a discipline devoted to the understanding and improvement of human behavior.
- ABA is the applied use of behavioral principles to everyday situations with the goal of either increasing or decreasing targeted behaviors and has demonstrated to greatly improve the prospects of children of determination.
- ABA includes the use of direct observation, measurement and functional analysis of the relations between environment and behavior at school and at home as well.

ABA Services:

- Under direct supervision of our Board Certified Behavior Analysts.
- All professionals certified by the Behavior Analyst Certification Board, USA.
- Implemented by highly qualified and trained Registered Behavior Technicians (RBTs).
- Program planned to cater individual needs.

ABA Caters to:

- Development Delays
- Autism Spectrum Disorders
- ADHD



A Glimmer of Hope

It just happened one day when Karan Bathija, our cover boy of the maiden issue visited us @JSS Private School. It was very pleasing to interact with him and get to know more about him, his family etc. He had come to thank us for featuring him on the cover page of our magazine. While dropping him back to the nearest metro station, Business Bay, I could see something strange in his eyes. It seemed to me that they were saying, "Thank you for giving me hope, thank you for giving me a reason to believe that I am valuable". Whether we have given him those reasons or not, I am pretty sure of one thing, he has given us a very strong reason to further resolve our purpose to serve the determined ones. I do hope that by acknowledging the efforts of these determined ones, through our humble platform, we can move along the great journey of inclusion. Let's keep trying to bring that glimmer of hope in the eyes of all our determined ones.

The theme for this issue is "Early Intervention: The First Milestone of Send Education". You will get to see an all round perspective on various aspects of early intervention from Ms. Simi Anwar and Reena Thomas. Dr. Sweta has delved into the nuances of womb stage of pregnancy thereby giving us a fitting start about the early intervention. How early and when should you be cautious about the development of your child is deliberated by Ms. Rupali Ranjith in her article "Why so Early?" We also have Ms. Anju's article on "AUTISM: Identifying treatment priorities". Arwa Kabir shows us how drama can be taken as a therapy in building social skills. You will get to know some key ideas about Occupational Therapy from Ms. Hanshini Boolaky.

In our "In Focus" section, we cover Synergy 2018, a day wide event where JSS Private School, celebrated Determined Ones' spirit. Synergy also witnessed the unveiling of Inclusion through the hands of Fatma Belrehif, Executive Director, DSIB. The cover of this issue features Jiffu Bunnik from Tender Hearts Arena, Dubai who became the proud winner of the Determined Ones' Logo Competition @Synergy 2018. Her logo truly reflects the voice of determined ones. It shows how a tender heart can help to blossom the precious seed of a determined one into a flourishing tree.

Parents' Vista has a story from Ms. Meera Ramani. We are introducing a new series from this issue called "Show Us the Way" which gives an in depth analysis of ways and means through which the school/institution has become a role model for Inclusive Education in Dubai. We are featuring JESS, Dubai in this section. You will get to know two amazing determined ones-Krishna and Ashu in our "We Shine" section. Our regular feature has all the usual exciting articles. This time we have got Asha Susan Mani, Autism and behavioral consultant, to answer our readers' queries on early intervention. We do hope that there is something for everyone in the pages to follow. As always we do look forward to your valuable feedback to help us further improve.

Ramadan Kareem and Eid Mubarak. Have a fulfilling summer break. See you in September.

Womb Magic: How to grow grey cells of your baby while in womb?

Dr. Sveta Adatia, a specialist neurologist takes us into the mystical world of a mother's womb to enlighten us about various aspects of pregnancy and thereby equipping us with vital ways of informed pregnancy.

I strongly believe that pregnancy should be by choice and not by chance...so it should be carefully planned and managed in such a way that we have complete control during the development phase of fetus. All of us want our children to grow up to their best and believe me the preparation should and must start from the womb.

While nothing that you do can guarantee that you'll be dropping him off at Stanford or Harvard in 18 years, research has indicated that the choices you make while pregnant will affect the type of child that you have. A baby's brain grows at an enormous rate, and he is aware of what's going on outside the womb. "What you do while you're pregnant can have as much impact on your child's brain development and future intelligence as what you do after you give birth," as quoted by Diane Ashton, M.D., M.P.H

Babies eagerly investigate whatever they can get their hands on—and the fun starts before birth. As early as 20 weeks, fetuses react to what's around them. (Ultrasounds have shown that some try to grasp the amniocentesis needle when it's inserted into the uterus.) But it isn't until the third trimester that they really begin to grow curious about their intrauterine world. Though there isn't a whole lot in there to play with, fetuses entertain themselves by sucking on their hands and fingers (especially their thumb, which they discover at about 18 weeks). They also 'walk' around by pushing on the uterine walls with their feet, and yank, pull, and swing their umbilical cord—they even practice breathing.

All this playing around helps them develop important reflexes they'll need once they're born. Sucking will not only be crucial to taking in food but will also be a source of comfort. And feeling things with their mouth is an important way for babies to explore things. Filling their lungs and moving the diaphragm up and down—albeit with fluid instead of oxygen—is also good practice; by the time the baby makes his entrance into the world, he will have learned to breathe on his own.

All this goes to show that a baby isn't just passively waiting



to be born while in the womb. He's already building important skills and developing a strong bond with one of the most important people in his life—his mother. Research suggests that about halfway through the pregnancy, baby can hear and respond to sounds. The mother or anyone can talk, sing, or read to the baby. Some studies have shown that babies seem to calm to a song, a book, or a voice and may recognize rhythms that they heard in utero.

The uterus isn't exactly the quietest place to hang out. Not only can a baby hear the sounds of his mom's body—her stomach growling, her heart beating, the occasional hiccup or burp—but he can also hear noises from beyond. If mom sits in a movie theater with state-of-the-art sound or walks by a noisy construction site, odds are the fetus will react to the entire ruckus by kicking or shifting around. Of course, not all sounds are the same. Perhaps the most significant



one a baby hears in utero is his mother's voice. Around the seventh and eighth month, a fetus's heart rate slows down slightly whenever his mother is speaking, indicating that mom's voice has a calming effect.

Interestingly, there is no evidence that newborns show a similar preference for their father's or siblings' voices, or for any other voices they may have heard frequently while in the uterus. Research reveals that babies had their first lessons in their native language while still in utero. They'll suck more vigorously to turn on tape recordings of people speaking in the language of their mothers, rather than in a foreign tongue. Of course, it's likely the babies are picking up on the rhythm and melody of the speech, rather than individual words.

By the time they're born, babies can actually recognize their mother's voice. In one study, doctors gave day-old infants pacifiers that were connected to tape recorders. Depending on the babies' sucking patterns, the pacifiers either turned on a tape of their mother's voice or that of an unfamiliar woman's voice. The amazing result: Within 10 to 20 minutes,



the babies learned to adjust their sucking rate on the pacifier to turn on their own mother's voice. This not only points out a newborn's innate love for his mother's voice but also a baby's unique ability to learn quickly.

It is now becoming clear that environmental effects on fetal development are important with respect to emotional, behavioral and cognitive outcomes too. Animal studies have shown that stress during pregnancy can have long lasting effects on the neurodevelopment of the offspring. Maternal stress during pregnancy increases the risk of the child having a range of altered neurodevelopmental outcomes. The stress can be of different types, and at least for some outcomes, there seems to be a linear dose response effect. Not all children are affected, and those that are, are affected in different ways. The gestational age of vulnerability probably differs for different outcomes. In a stressful environment it may have been adaptive for our ancestors to have children who were more vigilant (anxious) or with readily distracted attention (ADHD), and possibly with more rapid motor development.

Taste buds develop in a fetus around the seventh or eighth week and, by week 14; there is some evidence to suggest he can taste bitter, sweet, or sour flavors in the amniotic fluid. A pregnant woman really is eating for two, and the quality of what she eats matters as much as the quantity. As with his other senses, the baby uses taste to explore the womb around him. Ultrasounds have even shown that fetuses lick the placenta and uterine wall. Studies indicate that the flavors and aromas of the foods a mother eats during pregnancy, which pass through to her amniotic fluid, may affect her baby's taste preferences long after birth. Studies have also found that breast fed babies are more willing than those who were formula-fed to consume a new food when they get older.

Taking a prenatal supplement, one with the B vitamin folic acid, is essential for the mother. Folic acid has long been known to play a key role in the formation of healthy brain cells, and a recent study published in the Journal of the

American Medical Association found that women who took folic acid early – from four weeks prior to conception through eight weeks into pregnancy – had a 40 percent lower risk of giving birth to a child with autism. Foods such as wild salmon and other fatty fish, walnuts, ground flaxseed, and eggs fortified with omega-3s. Iron helps promote the growth of healthy red blood cells, which carry oxygen to your baby's brain. Red meat is the best source, but it is also found in plant foods such as beans, spinach, and tofu, as well as iron-enhanced cereals. Pregnant women should not smoke or drink alcohol. She should manage serious illnesses such as diabetes, as well as stress.

A message to society:

If we want the best outcomes for our children we need to provide the best possible emotional care for pregnant women. At present most anxiety and depression in pregnant women is undetected and untreated. We need to make sure that pregnant women are sensitively questioned when they first come into contact with health professionals about their emotional history and current state. It is important to note that it is not just diagnosable disorders that can affect fetal development, but a range of symptoms of stress, anxiety and depression, including a poor relationship with the partner. Appropriate personalized help should be instituted for each woman. This has the potential to prevent a range of neurodevelopmental problems arising in a clinically-significant proportion of children.

A message to all mothers:

Every time you wish your pregnancy were over, remember that your smart, healthy baby is worth the wait. And the smartness is all in your reach and care while you are pregnant.



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EARLY INTERVENTION: THE FIRST MILESTONE OF SEND EDUCATION

Two leading experts delve deeper into the nuances of early intervention to give us insightful information about the importance of early intervention.

Two leading experts delve deeper into the nuances of early intervention to give us insightful information about the importance of early intervention.

Over the last decade, the field of Early Intervention/Early childhood special education has emerged as a primary service for infants and pre-school children with disabilities. The families of these kids are facing multiple challenges in coping with them on a day to day basis. Drawn from a range of psychological and educational theories, early intervention with a strong evidence based set of practices is gaining wide acceptance. Educational departments along with the support of the governments of respective countries are encouraging and providing assistance to schools to practice a unified theory which was formed after years of research and studies from concerned professionals of this field.

A systems perspective is put forth, designed to place the many diverse conceptual/practical approaches and accomplishments in the early intervention field within a common framework. Complex reciprocal patterns of influence are described emphasizing risk and

protective factors operating at three levels- a child's social and cognitive competence, family patterns of interaction and family resources.

Early intervention refers to the services designed to identify and treat a disability or developmental delay before the child attains three years of age. Common early interventions are speech therapy, occupational therapy and behavior therapy. Early intervention specialists talk to the family about the activities, games and exercises they can do to assist their child and discuss the family needs. Furthermore, they decide how much time is needed for each child for specific activities or intervention activities during the course of a week. Once the child turns three, their respective schools with the support of the government bodies do similar services. These services then no longer fall under the title of early intervention, they are now called special education. Individualized Education plan is made for each child after the required social, psychological and educational assessments, along with the required therapies, which the child has to continue until the attainment of skills to his intellectual and physical abilities. These children need to be educated together with typical children,

which can be referred as inclusion, integration or mainstreaming and the placement into settings designed for their non-disabled peers is an important goal. It is a goal in which all children are valued and individual differences are accepted.

Why are early interventions so important especially with children of special needs? Early childhood lays the foundation for overall development of a child for the future years. Scientific studies show that early experiences literally shape our lives and the development of brain consecutively. So it is important for each and every child to have a pleasant and positive childhood for their overall development as a good human being. These years are equally important for a child with developmental delay as they are for a normal kid. All their future development is based on the critical learning patterns they acquire during this period. According to research, learning and development are at their highest in the preschool years. Hence it is very important for us to observe and identify each and every milestone of our kids so that if you notice any developmental delay you can intervene at the right time. Perhaps, early childhood is the right time for intervening as a considerable amount of improvement and assistance can be given to them so they are self-sufficient in the later years.

Families of these kids, often face frustration, stress, disappointment and helplessness due to their conditions. Early intervention and further assistance will help them to deal with the kids and thus provide a nurturing and well-being atmosphere for the entire family and the development of the kid. Providing parents with tools to address symptoms at the earliest point in time is likely to give them self-confidence and



empowerment, thereby improving their own mental health along with their child's behavior. In short, including parents in early intervention treatment has significant benefits for both the child and the parents' well-being. Early intervention services also provide therapy/education, counseling, service planning/co-ordination, assistance and support to access services such as kindergarten and



childcare. Services are tailored to meet the individual needs of the child and focused on supporting the child in their natural environments and in their everyday experiences and activities.

Early intervention techniques to address core symptoms may prevent severe secondary symptoms and reduce the need for further intensive interventions later in life. For e.g., individuals with ASD often exhibit aggression, tantrums, and self-injury. These behaviors are secondary symptoms that develop when primary symptoms are not addressed. Almost all disruptive behaviors (secondary symptoms) exhibited by children with ASD have a communicative function and, thus, are often avoided, reduced, or eliminated, with early intervention focused on teaching functionally-equivalent replacement behaviors (FERBs). Similarly, co-morbid symptoms, such as depression and anxiety (common in adolescents and adults with ASD) are often directly related to difficulties with socialization, and recent research suggests that co-morbidity may be reduced if the core social area is treated. Early intervention leads to financial savings, as untreated symptoms become more abundant and severe later in life, requiring more costly interventions.

It seems unwise and damaging to delay intervention or adopt the “wait and see if any disorder develops” approach. Because of the heterogeneity in the conditions, a more intelligent and sensible approach would be to provide treatment for behavioral functioning rather than a diagnostic label. For example, if a child is not talking at 2 years of age and is uninterested in social interaction, it makes more sense to teach the parents some procedures to evoke first words in a social context rather than wait to see if the child is a “late talker” or will develop ASD. Similarly, if a child exhibits excessive tantrums, teaching appropriate replacement communicative utterances would be advisable. Even if there are some false positives, the risks of

not providing early intervention can be far more serious, and contrasts negatively with the positive effects of parent education and attention to specific symptoms at the earliest possible age.

The child’s response to intervention (RTI) has to be carefully documented to understand whether the intervention is effective for that child. RTI allows us to change, modify, discontinue, or continue a particular intervention. If a child is responding to intervention, an appropriate modification may result in the ability of a child to be indistinguishable from his or her peers. Most parents and professionals have the goal of alleviating symptoms that could negatively affect the child’s ability to engage in leisure activities and gain employment. Early intervention increases the likelihood of improved long-term outcomes. The potential positive outcome of early detection and intervention is not something that should be denied to any child or family, and will ultimately have a positive impact on society. It takes sheer commitment, training and understanding from the designated professionals, peers, families and from the people associated with it to maximize the growth of these children and to foster them to merge with the mainstream society.



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Why So Early????

If you want to have clarity on what are the signals of delayed development, when should you become cautious and when should you act, read on...

“**T**hough anyone says my child is late ...It is ok!!!!two or three years of delayed development does not matter as I was a late talker and now I am 35 years old”.....This is what we commonly hear.....So, let's see what and how it matters for a child's development and current needs?? As you know the initial few years of a child's development are quite crucial not only for physical growth but for overall development. How do we realize whether our growing child is developing age appropriately or not? The most common answer is by "Comparing". Here, this comparison is either done with older siblings or with neighborhood kids. The human brain develops more rapidly between birth and age five (nearly 95%) than during any other subsequent period. Are we providing the right input to his or her

growing needs? By the time we realize our child is delayed. The crucial early intervention time is already lost.

Yes, we have seen some near and dear ones and even professionals misguiding parents causing loss of early intervention period of the child. We keep thinking about solutions to make a child talk and we keep on getting advices thatIt is normal ... like Uncle /Auntie XXXXX has also started speaking at the age of 3 years. How right is it to compare your child to the person who developed in a totally different environment?

So, here is the checklist to help you understand speech and language growth expectations to the age? How to understand whether we are following right directions or not? Following are the milestones of Speech development which will help you in understanding speech and language growth of the child till age 5

7 MONTHS-1 YEAR

- Babbles long strings of sounds, like mimi upup babababa.
- Uses sounds and gestures to get and keep attention.
- Points to objects and shows them to others.
- Uses gestures like waving bye, reaching for "up," and shaking his head no.
- Imitates different speech sounds.
- Says 1 or 2 words, like hi, dog, dada, mama, or uh-oh. This will happen around his first birthday, but sounds may not be clear.

ONE YEAR-TWO YEAR

- Uses a lot of new words.
- Uses p, b, m, h, and w in words.
- Starts to name pictures in books.
- Asks questions, like "What's that?", "Who's that?", and "Where's kitty?"
- Puts 2 words together, like "more apple," "no bed," and "mommy book."

TWO YEARS- 3 YEARS

- Has a word for almost everything.
- Talks about things that are not in the room.
- Uses k, g, f, t, d, and n in words.
- Uses words like in, on, and under.
- Uses two- or three- words to talk about and ask for things.
- People who know your child can understand him. Asks "Why?"
- Puts 3 words together to talk about things. May repeat some words and sounds.

THREE-FOUR YEARS

- Answers simple who, what, and where questions.
- Says rhyming words, like hat-cat.
- Uses pronouns, like I, you, me, we, and they.
- Uses some plural words, like toys, birds, and buses.
- Most people understand what your child says.
- Asks when and how questions.
- Puts 4 words together. May make some mistakes, like "I goed to school."
- Talks about what happened during the day. Uses about 4 sentences at a time.



FIVE-SIX YEARS

- Says all speech sounds in words. May make mistakes on sounds that are harder to say, like *l, s, r, v, z, ch, sh, and th.*
- Responds to “What did you say?”
- Talks without repeating sounds or words most of the time.
- Names letters and numbers.
- Uses sentences that have more than 1 action word, like *jump, play, and get.* May make some mistakes, like “Zach got 2 video games, but I got one.”
- Tells a short story.
- Keeps a conversation going.
- Talks in different ways, depending on the listener and place. Your child may use short sentences with younger children. He may talk louder outside than inside.

These are the guidelines to check whether speech development is happening age appropriately or not. It is very crucial to understand when to seek professional help. So, here are some red flags to help you understand what delayed development is:

Red Flags

- No consistent response to surrounding sounds till 6 months of age.
- No eye contact by 6 months of age
- No social smile or meaningful expressions of joy by 6 months of age.
- No reciprocal social expressions with speaker by the age of 9 months.
- No babbling by 12 months

- Difficulty in expressing needs by pointing and social expression like waving bye by 12 months
- No consistent response to name call by 12 months
- No meaningful first word by 16 months
- Difficulty in following commands by 18 months
- No two-word meaningful phrases by 24 months
- No turn-taking in conversation by 30 months
- Any loss of speech or babbling or social skills (like eye contact) at any age.

Language is the base of communication. The ability to communicate needs and share thought, ideas to his/her peer group and teachers makes a significant difference to succeed in school. Children with problems in language development struggle with understanding, speaking, reading, writing and listening skills which affect the performance of the child in school.

Considering all these factors, one should be sensitive to the current needs and requirement and provide a stimulating environment for the child’s development. The later we take step, longer it takes to show an impact and it is less likely that they catch-up with their peers by the time they start school. It not only causes more financial hassles but negatively affects a child’s social emotional development with huge implications for the rest of their schooling, their jobs, and even their future relationships. By not providing right intervention in time we are stealing their opportunity to reach their highest potential. As a parent we should take responsibility to be sensitive to the current needs of a child and growth.



Rupali Ranjith
Audiologist/ Speech Therapist
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AUTISM: Identifying Treatment Priorities

The last few decades have witnessed a dramatic increase in the recorded prevalence of autism. This means that the need for a better understanding of autism and for evidence-based practice has never been greater. Let's look at what Ms. Anju, a certified behavior analyst has to offer us on this issue.

Autism spectrum disorders affect individuals in social communication and social interaction. Inclusion of children of determination, especially children under the autism spectrum disorders to mainstream education setting is often a big challenge for most of the parents. Early intervention programs ideally support appropriate integration of children in to the regular school and community setting. However, it is always found that after successful integration in to the schools, many children struggle to cope with the larger group, which thereby increases the requirement for additional support services such as learning support assistants and other accommodations. This often act as a barrier for effective inclusion of the children. Why many children even after receiving sufficient early intervention and treatment programs, are not able to cope up with the mainstream school.

Importance of Assessments

Early intervention programs often involve professionals from medicine, ABA therapists, speech and language pathologists, occupational therapists, special educators, psychologists, social workers, etc. The strengths and needs of each child is different. Regardless of what type of intervention the child undergoes, a proper assessment process is necessary for identifying a child's strengths and weaknesses across a wide range of skills, for any treatment program to be successful. The assessment results should guide the intervention by providing guidance in terms of what skills need to be focused on for the intervention and what are the priorities for intervention. An effective language and social skills assessment and intervention program is an essential component of an individual early intervention treatment program.

Treatment Priorities

The results of the assessment help to identify both a child's short-term and long-term intervention priorities. Following are some of the most important skills



that are essential to be targeted in an early intervention program based on individual needs.

Basic Language and Communication Skills

Language skills mainly consist of receptive language and expressive language. Receptive language or listener skills comprises the ability to understand the language which includes ability to follow instructions, perform the roles of a listener which is a primary focus of early intervention programs. Expressive language skills include labeling skills and requesting skills.

One of the most important skills to develop in terms of language and communication is requesting skills. Children with autism frequently display limited interest and ability to request for their wants and needs and they often do not readily develop these skills without specific teaching. Requesting skills are very important for early development of language and these skills play a very important role in social interactions, conversation, academic behavior, etc. The communication can be verbal, visual, PECS, or other augmentative communication systems, etc. which can be selected based on the person's abilities. If these skills are not developed appropriately, children will start to develop problem behaviors because they can't communicate their needs. Increasing the requesting skills

will benefit children with autism which often includes a reduction in maladaptive behavior, an increase in social interactions and spontaneous language.

Play Skills

Play is an important part of language and social development. Lack of varied, spontaneous play or imitative and imaginative play skills is one of the main indicators of autism which contributes to social isolation. Repetitive and stereotyped patterns of actions with toys is an indication of lack of understanding of how to play appropriately with the item or toy. Teaching children with autism to play with toys, and to play with peers is vital for their successful functioning in school setting. Early intervention should target to develop and expand appropriate play skills such as functional use of toys, increase social interactions while playing, expanding interest in a variety of toys, constructive play, engage in structured games, social play etc. One of the most important skills to develop in terms of language and communication is requesting skills. Children with autism frequently display limited interest and ability to request for their wants and needs and they often do not readily develop these skills without specific teaching. Requesting skills are very important for early development of language and these skills play a very important role in social interactions, conversation,

academic behavior, etc. The communication can be verbal, visual, PECS, or other augmentative communication systems, etc. which can be selected based on the person's abilities. If these skills are not developed appropriately, children will start to develop problem behaviors because they can't communicate their needs. Increasing the requesting skills will benefit children with autism which often includes a reduction in maladaptive behavior, an increase in social interactions and spontaneous language.

Play Skills

Play is an important part of language and social development. Lack of varied, spontaneous play or imitative and imaginative play skills is one of the main indicators of autism which contributes to social isolation. Repetitive and stereotyped patterns of actions with toys is an indication of lack of understanding of how to play appropriately with the item or toy. Teaching children with autism to play with toys, and to play with peers is vital for their successful functioning in school setting. Early intervention should target to develop and expand appropriate play skills such as functional use of toys, increase social interactions while playing, expanding interest in a variety of toys, constructive play, engage in structured games, social play etc.

Social Skills

A lack of spontaneous social ability is a feature of autism. Individuals with autism often show an inability to learn social skills that come much more naturally in typically developing children. One intervention which is crucial in early intervention is social skills training. Participation in the school and community can be enhanced through improvement in the social skills of children with autism. It isn't easy for children with autism spectrum disorder (ASD) to learn social skills. Strategies such as practicing play skills, role-plays, video modelling, visual prompts, social stories, etc. will help to improve social skills. Social skills training can help your child develop social skills in a structured way. Social skills groups offer an opportunity for individuals with autism to practice their social skills with others on a regular basis.

In addition to language, play and social skills, a variety of other skills that are essential to be addressed in an early intervention program are listed below.

- **Labeling Skills** (ability to label items, actions, emotions, describing objects, events)
- **Motor Skills** (fine motor, gross motor skills and imitation skills significantly influence academic performance. Enhancing these skills helps in increased task performance and task completion)
- **Visual Perceptual Skills** (includes matching and sorting skills, sequencing and patterns, etc. which helps the academic functioning)
- **Listener Skills** (language comprehension, compliance, following instructions, attending skills etc.)
- **Pre-academic Skills** such as reading, writing and math
- **Adaptive Living and Self - Care Skills** such as eating, grooming, toileting etc.

ABA & Autism Intervention

Applied behavior analysis treatment programs have shown high success rates in early intervention of autism and other developmental disabilities. Today, ABA is widely recognized and prescribed as a safe and effective treatment for autism. ABA is a scientific approach which utilizes its techniques and principles to bring about meaningful and positive change in behavior. ABA intervention program focuses on skill areas such as communication, play and leisure, motor development, academic skills, social skills, self-care, and independent living skills. Maladaptive behaviors, such as noncompliance, tantrums, and stereotype are also typically the focus of treatment. ABA procedures that are derived from the scientific principles are utilized systematically and effectively to treat individuals diagnosed with ASD. These procedures include reinforcement, differential reinforcement strategies, shaping, chaining, prompting and fading, behavioral skills training, extinction, functional communication training, discrete trial teaching, incidental teaching, generalization and maintenance procedures, and so on.



ABA programs should be designed and supervised by qualified professionals, Board Certified Behavior Analysts are qualified and trained professionals who design and directly oversee an ABA intervention program. The behavior analysts develop treatment goals based on a detailed assessment of each learner's skills and priorities. It is strongly recommended to verify the credentials of the ABA service provider before starting an ABA intervention program.



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Drama therapy

Early Building of Social Skills

Expressing....Connecting.....Socializing....

Arwa Kabir shows us how drama can be taken as a therapy in building social skills.

When Drama Tools are used as a Therapy for children with Special Needs it builds dynamic social abilities. This said, and agreed by all, the question is when do you provide this important intervention in your child's life? Empirical evidence from research studies and common sense tells us that social and emotional skills help an individual to better meet the challenges of day-to-day life. The importance of social competency in a child's life is that, it can have a strong influence in other areas of development as well.

During the early intervention years every parent is involved in various therapeutic approaches for their child to make sure no stone is left unturned. With awareness growing on, few social skills are drawn up as well. However, knowing and cataloguing social and dynamic skills and working on some of them during a session does not help in reaching those abilities....the reason here is that these skills are transactional, i.e. they involve others and they are dynamic, i.e. they keep changing with every set of scenarios and is interdependent on people involved in it. Helping a special child make interpretation of others behavior and situations would involve a lot of time and many people.

That brings us to the tools of Drama namely, masking, emotion recognition, imitating, rehearsing and role playing in a hypothetical scenario.

What is Social Cognition? Understanding or Thinking...which results in Acting in a certain manner. Hence, when you put a child in a scenario, which is either real or hypothetically created, he is expected to think and act. The process of understanding and acting in various scenarios helps them to get a hold on taking action by themselves. To reach this goal which is an important aspect of life we use Drama Tools.

Emotional Understanding is another area that is heavily targeted when using Drama Therapy. Emotions are so many.....they are mixed and they do not always mean what they seem to show, it gets complicated. So, when this is a part of intervention at an early age the adolescent that grows up will be socially more adaptable in the society and it makes future vocational training easier.



Arwa Kabir
Staff Coordinator
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Occupational Therapy

Occupational therapy practitioners enable people of all ages to live life to its fullest by helping them promote health, and prevent—or live better with—injury, illness, or disability. Let's know some key ideas about it from Ms. Hanshini Boolaky, the medical director of Pulse Centre.

When someone asks us what we do for a living and the answer is “Occupational Therapist”, about 75% of the time we get a blank stare. Explaining Occupational Therapy can be very tricky; people often confuse Occupational Therapy

with Physical Therapy.

Physical Therapists work primarily with people recovering from injuries. Physical Therapy’s main point of focus is on preventing injuries, and it can help people avoid surgery or a long-term reliance on medications. Occupational Therapy, on the other hand helps people to perform their day-to-day tasks, whether they are recovering from injuries or have any developmental or cognitive disabilities affecting their motor skills, sensory processing skills or behavior. Occupational Therapy is a health profession whose goal is to help people achieve independence, meaning, and satisfaction in all aspects of their lives. Occupational Therapists apply their specific knowledge to enable people to engage in activities of daily living that have personal meaning and value.

Who needs Occupational Therapy?

Occupational Therapy is for any person who needs to improve their cognitive, physical, sensory, and motor skills, in order to enhance their self-esteem and sense of accomplishment.

Occupational therapy (OT) treatment focuses on helping people with difficulties to be as independent as possible in all areas of their lives

How is an Occupational Therapist assessment completed?

Assessment can be completed using standardized & non-standardized testing materials. Clinical observations also form part of the assessment.

What is the difference between Occupational Therapy & Sensory Integration?

Occupational Therapy consists of various treatment approaches and intervention techniques, in order to help a child to develop or regain his skills, in different areas.

Sensory integration is one of the approaches & techniques used mostly by OTs. SI therapy aims to help kids with sensory processing issues by exposing them to sensory stimulation in a structured, repetitive way. Over time, the brain will adapt and allow the kids to process & react to modulation of sensations more efficiently.

How do you determine the right occupational therapy treatment plan for a child?

Occupational Therapist always carries out an assessment prior to designing a treatment plan, either by using standardized testing tools or through observation, depending on the situation. The results obtained are compared to the typical developmental profile and hence, we can determine the gap that the child has as compared to a typical child of his age. Our next step is designing the goals of the child according to the test results obtained, in order to bridge this gap and to make the child as independent as possible.

How does the occupational therapist team function at Pulse Center?

Occupational Therapy is very holistic - we treat the entire child and adapt the environment and/or task to fit the child. I work mainly with children on the spectrum, also children who have learning & attention issues. I work with the child to develop the skills required to achieve their goals, help to improve their gross motor and fine motor skills and enhance their motor coordination. Sometimes we need to have environmental adaptations, such as removing visual stimuli on the walls in the classroom or changing the position of the child in the classroom in order that the child feels more comfortable & is able to focus mainly on the main tasks. We regularly educate parents and caregivers about the child’s development & learning - via clinic meetings or workshops/ training.

How do you balance co-operation with others & independent thinking while you are dealing with children?

As a healthcare professional, working within a multidisciplinary team is of paramount importance. For the child to experience the maximum benefit from therapy, we have to ensure that all the professionals on the child’s case, work together. At Pulse Center, we conduct clinic meetings on a regular basis, for the team to be constantly updated with the different approaches that we are using in therapy and how we can implement the different techniques used by other professionals, in order to make our sessions more beneficial.



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COMMUNICATION - HOW TO KNOW

When enough is enough?

"Sheikh Zayed's legacy has made the UAE a centre of communication and social interaction."

Sheikha Fatima bint Mubarak

2018 being the Year of Zayed, the KHDA is prioritizing his legacy and communication is one of these key areas. With the lightning speed of technological developments in the media sphere, communication is becoming an ever pervasive part of our daily lives- we are persistently bombarded with notifications from social media, merchants, news channels, work and personal contacts. So it's pertinent to ask when enough is enough.

This year the Dubai wellness survey looked at 103,000 responses from 162 schools, Ranches Primary being one of them. A conference was held this February to discuss the survey findings. There was a large focus on communications and how efficient schools are in communicating both internally and externally sparking debate about whether it is all too much.

The KHDA parents' survey relating to communication regularly highlights that parents feel overwhelmed by the quantity and range of communications they receive from schools on a daily basis. This is a big area of concern and has been for a number of years. Schools find themselves in the proverbial Catch 22 where demand and desire are at juxtaposition.

Emails, newsletters, whatsapp...there is a constant stream of incoming data from schools to be sifted through. Parents report says that they feel that they have to read all communications for fear of missing out on some vital information like a change in dates for a trip, the need for certain items to be brought etc. The time and effort used in this endeavor generally results in parents feeling disillusioned and discontent. They feel they are wasting their time and that a lot of the content of these communications is not relevant.

Teachers too feel the pressure. The evolving and competitive nature of Dubai schools weighs heavy on the burden to 'keep up with the Jones'. Though it's much more than that, we may well be in Elon's Tesla, Bowie blaring on the speakers, skyrocketing past the Jones! The rate of change and innovation in communication systems for schools is astounding. We may only just come to grips with one system when the next best thing is released. Long gone are the days of simple, stand alone, written reports handed over to parents once or twice a year- now we have 'transparent classrooms', 'interactive learning' and 'real time parent commentary'. Learning new systems alone is highly time consuming on top of the time and effort used to implement them.

Both schools and parents are calling out for change, more often than not, in the direction of reducing or streamlining communications. That's all well and good but how can we find a balance?

Whichschooladvisor notes: *"Good schools give their parents access to not just their child's teacher, but the senior leadership team too as and when it's required."* (Dubai Schools with the Happiest Parents: 2017). They note features like an 'open door policy' where 'Digital platforms are also used for student learning and parent communication by teachers, departments and divisions' where parents valued the 'two-way communication between the school and them'.



Ranches Primary School hosted a round table discussion as part of the Dubai Inclusion Network to address just this. We had leaders and educators from Deira to Jumeirah, representing 24 schools, come together to discuss the challenges and pitfalls faced, as well as to investigate possible solutions to this dilemma. The general consensus was that parents from all the schools who participated were feeling burdened by the volume of communications they are receiving. Teachers too reported frustrations at constant changes in systems and procedures. The overwhelming message from this discussion was a call for streamlining and consolidation. If you have a system that is working- **STICK WITH IT!**

Don't be drawn into the current of constant change.

There are a multitude of all round systems that can cover the majority of schools that need one dashboard- ISAMS, SIMS, ENGAGE to mention but a few. This can be consolidated with the real time systems like Twitter or Seesaw. Seesaw is gaining ground with both teachers and parents as being easy to use, on the spot, interactive window into the classroom. It was being praised from every corner of Dubai at our round table and is proving very successful here at RPS.

Allow Time to Embed a System

Don't be too quick to change- let the Jones' go! Give teachers and parents time to get to know a system and its scope by allowing a minimum of 2-3 years with a new endeavor like Seesaw. Often the first few months will be the toughest followed by a period where all parties embrace and utilize the system more and more before it becomes routine practice.

Stay Informed

Keep up to date with new developments but before trialing them analyse what they do- perhaps you are already carrying out that function in a different way through an app or system that you are using.

Do a Little Research

Before buying into a new system ask around, consult with schools or parents who have used it and do a comparative study against the systems you already have in place.

Appraise

Audit your current communication tools- are they all necessary or can one system carry out multiple functions. For example, robust systems like ISAMS can generate emails, timetables, calendars, sms and even newsletters which could amalgamate multiple sources of information in one delivery tool.

By applying these steps schools should be in a better position to appraise their current systems, resist the urge to change and streamline their communications. Cutting out the unnecessary, both teachers and parents should be more satisfied moving toward happier and healthier communications.



Catherine Nancy O'Farrell
 Head of Inclusion
 Ranches Primary School, Dubai.
 Phase 2 Director
 Dubai Inclusion Network.



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SYNERGY

Learning in a world of differences

2018

JSS Private School, Dubai, celebrates Determined Ones' spirit through a day wide event Synergy.

The fourth edition of Synergy was observed on 15th March 2018 at the JSS Private School with the theme: Learning in a World of Differences. In its constant endeavour to celebrate diversity and create awareness and appreciation for

SEND learners (The Determined Ones), Inclusion and Pastoral Care Department of JSS Private School has undertaken the comprehensive program Synergy with an aim of concrete contribution towards H. H. Sheikh Mohammed's futuristic vision of Fully Inclusive city by 2020.

The opening ceremony witnessed the

unveiling of INCLUVISION, a first of its kind exclusive quarterly magazine dedicated to the Determined Ones of Dubai, an ambitious endeavour of JSS PS Inclusion and Pastoral Care Department. Inclusion magazine was unveiled by the chief guest Fatma Belrehif - Executive Director; DSIB. The other dignitaries present at the occasion were Mr. Sean Pavitt- Senior Inspector KHDA; Mr. Muaz Shabandri-Senior English Press Creative Writer KHDA; Ms. Safia Bari-Director SNF, Dubai; Dr. D. P. Shiv Kumar- CEO JSS Institutions; Mrs. Chitra Sharma, Principal JSS Private School; Mr. Ashok Pallya SAO JSS Private School; Mr. Govind Rao Naik, SFO JSS Private School; Mrs. Bindhu Rajiv Headmistress JSS Private School; Mrs. Lata Nakara Principal JSS International School, Dubai. Highlighting the significance and objective of the magazine Mr. Andaleeb Isheteyaq, Head Inclusion and Pastoral Care, JSS Private School, told that the magazine will be a platform to recognize and



showcase Determined Ones' talents. It will be an authentic source of recent research and relevant information to help serve the UAE's Determined Ones community. Reading the stories, learning about struggles and successes of families with Determined Ones can be inspiring, engaging and will foster a sense of support and inclusion in the Determined Ones community. It will also help bring change in public perception on disability.

It was so pleasing to see the chief guest, Fatma Belrehif, presenting a token of love in the form of small saplings to all the participants of Synergy. To see the glimmer of hope and happiness in the eyes of these determined ones while receiving the saplings was an extremely satisfying and fulfilling experience.

Another unique initiative organized at the event was Determined Ones LOGO Competition. The objective of this initiative is that the logo will become a symbol of the voice for all the Determined Ones. The competition was extremely tough as there were many entries which deserved special mention. A panel of judges comprising of JSS Private School leadership team chose the three winners from 20 finalist entries. Vridhi Khattar from DPS Dubai got the third place. Her design represents the quintessential importance of connectedness. Elvin Shaji from Indian Academy was the winner of second place. His logo is a powerful depiction of how we should focus on ABILITY and not on DISABILITY. Jiffu Bunnik from Tender Hearts Arena, Dubai became the proud winner of the competition. Her logo truly reflects the voice of determined ones. It shows how a tender heart can help blossom a precious seed of determined one to a flourishing tree. She was awarded AED 500 and a certificate of excellence.

Synergy also witnessed amazing and unique talents of the Determined Ones from 16 schools/centres of Dubai and Sharjah in the Determined Ones Talent Show. It was an eye opener to see these great kids enthrall the audience with their exceptional talents. Some of the notable performances included Lovelina from JSS International School, who mesmerized the audience with her powerful singing. Dwayne Angie D'souza from Eduscan entertained the audience with his Gangnam Style. Varon Miles from SNF captivated us with his amazing drumming skills. Students from Tender Hearts performed an amazing group dance. Students from Eduscan performed a spectacular feat wherein they were able to tell the colours of various



objects just by touching them blindfolded. Lastly the talent show ended on a melodious note from Varun of Tender Hearts. Leading experts across UAE discussed various issues



facing SEND learning in the monthly event called Inclusion Round Table. It was an enlightening session where eight experts (Dr Shaju George, Dr. Shweta Adatia, Ms. Meera Ramani, Ms. Rogaiyah Hamidaddi, Ms. Rupali Ranjith, Ms. Tanuka Gupta, Ms. Urmimala Sinha and Dr. Sheetal Kini) across various disciplines of Special Needs allayed queries of the parents, teachers and the students. It was really amazing to see so many experts coming together on a single platform with the same objective of helping and sharing their insights with the audience.

Awareness sessions were also conducted through a fun filled Accessibility Quiz. Senior students of JSS Private School kept the audience engaged in an interesting activity through the awareness quiz on special needs issues. Parents, teachers and students alike enjoyed and benefited from it as was evident from their active participation. There were also stalls put up where various activities were being conducted like book sale and tuck shop for charity by JSS Private School,





entertainment games by DPS Sharjah, on the spot portrait by a professional artist, stalls by Autism Rocks, Art of Living, Education Malaysia and Modul University.


Last but definitely not the least there was an Inclusion wall to pen everyone's opinion of the event. This was the culmination of the event where one could see the reflection of feelings and thoughts from all the stakeholders across Dubai about conducting this unique event on such a large scale. Some of the special notes written were; "Thank you for hosting such a great event, stay inclusive" -Fatma Belrehif; "JSS Family inspires us. Keep shining" - Muaz Shabandri; "What an awesome day spent with lovely talented kids around. Thanks JSS Private School for giving an opportunity to be a part of this event"- a proud parent."My compliment to JSS team for a wonderful endeavor. Keep



up the good work, we support you" - Dr. Sonakshi Ruhela. "Great work, good efforts and amazing outcomes. Congrats to all the hardworking team. Looking forward to another great Synergy"- Dr. Alka Kalra. "Inclusive today and always"- Chitra Sharma.



Andaleeb Ishteyaq
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Jifu Bunnik

Creative, Versatile & Determined



Jifu Bunnik joined Tender hearts Arena in December 2016. She came in with a diagnosis of Pervasive Developmental Disorder. She attended a special needs school in Netherlands before relocating to UAE. She was a shy girl at the time of joining with the main concerns of parents for Jifu's lack of social skills and her struggles to fit in a social environment with peers and others.

At Tender Hearts Arena after observing her inclination towards painting and drawing she has been engaged in activities focusing on enhancing and empowering creative skills and has achieved a level of mastery in painting and drawing. Along with that she has been attending a program including physical activities like martial arts and yoga, music and social communication.

Over a period of one and a half years Jifu has developed excellent social skills with improved self-esteem and self-confidence leading to various individual and group performances on stage. At present Jifu engages herself in initiating a conversation with critical thinking and appropriate response which was lacking at her initial stages in Tender Hearts Arena. Jifu has also reached second level in Yoga and Martial arts and is now working on advanced levels.

Jifu has shown a very good performance in music and has been promoted to Grade 1 after successful completion of the beginners level. She is also preparing for the Trinity exam to be held in August 2018. She is also a good and confident participant in various activities and displays her functional skills in different areas such as cooking, needle work, photography and housekeeping.

She has won certificates and awards in art competitions in various inclusive activities conducted by Tender Hearts Arena at mainstream schools. She is one of the leading and star performers of Tender Hearts Arena and would be showcased along with other students in a forthcoming musical play. Currently Jifu is attending work experience training at one of the leading hotels along with her peers. Tender Hearts Arena aims to further develop and groom her creative skills for future independence.

Arti Khazanchi
Co-founder
Tender Hearts Arena