Early Childhood- Cognitive Skills
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Toileting
“Daniel has had some trouble using the toilet, sometimes he holds on for ages, and he still has the occasional accident.”

Why does this happen?
- A large number of children with autism are not toilet trained by the time they enter preschool. Many children are toilet timed not trained – they rely on adults or routine cues to prompt them to go to the toilet.
- Children with autism have learning difficulties that make it harder for them to learn the skills they need to use the toilet independently.
- Some children need a very clean toilet and bathroom environment in order to be comfortable with using the toilet.
- Children with autism have trouble communicating their needs. They don’t appreciate what other people may or may not know about their state of mind, so they may not tell an adult that they need to use the toilet.
- Children with autism have difficulty generalising tasks that they have learnt from one setting to another. A child that is toilet trained at home may have difficulty using the toilets elsewhere, or vice versa.
- Children with autism have poor social awareness; they may not understand that it is quite inappropriate to do a wee or a poo in a place other than the toilet.
- Some children with autism develop fears or phobias around using the toilet. They may worry about being splashed with water or they may not clean themselves for fear of making a mess and getting dirty. In extreme cases, these fears can lead a child to developing constipation and stomach upsets if they refuse to use a toilet at all for long periods.
- Toilets echo, have loud or unfamiliar noises, funny smells and often too bright lighting. Other people may be in close proximity and the child may have to line up to wait to use the toilet. Children with autism may find using a public toilet or toilet in a school or pre schools setting extremely uncomfortable and or difficult because of any of these factors.
- Some children with autism bowel and bladder train at different times, and may be dry during the day but not at night.

What you can do
- Ensure the child has no medical issues which will prevent effective toilet training such as bladder problems or constipation.
- Establish set times for the child to visit the toilet throughout the day. Check with the child’s family for suitable times. Try placing reminders on a visual timetable.
- The child may not recognise his body’s signals that he needs to go to the toilet – frequent prompting may be needed.
- Take the child to the toilet and reward good sitting, make the experience of visiting the toilet comfortable and rewarding, even if the child does not use their bowels or bladder at the time.
Reassure the child that he can return to his activity once he has been to the toilet. Use an activity sequence card - “toilet” then “cars”

- Place a picture chart next to the toilet that shows a sequence of steps for going to the toilet. You can download these images from the Visual aids page.
- Learn to recognise any non-verbal signals the child may use to suggest that he might need to go to the toilet. Everyone that supports the child needs to be aware of these signals. Teach the child a standard phrase or sign for toilet to use when he needs to go.
- Discover what works best as an effective reward for the child; perhaps time spent at a preferred activity will motivate the child to sit on the toilet.
- Consult with an occupational therapist - the child may avoid using the toilet because of sensory avoidance issues, such as the sound of the hand dryer or certain smells.
- Some children try to establish elaborate routines around going to the toilet; this should be discouraged if possible – this can be a hard habit to break.
- When using a public toilet, if possible use an accessible toilet (for people with disabilities), which is more private and reduces the amount of noise, distraction and probability of having to wait.
- Social stories about using the toilet, with photos of the child are excellent to explain how to use the toilet and to help alleviate fear.

Other resources:
- Monash medical centre autism fact sheet has some excellent tips for toilet training and autism.  
- There are also many books available on toilet training.

Using a urinal
- Boys with autism may find it difficult to learn to use a urinal or may be reluctant to use a urinal after learning to use the toilet in a cubicle setting. The hidden social etiquette of the men’s room is difficult to navigate and understand. Social stories can help with using a urinal, and there are now short videos available on www.youtube.com search for “using a urinal”. These clips may be useful for older boys with higher functioning autism.
Example of a visual support for using the toilet.
More visuals available from [www.boardmakershare.com](http://www.boardmakershare.com)
Using praise and rewards
“I encourage Paige to try new activities but she prefers to do the same things over and over. I’ve offered rewards but nothing has worked.”

Types of rewards
Preferred activity – The child is rewarded with time at their preferred activity after successfully completing the task.

Preferred sensory – the child is given some time at their preferred sensory activity- for some children this means allowing them to engage in self-stimulatory behaviour. For others it may be time at a sensory activity such as water play or blowing bubbles. Preferred food - the child is rewarded with a small amount of food each time the task is successfully completed, i.e. Attending to the person or task may be rewarded with “goog looking” and a rice cracker or sultanas.

Preferred object – successful completion of the task is rewarded with time playing with the child’s preferred object or toy.
Charts reward charts/ star charts can be used with higher functioning children with autism. The child will earn a star or sticker to be placed on the chart, to gain an item of value to the child when the correct number of stickers has been earned. i.e. the child will get a new train DVD when they have earned 20 stickers for making their bed.

Token economy
Each time the child finishes the task they get a token which is placed in the “finish” box. At a set time in the day the tokens are exchanged for a reward.

Why does this happen?
• Children with autism lack the motivation to please others. They have difficulty understanding why they should do something they don’t want to do.
• A child with autism may become anxious or upset if asked to complete a task that is unfamiliar. They prefer activities that they know and enjoy because it makes them feel secure.
Children with autism seem to need a lot more praise and encouragement than other children. They may be unmotivated and give up easily.
• The rewards that motivate normally developing children often do not appeal to the child with autism.

What you can do
• Consider what motivates the child. Find out the child’s likes and dislikes. Rewards can be social (tickling, hugging, a pat on the back), edible (a small piece of the child’s favourite food), activities (swings, time alone, asking questions) or material (stickers, bubbles, stars).
• You can use the child’s obsessive interest as a reward; eg. if she completes a drawing she can look at her favourite book for the remainder of activity time.
• When giving a reward, always give praise at the same time. Even if the child doesn’t understand the meaning of your words, you can convey this with the tone of your voice and facial expression.
• Praise needs to be clear and simply understood. Eg. “Good looking”, “Good try”, “Great picture.”
• Give the reward or praise immediately when the child gives the correct response or does what was asked to do.
• As the child becomes more co-operative, the reward system can become more sophisticated. A tick chart or sticker book can be used. When the child learns to wait and is willing to work toward a reward. This system works best if the child’s parents are also involved in encouraging and praising appropriate behaviour at home. Pictures or photos should be used to clearly show how points are ‘earned’ and as a visual reminder of the end reward.
Attention and concentration

“Brandon just can’t settle or concentrate, he’s all over the place.”

Why does this happen?

• Children with autism are easily distracted (although they may display excellent concentration on their preferred interest!) They may not be able to concentrate if they are disturbed by background noise, lights or movement of other children.

• Preschool rooms, being very bright and colourful can overload a child with visual information. Children with autism find it particularly hard to ‘filter out’ this background noise and visual information.

• Sensory issues can easily distract a child with autism and make it difficult to concentrate- i.e. smells, itchy clothing, outside noises.

• Repetitive and self-stimulatory behaviour can make it very difficult for a child with Autism to concentrate and can affect learning- i.e. flapping hands, tapping objects, body rocking etc.

• A child with autism can have trouble understanding what they need to focus on; they may be unaware of the ‘big picture’, concentrating instead on small, irrelevant details.

• Children with autism tend to have obsessive interests that can intrude on their thoughts. They may pay little attention to an activity that does not fall into their particular area of interest.

• A child with autism may not pay attention to group instructions because he doesn’t realise that he is actually part of the group.

• Attention problems may occur if the child does not understand what is being said due to his poor receptive language skills.

• Children with autism may have other conditions like ADD or ADHD which affect concentration and the ability to sit still and attend to information.

• Children with autism often have a self-imposed, nutritionally poor diet. This might have an adverse effect on their ability to concentrate, particularly towards the end of the day.

What you can do

• Seat the child at the front of the room close to you where they can see and hear you more clearly.

• Try using music to mask out background noise. The child may tolerate ear plugs or headphones.

• When demonstrating an activity you’ll need to remind the child what he needs to focus on. Try to incorporate the child’s particular topic of interest into activities to increase attention and motivation.

• Mention the child’s name frequently when addressing the children as a group. Alternately, ask your assistant to repeat the instruction to the child individually.

• Keep your language clear and simple, giving one instruction at a time. Give the child sufficient time to process the instruction, then check that the child has understood.
• Ensure the child is not engaging in self stimulatory or repetitive behaviour when you are giving instructions.
• Give clear concise directions one at a time. The child may have difficulty deciphering multiple instructions and lots of dialogue.

• Touch the child’s arm and use his or her name to draw their attention to you when giving instructions.
• Use visual aids to reinforce what is being said (e.g. a model of a completed task.)
• If all else fails and the child just won’t pay attention, try some time out. Try an activity break- some time on the playground, jumping on a trampoline or riding a bike are a great outlet for excess energy and then try again.
Encouraging fine motor skills
“Reese shows no interest in drawing or writing.”

Why does this happen?
• Many children with autism have difficulty with fine motor skills. They may find it difficult to control a crayon or pencil because they lack co-ordination and strength in their fingers.
• Children with autism will be reluctant to try an activity if they don’t understand the meaning or purpose behind it. They may not see the purpose of repeating an activity such as forming letters, in order to get it right. Or, they may get stuck and copy letters or numbers over and over without understanding their meaning.
• It is common for children with autism to have a strong fear of failure and a desire for perfection. They may be anxious about making mistakes and become frustrated or upset if they cannot draw or write exactly as they want. This perfectionism can prevent a child with autism from doing any work at all.
• Children with autism show a lack of imagination and creative play. When given an activity, such as free drawing or pasting onto a blank sheet, they may not know what to do.

What you can do
• Encourage activities that develop finger strength and co-ordination, such as threading objects onto string, construction with blocks, dressing and undressing dolls or toys, painting with cotton buds, activities using clothes pegs and kitchen tongs. Use the child’s preferred interests as a basis for developing motivation and interest in new activities.
• The child may need extra encouragement and reassurance when trying a new activity. Avoid any comments that may sound negative, such as, “That’s not right” or saying the word ‘no’.
• You can adapt an activity to allow for the child’s individual needs. A pasting activity could become a turn-taking game. When drawing, divide a piece of paper in half and draw one half of an image, i.e. a face on it. While this may not encourage creativity, it could be a good place to start developing the child’s interest.
• Provide concrete visual models to encourage the child to participate, e.g. a block train – “Make one like mine.”
• When encouraging writing the child may need ruled lines to write on as a guide or outlines on the page drawn for pasting.
• The child may require a rubber pencil grip to assist the child in developing the correct technique for holding writing or drawing materials.
Encouraging gross motor skills
“Marcus is really clumsy and doesn’t like to participate in ball games or similar activities.”

Why does this happen?
• Children with autism often have delayed gross motor skills. They may have poor motor co-ordination leading to clumsiness, or have an odd gait or posture.
• Some children with autism have problems with visual perception; this can make it hard for the child to judge distances or anticipate a ball being thrown in his direction. This can have a great impact on the child’s self-esteem, as other children may tease him and make fun of his clumsiness.
• Children with autism can also have difficulty judging their own position in space; they may be a messy eater or have difficulty using playground equipment.
• Children with autism have poor receptive language skills. They may not understand how to play games even after you’ve explained the rules.
• They may have difficulty coping with changes to a learned game or the subtle social rules of a game, e.g. learning not to kick the ball to someone on another team even if they are asking him to do so.
• Team games are noisy, fast moving and not clearly visually defined, leading to confusion and frustration for children with autism who may find it difficult to participate.
• Indoor games in stadiums can be particularly challenging as echoing noise of people talking or cheering, squeaky shoes, bouncing balls and sport whistles can cause a complete sensory overload and or meltdown
• Waiting in line for a turn, being “out” or not winning can cause great anxiety and distress for children with autism.

What you can do
• Be explicit when explaining rules – tell the child exactly what his role will be in the game. Use language that is as clear and simple as possible. Have an assistant repeat the instruction to the child if he has difficulty with group instructions.
• Encourage participation in a range of gross motor activities, e.g., an obstacle course with defined start and finish.
• You might need to teach the child how to use equipment and how to position his body to move through the equipment.
• You will need to be aware and have an understanding of the child’s individual sensory issues affecting body position and movement. For example, if he hates having his feet off the ground he will refuse to climb and swing.

Link for further info and ideas for activities
Inability to generalise learned tasks

“Abby can put on her own shoes and socks at home, but when asked to do it at preschool she gets confused and doesn’t seem to know what to do.”

Why does this happen?
Children with autism have great difficulty transferring skills learnt in one setting to another situation. This is because their thinking can be very rigid and inflexible. Some children with autism might be able to do a certain task at home, but not at preschool or vice versa.

What you can do
• When teaching anything to children with autism, it is important to generalise with various examples and situations. For example, ‘a house’ can be a detached brick dwelling, a terrace house, or a timber country cottage and many other variations.
• Give the child lots of opportunities to learn the same thing in a variety of situations.
• There needs to be good communication between home, preschool and any early intervention workers. Keep a record of skill development in a ‘chat book’ that can be sent home each day so that the child’s newly acquired skills can be practised at home.
• Use the same key words across settings and by the people in those settings if possible. “Drink” “should be “drink” across all settings, not known by many names such as juice, water or cup The child needs to be able to master the task being taught before being able to generalise it to other locations.
• Teach the skill.
• Pre teach it when moving to the next setting- i.e. prompt the appropriate behaviour for the new situation – i.e. “We are going to go to the toilet and wash our hands” Link to modelling and prompting

• Prompts used in the original skill teaching environment need to be taught across settings, the child will learn to respond to prompts to undertake the task regardless of setting.
Learning to ask for help

“There are times when Maria gets upset because she can’t do something, but she never asks for our help.”

Why does this happen?

• Children with autism have difficulty solving problems. They may not recognise the link between their problem and asking somebody for help with their problem.
• Children with autism have impaired ability to recognise the thoughts and intentions of other people. Therefore they may not understand that someone else can offer a solution to their problem.
• The child may have communication difficulties and may become frustrated when trying to ask for help.
• Often a child with autism may lead the adult by the hand to the thing they require help with or want without verbalising.
• Higher functioning children with autism may ask for help in an inappropriate way such as yelling across the room.

What you can do

• Be aware of the tasks that cause the child the most difficulty. Work alongside the child; assist the child to recognise when they are having difficulties. Teach a standard phrase to use, such as help please, “I'm stuck/I can’t do this.”
• If the child uses sign, teach and reinforce the help sign,
• Always praise and respond to a child’s attempts to appropriately ask for help.
• If the child is behaving in an inappropriate way to get help, prompt them with the key phrase and or action to gain help.
• Key word sign may be useful in social situations when the child needs to discretely ask for help from a caregiver.
Modelling and prompting
“Simon has trouble when trying new activities – he gets lost and doesn’t know what to do next, then gives up.”

What is prompting? Prompting gives the child with autism a key cue to undertake a task or give the correct response in a certain situation. Cues and prompts are important teaching tools, allowing children with autism the opportunity to use the correct skill across varied situations.

Modelling: The person models the correct behaviour or action first - I.e. if the action is to stand up, the person teaching will stand up first.

Physical prompts- Full physical prompts include hand over hand teaching- the teacher goes through the entire action with the child with their hands over the top of the child hands. The child gains the feel for what the activity physically feels like.

Partial physical prompts may include tapping or touching a particular body part to prompt the child to undertake what is required.

Verbal prompts
A full verbal prompt will tell the child what to do
A partial verbal prompt may use a key word or sign to influence the desired behaviour

Other types of prompting-
Stimulus prompts- uses the object required for the action as the prompt- i.e. putting the child’s drink bottle beside them as the stimulus prompt for having a drink.

Why does this happen?
- As children with autism have poor generalisation skills they may not automatically give the correct response across varied situations. A prompt can help the child with autism give the required response, complete the task correctly or behave appropriately in the right place at the right time.
- Children with autism have difficulty following verbal instructions; this makes it harder for them to acquire new skills.
- They may be unable to imagine what it would be like to master a new skill; that is, to imagine performing the activity and the feeling of pride and sense of achievement associated with learning that new skill.
- Children with autism often have poor imitation skills. They do not ‘pick up’ new skills by simply watching another person. They may focus on irrelevant details and miss the point of the demonstration. They often miss the ‘big picture’.
- Some children with autism may be able to copy what you do, but still require a physical or verbal prompt in order to complete an activity.
What you can do

- When teaching new skills, use a simple verbal prompt and a physical prompt, as long as the child is comfortable with physical contact. Physical prompts should be withdrawn quickly but gradually, otherwise the child will come to depend on it. The verbal prompt can then be gradually withdrawn and replaced by a sign or gesture.
- Hand over hand modelling is a useful way of teaching physical skills, particularly those that require fine motor skills and manipulation, such as removing lids, threading beads, using pencils or painting. This method will give the child a ‘physical experience’ of performing the activity. This assistance can also be withdrawn gradually by allowing the child to complete more and more steps of the activity.