Structured Play Group (SPG)

**Brief Introduction**
Structured play groups (SPG) involve small-group activities characterized by their occurrences in a defined area and with a defined activity; the specific selection of typically developing peers to be in the group; and a clear delineation of theme and roles by adult leading, prompting, or scaffolding as needed to support students’ performance related to the goals of the activity.

**Description**
Structured play groups (SPG) are interventions using small groups to teach a broad range of outcomes. SPG activities are characterized by their occurrences in a defined area and with a defined activity; specific selection of typically developing peers to be in the group; and clear delineation of theme and roles by adult leading, prompting, or scaffolding as needed to support the learners’ performance related to the goals of the activity.

SPG meets evidence-based criteria with 2 group design and 2 single case design studies. According to the evidence-based studies, this intervention has been effective for elementary school-age learners (6-11 years) with ASD. SPG can be used effectively to address social, communication, behavior, play, school-readiness, and academic skills.

**Brief Adapted from**

**Matrix of SPG by Outcome and Age (years)**

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<tr>
<th>Social</th>
<th>Communication</th>
<th>Behavior</th>
<th>Joint Attention</th>
<th>Play</th>
<th>Cognitive</th>
<th>School Readiness</th>
<th>Academic</th>
<th>Motor</th>
<th>Adaptive</th>
<th>Vocational</th>
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**Research Summary: Structured Play Groups (SPG)**

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<tr>
<th>Ages</th>
<th>Skills/Intervention Goals</th>
<th>Settings</th>
<th>Outcome</th>
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<td>6–11 years</td>
<td>Social, communication, behavior, play, school readiness, academic</td>
<td>Home, school, community</td>
<td>EBP</td>
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*The information found in the Research Summary table is updated yearly following a literature review of new research and this age range reflects information from this review.*

August 2015
Structured Play Group (SPG)

Research


Structured Play Group (SPG)
Steps for Implementation

Steps/Components: Integrated Play Groups

A. Natural integrated settings: Intervention takes place in the school setting, where children typically engage in play activities.

B. Well-designed play spaces: Consider spatial density and size, spatial arrangement, organization of materials, and general accessibility.

C. Selection of play materials: Use constructive and sociodramatic toys with interactive potential that represent diversity in terms of gender roles and cultural values.

D. Establishing a consistent schedule and routine: Create a highly predictable environment (e.g., ongoing routines like opening and closing rituals).

E. Forming balanced play groups: Integrate socially competent peers as play partners. Each play group should consist of 2 children with ASD and 3 children with TD.

F. Focusing on child competence: Foster children’s spontaneous initiations and facilitate social and imaginary play by providing support according to Vygotsky’s Zone of Proximal Development (ZPD).

G. Guided participation: Guide the children to initiate, join, maintain, elaborate, and negotiate play routines.

H. Full immersion in play: Even if the developmental level of children doesn't allow them to understand the broad picture of the play activity, integrate them according to their skill level (e.g., in a larger play theme of “constructing a castle with building blocks,” a child who likes to bang blocks against each other might be integrated by taking the role of a construction worker who is hammering the blocks with a hammer).

I. Duration: 30 minutes twice a week (Wolfberg & Schuler, 1993) during one month.

Variations

Steps for LEGO Therapy:
First, LEGO club rules are introduced in individual therapy, where children develop LEGO building skills.

A. Children are asked to follow LEGO Club Rules:
   i. Build things together!
   ii. If you break it, you have to fix it or ask for help to fix it.
   iii. If someone else is using it, don’t take it—ask first.
   iv. Use indoor voices—no yelling.
   v. Keep hands and feet to yourself.
   vi. Use polite words.
   vii. Clean up and put things back where they came from.
   viii. Do not put LEGO bricks into your mouth.

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B. Children are then introduced to a peer group (including children with and without ASD), with whom they engage in collaborative structured group play while adhering to the LEGO Club Rules.

C. The groups build simple models with constant adult supervision. Once they can build proficiently in small groups, they start to build more complex, longer-term models that take a few sessions to complete. Adult supervision is withdrawn slowly until the children are capable of engaging in less structured, “freestyle” activities in pairs of two.

D. Children can attain different levels of skills during therapy and once they demonstrate these skills, they are given a certificate to reward their achievement in front of their peers. LEGO Helpers find and sort bricks by color, LEGO Builders build models in a group and design freestyle models with adult help, and LEGO Creators build models in groups and design freestyle models without adult help.

Steps for Social Skills Intervention:

A. Identify TD classroom peers that the child with ASD prefers and who are enthusiastic to help peers and eager to work with adults.

B. Train TD peers in 5–10-minute individual sessions to naturally reinforce social initiations from the child with ASD by engaging in conversation or play. Teach them to gain the child’s attention before responding by making eye contact or moving an object into the child’s field of vision.

C. Instruct the student with ASD in social initiation: sequentially teach the task-analyzed steps in a natural setting using modeling, repeated trails, prompts, and reinforcement. Start with one on one work (clinician plus student with ASD) in a small room, then practice with a peer in same setting (small room), and finally move on to a cafeteria setting (student with ASD plus TD peer).

D. Once the student with ASD demonstrates successful, independent (without prompting) social initiations to peers, start the self-monitoring intervention, which consists of five steps:
   i. Operationally define the target behavior (e.g., Start a conversation with a friend).
   ii. Identify reinforcers with the help of school staff and parents. Reinforcers will be awarded after each lunch period if clinician and student reached similar counts for the student’s social initiation behaviors (90% agreement).
   iii. Design/choose a self-management device/method (e.g., a golfer’s wrist counter).
   iv. Teach the student with ASD to use the device (give one point for social initiation; use examples/non-examples of behavior of social initiation).
   v. Teach self-management independence (fade adult supervision).

E. Intervention takes place during lunch (30 minutes) and the immediately following recess periods (20 minutes).