



Leadership Project: How to start a social skills playgroup for at-risk preschool children

Purpose of this project:

Provide early intervention for children ages 3-5 years with developmental disorders in need of social skills support, in the form of a social skills group for both them and their guardians.

Support children with neurodevelopmental disorders, who would benefit from additional instruction in social skills and who do not qualify for social skills group for children with ASD.

Provide a setting in which parents of children with neurodevelopmental disorders can support each other.

Facilitate multi-disciplinary collaboration between professionals serving children with neurodevelopmental disorders.

The group:

4-6 children and their caregiver/guardian

Exclusion criteria of severe externalizing behaviors and/or aggression

The structure for each session:

- 1) exploratory play and interaction within group (15 min)
- 2) introduction/social greeting (5 min)-hello song
- 3) yoga/mindfulness activity (10 min) (we are both certified yoga instructors)
- 4) lesson/activity of the day (10-15 min)
- 5) closing (5 min)- goodbye song

The curriculum of the six-week program:

Week 1: Introduction and assess the social interaction level of group

Week 2: Whole body listening

Week 3: Initiating interactions (read a story about the topic, role play using puppet show)

Week 4: Turn taking (read a story about the topic, pass a "bean bag" for turn)

Week 5: Sharing (read a story about the topic, ask the children to share high interest toys)

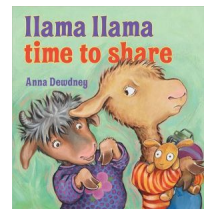
Week 6: Closing (Children bring an item to show and share with the group)



Yoga Activity



Graduation Ceremony



Story Time



Examples of lessons/
activities



Exploratory Play



Methods:

We collaborated with a comprehensive children's medical clinic to provide the groups with their population of children and in their facility. Fortunately, we met the director and social workers of these groups during a LEND seminar. We followed up with these professionals in a series of meetings to discuss the details of the group, such as funding and resources. Clinic social workers offered to recruit suitable participants and have them sign a consent form. We contacted potential group members for more information about their child's difficulties and to explain the goals of the group. If the child was determined to be a fit for the program, we considered him or her for the group. After deciding on a day and time, we informed all group members.

During the group, child-care was provided for participants' siblings. The provision of childcare was by a fellow AZLEND member, although discussion were made with the Children's Center for future child-care workers to be internally recruited. At the end of each session, group facilitators checked in the each parents and were available to answer and comments or questions.

We completed brief progress notes after each session, including childrens' current social and attentional abilities. These notes were kept at the children's clinic.

When it was determined that two students in the group needed a greater level of social support, we instituted a behavior supported (e.g. sticker chart) to facilitate on-task behavior for all students.

At the conclusion of the 6 week program, we held a graduation ceremony where all the children received a certificate of completion. This pilot program was deemed such a success by both the parents of the group and professionals at the clinic that it continue to be offered.