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## **Play of children on the autism spectrum – from the perspective of mothers’ experiences**

### **Zabawy dzieci w spektrum autyzmu – z perspektywy doświadczeń matek**

#### **Abstract**

**Aim.** The aim of the study is to discuss the specificity of play activities of children on the autism spectrum described in the subject literature, to present the experiences of mothers of autistic children’s play from the perspective of the children’s experiences, and to indicate the validity of using play in the process of supporting their development.

**Methods and materials.** The study was conducted using a semi-structured interview. The study involved 14 women aged between 25 and 54, whose children had a deci-

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sion on the need for special education due to being on the autism spectrum. The obtained research results were developed in accordance with the assumptions of the phenomenographic perspective.

**Results and conclusion.** The research reveals a picture of the specific play of children with autism spectrum disorder, which differs significantly from the play activity of neurotypical children. The analysis and interpretation of the research material allowed us to distinguish the following categories of play activity undertaken at home by a child with autism spectrum disorder and their parents, as well as siblings: (1) pretend play – requiring intervention from an adult, (2) manipulative play rather than constructive play, (3) schematic play – rules difficult for parents to understand, (4) relational play – desired contact between parents and the child, (5) movement play – time spent together with the child. Children on the autism spectrum play in a specific – autistic – way. The findings justify the need to sensitize parents to their involvement in the process of triggering play activities in children on the autism spectrum. Play, according to the naturalistic-developmental-behavioural approach, should be used in the process of supporting the development of children on the autism spectrum. Children's development is manifested in play; moreover, play is a factor in their development.

**Keywords:** child, play, autism spectrum, phenomenographic study, developmental support.

### **Abstrakt**

**Cel.** Celem opracowania jest omówienie specyfiki aktywności zabawowej dzieci w spektrum autyzmu opisanej w literaturze przedmiotu, ukazanie z perspektywy doświadczeń matek zabaw dzieci autystycznych, a także zasygnalizowanie zasadności wykorzystania zabawy w procesie wspomagania ich rozwoju.

**Metody i materiały.** Badania zrealizowano z wykorzystaniem wywiadu o semistrukturalizowanym charakterze. W badaniach wzięło udział 14 kobiet w wieku pomiędzy 25. a 54. rokiem życia, których dzieci miały orzeczenie o potrzebie kształcenia specjalnego ze względu na spektrum autyzmu. Uzyskane wyniki badań opracowano zgodnie z założeniami perspektywy fenomenograficznej.

**Wyniki i wnioski.** Z badań wyłania się obraz specyficznej zabawy dzieci ze spektrum autyzmu, która znacznie różni się od aktywności zabawowej dzieci neurotypowych. Analiza i interpretacja materiału badawczego pozwoliła wyróżnić następujące kategorie aktywności zabawowej podejmowanej w domu przez dziecko w spektrum autyzmu oraz jego rodziców, a także rodzeństwo: (1) zabawy na niby – wymagają interwencji ze strony dorosłego, (2) zabawy manipulacyjne bardziej niż konstrukcyjne, (3) zabawy schematyczne – reguły trudne do zrozumienia przez rodziców, (4) zabawy w relacji – upragniony kontakt rodziców z dzieckiem, (5) zabawy ruchowe – wspólnie spędzony z dzieckiem czas. Dzieci ze spektrum autyzmu bawią się w specyficzny – autystyczny – sposób. Wyniki ba-

dań uzasadniają potrzebę uwrażliwienia rodziców na ich zaangażowanie w wyzwalanie u dzieci w spektrum autyzmu czynności zabawowych. Zabawa, zgodnie z naturalistyczno-rozwojowo-behawioralnym podejściem, powinna być wykorzystywana w procesie wspomagania rozwoju dzieci w spektrum autyzmu. W niej przejawia się rozwój dzieci, ponadto jest ona czynnikiem ich rozwoju.

**Słowa kluczowe:** badanie fenomenograficzne, dziecko, spektrum autyzmu, wspomaganie rozwoju, zabawa.

## Introduction

Autism spectrum disorder, according to the DSM-5 (American Psychiatric Association, 2013; Pietras, Mokros, Król, Witusik, & Sipowicz, 2022), incorporates a dual approach in terms of diagnostic criteria:

- significant and persistent clinical deficits in social communication and social interaction (marked deficits in non-verbal and verbal communication, lack of social reciprocity, failure to form and sustain age-appropriate peer relationships);
- restricted patterns of behaviour, interests and activity (stereotypical motor or verbal behaviour, unusual sensory behaviour, excessive attachment to routines and patterns of behaviour, restricted interests combined with fixation).

These limitations explain the absence of playful activity or its primitive forms in children on the autism spectrum, which is an important indicator of developmental abnormalities (Frith, 2016; Yates, Le Couteur, 2009; Pisula, 2005). Interacting with peers, pretending, making things up or stepping into roles are difficult and sometimes even impossible for this type of child to achieve. The play activity of children on the autism spectrum is solitary and consists of repeating the same actions repeatedly, manipulating objects, and grouping them. It is therefore hardly surprising to find a functioning simplification that children on the autism spectrum do not play, and since this is the case, therapeutic activities in the form of tasks should be intensified at the expense of play by giving children tasks of a revalidating nature. It is easier to carry out activities with a child that have a structure – a beginning and an end – that result in a tangible product, such as a completed jigsaw puzzle or a completed chessboard, than to trigger the process of play. Rather than fostering the development of interaction and exchange, interactive toys provided to children paradoxically limit the opportunities to enter into a relationship with another person. The authors of the present study believe that it cannot be unequivocally stated that the analysed group of children do not play. At most, children on the autism

spectrum play in their specific way, one might say in an autistic way (Silberman, 2015). This means that attempts to trigger playful activity in neurotypical children should not be abandoned, as it can have positive effects on their development.

Researchers emphasise the socio-cultural aspects of play. It accompanies people throughout their lives and is a platform for the intergenerational transmission of knowledge, attitudes, socially accepted behaviours and values, as well as playing a bonding role. In all societies and cultures, the influence of adults on children's play is evident. However, the role of adults, the level of control of children's play, and its relationship to the socialisation process have a socio-cultural basis and may look quite different in different cultures (Huizinga, 2007; Markowska-Manista, 2022; Opiela, 2020). This means that the play activities and toys used reflect, as if in a mirror, parents' views on raising children on the autism spectrum, the importance of play for their development, and the entrenched ways of thinking of neurotypical children as, for example, "not playing" or "playing but in an autistic way and needing support."

The study follows a position prevalent in psychology on the relationship between play and child development (Brzezińska, 2005; Brzezińska, Appelt, & Ziółkowska, 2016; Tyszkowa, 1977). Play is a factor in child development and, moreover, play itself is also subject to development and changes throughout childhood as a stage of human life. Play is defined as a voluntary and free activity, completely absorbing the player (playful person), with which no material interests and benefits are connected. Play takes place at a certain time, in a certain space and according to certain rules (Huizinga, 2007). Among the most important characteristics of play are: the pleasure of playing, which is independent of the result of the children's activity, the absence of compulsion to play, and the presence of rules in play that are respected by the play (Hurlock, 1985). In neurotypical children, the following types of play emerge during early, middle and late childhood: manipulative, constructive, thematic, motor, exploratory and didactic games. Just as the form of play changes throughout childhood, so do its functions and importance for development (Brzezińska et al., 2016; Tyszkowa, 1977). Play should be considered an important factor in children's development, which is confirmed by various typologies regarding its functions. Through play, the child accumulates knowledge, masters skills (educative function), learns to follow norms and rules (educative function), frees himself from lingering tensions, realises seemingly impossible things (therapeutic function), and takes on different roles, manifests his strengths and weaknesses (projective function) (Brzezińska et al., 2016; Hurlock, 1985).

In recent years, there has been a growing interest among Polish researchers in play or its primitive forms being an important aspect in the diagnosis and therapy of children on the autism spectrum (Kruk-Lasocka, 2021; Kwasiborska-Dudek, 2020; Prokopiak, 2020). However, we still know too little about how play activity may mani-

fest itself in children on the autism spectrum according to their intellectual and social abilities, how to trigger play in them, and what role play may play in their development. Western researchers are connecting play for the child on the autism spectrum to early childhood development support (Greenspan, Wieder, 2014; Rogers, Dawson, & Vismara, 2015; Wolfberg, Bottema-Beutel, & DeWitt, 2012). A growing number of evidence-based programmes for working with the child on the autism spectrum are emerging, involving the integration of approaches from different psychological streams that use play as a therapeutic factor (Schreibman et al., 2015; Rogers et al., 2015). In this context, this study aims to discuss the specific play activities of children on the autism spectrum described in the literature and to show the play of autistic children from the perspective of their mothers' experiences. The research material collected provides a scientific rationale for the use of play in the developmental support of autistic children.

### **Selected aspects of play for children on the autism spectrum and its use in supporting their development**

The autism spectrum is a disorder that, to varying degrees, affects interrelated spheres of a child's development and thus limits various forms of activity, including play development. The use of the term autism spectrum to describe children implies that they vary in the number and severity of their disorders and thus manifest greater or lesser capacities associated with engaging in play activities. Even in infancy and post-infancy, children with suspected autism spectrum disorder do not show interest in their parents and play according to the principle of exchange, in which toys of various kinds, such as rattles, are used. Toys are in children an object of non-specific manipulation involving hitting and waving them, taking them in the mouth, which is related to self-stimulation. This means that it is possible to distinguish a group of children on the autism spectrum who, irrespective of their age, remain at the stage of sensory-motor play, which for children developing normally is characteristic of the first year of life. Play mainly consists of using objects similarly and experiencing them sensorially (Bąbka, Stein-Szała, 2021).

In neurotypical children, objects, including toys, acquire a specific meaning over time and are used for their intended purpose. Many children on the autism spectrum do not play with toys according to their functions. Playing is mainly about setting objects in motion, e.g., turning vehicles on their roof, viewing and grouping objects according to the same criterion, e.g., colour or shape, and schematic repetition of actions. Mechanical toys are particularly favoured by children with

autism, which they repeatedly set in motion (Pisula, 2005; Román-Oyola et al., 2018; Winczura, 2010).

The construction games of children on the autism spectrum most often consist of arranging pieces repetitively or creating structures that are not directed towards a specific outcome, such as building a house or a garage. These games are also not social. The child ignores the construction of a peer, does not imitate their behaviour, and does not try to share toys with them or build different constructions together. Construction play is also not social (Szczypczyk, 2009; Winczura, 2017; Wolfberg et al., 2012).

Deficits in children on the autism spectrum regarding the ability to pretend to prevent or significantly limit the emergence of pretend play. According to Simon Baron-Cohen (1987), children on the autism spectrum have difficulty pretending to feed a doll using a spoon and cup, for example, although some subjects were able to perform this task when instructed by a therapist. Many children on the autism spectrum do not play shopping, doctor, cook dinner, and do not use substitutes in play (González-Sala, Gómez-Marí, Tárraga-Mínguez, Vicente-Carvajal, & Pastor-Cerezuela, 2021; Skórczyńska, 2006). Children on the autism spectrum cannot imagine what is going on in the other person's mind. They find it difficult to understand what an intentional action is and to distinguish intentional from accidental actions, which limits the undertaking of thematic play with peers in which different role-playing takes place (Barton, 2015; Wetherby et al., 2004; Kasari, Gulsrud, Wong, Kwon, & Locke, 2010; Pisula, 2016). There is very limited or no symbolic play (Barton, 2015; Winczura, 2017; Skórczyńska, 2006).

There are reports that children who have reached a higher level in the development of theory of mind, and are therefore better cognitively and socially functioning, display play activities in which fantasy and imagination are important, and have a better understanding of what pretending is. In addition, children on the autism spectrum with intelligence quotients and speech development levels similar to their peers were able to play spontaneously in symbolic play, although play due to rigidity in their behaviour and a tendency to use toys stereotypically differed from the activity of their non-disabled peers (Bąbka, Stein-Szała, 2021; Chang, Shih, Landa, & Kaiser, 2018; Pisula, 2005). Children on the autism spectrum with high cognitive and social abilities may be amenable to participating in didactic play and games with adults that require activities according to set rules, but these need to be adapted to their intellectual abilities. Children on the autism spectrum prefer games and activities that have clear instructions (Szatmari, 2007).

Considerations suggest that children on the autism spectrum show their interactional, communicative and imaginative incompetence in play, which makes their play activity very different from the play of neurotypical children (Lam,

Yeung, 2012). In the context of the present discussion, there is a need for scientific inquiry into the possibilities of triggering play activity in children on the autism spectrum and the importance of play for their development. Comprehensive information on these topics is still lacking in the literature. The issue of play for children on the autism spectrum has either been marginalised in the literature or reduced to issues related to the diagnosis of neuroatypicality (Prokopiak, 2020; Pufund, 2020; Yates, Le Couteur, 2009). In contemporary psychology, it is accepted that a child's development is the result of a dynamic interaction between the child and his or her environment (Brzezińska, 2005). This means that the course of development, and its effects, whether the child has a developmental disorder or not, are the result of a direct exchange between the child and his or her environment. It can also be an indirect exchange through interactions with the environment involving other people, e.g., parents, teachers, or therapists. The implication is that a child on the autism spectrum needs a sensitive adult, including a parent, for further development. This view is supported by Western authors who demonstrate the potential to support the development of children on the autism spectrum through the use of imitation, pretend and play (Greenspan, Wieder, 2014; Schreibman et al., 2015; Rogers et al., 2015; Howlin, Baron-Cohen, & Hadwin, 2010). In children on the autism spectrum, periods of sensitisation, i.e., increased receptivity to learning, including play, can be observed, allowing the therapeutic provision to be adapted to their abilities and limitations. This calls for a change of approach in thinking about the development of children with autism and their therapeutic process. It is worrying to report that adults, including teachers, underestimate the importance of play in the therapy of children with various disabilities, and confuse it with educational and remedial tasks (Lynch, Prellwitz, Schulze, & Moore, 2018). Limitations arising from the autism spectrum can cause therapists and parents to over-focus on eliminating children's various deficits by giving them structured tasks, which is associated with the dominance of the functional-behaviourist approach (Bąbka, 2017; Wolfberg et al., 2012). Anna Waligórska and Michał Waligórski (2015) proposed a division of therapeutic activities for children with autism spectrum disorders in the context of the following approaches: behavioural, based on applied behaviour analysis (ABA), structured learning and developmental, also referred to as developmental-social or developmental-relational structured learning and developmental, also referred to as developmental-social or developmental-relational\*.

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\* A discussion of this issue is beyond the editorial capabilities of this paper. For a more extensive discussion of this issue, cf. Waligórska, Waligórski (2015).



Nowadays, there is a tendency to integrate the aforementioned approaches in the therapy of autism spectrum disorders within a naturalistic-developmental-behavioural intervention, which opens up space for the use of play as a means of supporting the development of autistic children, taking into account the role of antecedent stimuli and the response of the adult (parent) to the child's behaviour. Early therapy for children with autism spectrum disorders, in line with the developmental-behavioural strand, should be as naturalistic as possible (naturalistic), take into account relational and developmental aspects (developmental), and use structured learning taking into account the role of preceding stimuli and the adult's response to the child's behaviour (behavioural) (Schreibman et al., 2015; Waligórska, Waligórski, 2015). A special role in the therapeutic context has to be fulfilled by the sensitive parent of a child on the autism spectrum as a person who can anticipate appropriate moments to gradually trigger play activity, provide models for imitation and pretence, and help to structure the course of activities. It is important that play does not lose its naturalness and does not turn into learning using tasks and under the guidance of an adult.

### **Methodology for own research**

The subject of the present study is the play of children on the autism spectrum. The research aimed to explore and describe how mothers experience the play activities of children on the autism spectrum. This research was oriented towards finding answers to the following main problem\* : How do the mothers surveyed experience the play activities manifested by children on the autism spectrum in the family environment?

The research used the phenomenographic method, which is a study “[...] that describes a limited number of qualitatively different ways in which a phenomenon is experienced, conceptualised or understood” (Hasselgren, Beach, 1997, p. 184). Phenomenographic research aims to help create an empirical description of the different kinds of ways in which we experience and become aware of the reality around us (Marton, 1981). The main aim of phenomenography is to find and systematise forms of thinking in terms by which people interpret meaningful aspects of reality, shared by members of a particular community (Marton, 1981). The result of the research conducted is a structured set of conceptual categories corresponding to the different

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\* Due to the open-ended character of the research and the lack of a rationale for its outcome, the scope of the search was refrained from being limited by the formulation of specific problems.



ways in which mothers experience play with their children on the autism spectrum. In the present research, the individual phenomenographic interview technique was used (Rzeźnicka-Krupa, 2007), also referred to as an individual semi-structured interview (Męczkowska, 2003).

This interview, unlike the categorised interview, which imposes structural rules and a specific way of interviewing, allows questions to be asked relating to the respondent's statements during the interview, which can facilitate understanding of the process of conceptualising the phenomena being studied (Rzeźnicka-Krupa, 2007). The interview was guided by a list of questions for the mothers participating in the study. The mothers' statements were recorded with their consent using a dictaphone. In addition, notes were taken during the research using cards and a pen.

The research, which is part of a larger project, was carried out in 2019–2020 in the Lubuskie region among parents whose children attended one of the educational institutions for children on the autism spectrum\*. Fourteen mothers of children with autism spectrum disorders and one father participated in the study. Closing the recruitment of parents into the study was associated with a state of theoretical saturation. It consists of the repetition by the study participants of information corresponding to the issues analysed and the fact that no new themes emerged. According to Sławomir Pasikowski (2015), to achieve theoretical saturation in phenomenographic research, 5–25 interviews are most often carried out.

The research, as suggested by the interviewees, took place in the therapy room at the facility the children attended, or at another suggested location. The interviewees were informed about the purpose of the research and the possibility of opting out of the interview at any time. It appeared that the issue of play for the parents recruited for the study was very important. This was evidenced by statements regarding parents looking forward to the moment of playing together with their children. The respondents consented to their statements being recorded.

The interviews conducted confirmed that the mother is the parent who is most often involved in matters related to the child's education and therapy. For this reason, the analysis of the respondent's father's statements was dropped. The verbal material was transcribed and then organised and numbered for anonymisation. The interviews were organised by assigning numbers to the individual mothers: "Mother.Number" (M.1–M.14).

The children of the mothers participating in the study had a statement of special education needs due to autism spectrum disorder and were aged 3–8 years. The age of the mothers ranged from 26–54 years. Most were mothers aged over 30. The wo-

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\* The city and the name of the institution attended by the children of the mothers surveyed were dropped to preserve full anonymity.

men surveyed lived in the city. 12 women declared being married and only two women lived in an informal relationship. The study group of women was diverse in terms of the number of children: 12 mothers had one or two children and two women were mothers of three children. Eight mothers had a university education and six had a secondary education. All mothers were economically active.

The empirical material obtained was organised and interpreted according to the following procedure observed in phenomenographic research (Franke, Dahlgren, 1996; Marton, Booth, 1997):

1. close reading of the text of the interviews and the recorded research material;
2. condensation, i.e., selecting the relevant passages from the statements of the respondents that are important in terms of the phenomenon being described, i.e., the play of children on the autism spectrum;
3. comparing the statements selected by the researcher in such a way as to show what the phenomenon of play of children with autism spectrum disorders brought into the conversation by the respondents, as well as how they experience it;
4. grouping responses according to emerging similarities and differences in the perceptions of play of children on the autism spectrum;
5. identifying the nature of the similarities and differences in the perceptions of play of children on the autism spectrum;
6. naming categories in a way that corresponds to the domain of the phenomenon described and the diverse ways in which parents understand and experience the play of children with autism spectrum disorders;
7. relating the categories identified to current theories about the play of children on the autism spectrum.

### **Play activities of children on the autism spectrum in the experiences of their mothers**

By analysing and interpreting the statements of the mothers surveyed, the following categories of play activity undertaken at home by children on the autism spectrum and their parents and siblings could be distinguished:

- *pretend play* – requires adult intervention;
- *manipulative play* rather than constructional play;
- *schematic play* – rules difficult for parents to understand;
- *relational play* – desired contact between parents and child;
- *motor play* – time spent together with the child.



Figure 1. Map of the play of children on the autism spectrum.

Source: Authors' own study.

Children on the autism spectrum show difficulties regarding pretend play and giving new meaning to objects during play. The category “pretend play – requires parental intervention” indicates that mothers understand the importance of this type of play and provoke children on the autism spectrum to play pretend. Children who are developing normally draw themes for pretend play from observations of everyday life. However, pretend play is not available to all children on the autism spectrum. Furthermore, prolonged interaction with the child by an adult is required for pretend play to occur. This is evidenced by the following statements:

With my son, there are no pretend games. I show him sometimes, but there have been no such games recently. What has happened is that he puts the phone to his ear. Then he pretends to say something. Once he pretended to feed

a teddy bear. Occasionally he drives the car, doing “brrrr.” There are no themed games, no pretend and dress-up games either. Occasionally he will wear a helmet like Bob the Builder, but he doesn’t pretend it, he just plays with the helmet because he doesn’t understand what it means to dress up (M.15).

Actually, she doesn’t pretend, she doesn’t play pretend, even if I show her she won’t do that. Sometimes she pretends that the squishy ball is a phone, but that’s only recently. It happened once that she approached her dad and said “hello” (M.10).

He’s had games with the phone, putting the phone to his ear and saying “mummy” or on command giving the teddy bear a drink or a kiss, but to do that on his own, no. It’s like we told him to because the ladies told us to do that, but he wouldn’t play like that on his own (M.3)

The statements confirm the theoretical findings that the play of children with autism spectrum disorders tends to be solitary, sensomotor and/or ritualistic and lacking in imagination. The play of a child with autism spectrum disorder involves dealing with objects in isolation. Co-occupation of a child on the autism spectrum with another playmate with the same object given a new meaning is difficult, and attempts to direct the child’s attention to the new meaning of a particular object often fail. For parents, this creates the impression that the child is not interested in what is being offered during play.

It is worth noting that, according to the mothers interviewed, pretend play should not be abandoned, as the child’s stimulation has the desired effect over time. In the beginning, the child follows the parents’ instructions for pretend play, which involves a lot of schematic play.

My son can pretend to talk on the phone, he says “There’s Jasiu,” “See you.” He pretends to talk to me on the phone, he’ll say something to himself then, but he’s recreating what I’ve told him in the past. He can also feed his teddy bear, but his play is reproductive, if I tell him to do it, he does it, but he thinks it’s a task, if I leave, he won’t play like that anymore, it doesn’t interest him, I don’t think he understands. If I leave, he takes the sound toy and always presses his favourite button (M.8).

With cars we show how he drives, he does the same, or with aeroplanes, how he flies. He imitated the car on the floor, with the plane, and how it flies. Or sound toys he sometimes wants to press together (M.3).

The following statements demonstrate that pretend play is possible for some children on the autism spectrum, which depends on many factors, e.g., the general level of mental and emotional/social functioning and susceptibility to adult influence during play.

She started pretending when I started pretending, for example, “but it’s good.” She’d get curious because I’d give it to a doll or a teddy bear and she’d come up and watch, not do anything. It was good for about three months. I’d give it and I’d say: “Oh, she’s had a bite and she’s still eating, why don’t you try it” and she’d be so curious about what I was doing there. It was like I was cooking one day and I was looking at what she was doing and she was trying to feed that block of hers. Not a doll, not a teddy bear, but a block and that was the first time she ever started to do anything at all, also it was the block. Later she moved on to playing with a teddy bear, a small rubber one. It went one by one, and the doll came last. The first was a feeding block (M.1).

Since the end of last school year, he has sort of woken up. He imitates a lot now, speech, activities, cleaning, vacuuming, he has started repeating everything. Cooking, dumplings he tries to make, imitates rolling, sticking together. He tries to paint like me, he throws letters after seeing the postman do it. He wants to listen to show tunes and then imitates what children do on TV. Mimicking everything came up last summer. Since September there has been even more. He also imitates drinking coffee, *Inka* making himself. Recently he pretended to talk on the phone as he held the shower receiver (M.9).

The mothers’ active interest in what attracts the child’s attention and in what the child is doing, as well as responding by communicating, and commenting on behaviour, brings the child into the process of interactional exchange and fosters the emergence of residual pretend play (Bokus, 1984).

According to the mothers interviewed, children with autism spectrum disorders are interested in many objects, including blocks. However, they are not able to create constructions that they invent, which was the basis for the distinction of the category “play that is more manipulative than constructive.”

She just stacks the blocks up and builds the tower, but she does it by herself, she doesn’t build with someone. I sit next to her and build, I explain, but she doesn’t pay attention to me (M.10).

The blocks, he likes to build the tower. When I sit with him, he even hands it to an adult and wants to build, but when I’m not there, he lays the blocks out and chatters something to himself, he is then out of touch (M.6).

He likes to push the blocks around, he will not build anything by himself (M.3).

We buy him different blocks, we suggest, I show him, I build a garage, I show him how a car goes, but he is not interested. There was a time when he liked blocks. When I now ask if he wants them, he doesn't. There was a period that he was putting up towers, so meaningless, not that there was anything concrete (M.7).

The statements of the surveyed mothers testify to the fact that blocks are mainly a source of sensory experience for children with autism spectrum disorders. Colour, shape and texture are important to them. Stacking, arranging or rearranging blocks are pleasant, schematic activities, usually performed alone. Every child, including those on the autism spectrum, should be included in the process of individualised development. The women interviewed do not deny the possibility for children on the autism spectrum to engage in construction games. Unfortunately, examples of children on the autism spectrum engaging in construction play are not often given by the interviewees.

He builds houses or cars out of Lego blocks. He watched his brother do it for a while and he plays it back the same way, but with time he gets better and better at it, sometimes he adds something of his own, and we show him that it can be done this way and that way, he doesn't seem to want to, but with time he does something there, just like we showed him before (M.5).

Recently he asked for Lego City, he needed help to build it. He had trouble building it, but he downloaded the Lego City app and there they showed how to build it. I don't know how he knows about this app. He used to build a tower or a gun out of ordinary blocks (M.9).

It is evident from the mothers' statements that the construction play of children on the autism spectrum requires the presence of a parent to show and encourage the piling up of blocks. Parents in construction play give meaning to the objects created, as their children's actions are not directed towards a specific outcome. These games also tend not to be social. In some children, elements of construction play appear. It is difficult for the mothers interviewed to explain the phenomenon of construction play emerging in child development.

In children with autism spectrum disorders, ritualistic play, devoid of imagination, predominates. Children repeatedly line up objects and love to spin objects. They take pleasure in arranging and organising toys in the same way. These forms of activity

for children on the autism spectrum are expressed in the category “schematic play – rules difficult for parents to understand.”

Because he likes most to be alone and drive cars, he lies down and watches the wheels turn. He won't play with cars with his brother, and he won't play with children either (M.1).

He also likes it so much that he will arrange the toys around him, sit in the middle and talk to himself. I take it away from him, because when he has too many toys around him, he gets stimulated, and then he doesn't look at me at all anymore (M.6).

She doesn't want to play, she just ranks the objects, e.g., pillow, teddy bear, etc. She used to put the toys in order when she was quite small, and then it went away and came back again (M.10).

He likes jumping and shouting the most, he is in such a trance then. He talks to himself, sings to himself, walks, and dances, he does this practically every day. He makes up words, he has his language. He is alone in this, he must not be disturbed, he is then satisfied (M.7).

Her games are variable, for example two weeks she plays with clay, she kneads it, then for two weeks it's a ball, it's very variable. For example, there is an electronic board with a talking carrot. She can press it all day long until she is interrupted (M.10).

Statements from mothers indicate that children on the autism spectrum prefer their favourite, repetitive activities and get annoyed when someone tries to interrupt them. Playing with favourite objects keeps children on the autism spectrum focused on performing familiar activities according to rules known only to them, which makes the activity repetitive, enjoyable and has a therapeutic function. It is worth noting that one of the important characteristics of play is the occurrence of rules known to the children and the enjoyment of playing (Hurlock, 1985). This type of activity is so absorbing for the child, who displays schematic activity, that it is difficult for parents to interact with the child (Wiekiera, 1995).

Another category of “relationship play – desired contact between parents and child” describes the play of children with autism spectrum disorders with other people, i.e., parents or siblings. It is worth noting that these are forms of play activity in which imagination is not involved and the attribution of conventional meaning to objects and activities does not occur. They are play activities that provide the playing children on the autism spectrum and the household with the pleasure associated



with, for example, running, hiding, making bubbles, and frolicking. It is worth noting that this type of play activity can also be observed in children who are developing normally in a relationship with their parents or siblings.

We play tag together, he likes to chase, to make bubbles. He likes to play peek-a-boo, and hide-and-seek, and cover his face with his hands or with a blanket. Then he smiles and interacts with us because in other games he does not want to (M.3).

Fooling around, lying down, kissing, frolicking. Son likes it when everyone is together. We also go to the playroom sometimes. He really likes it when we are all together. There is such progress that I wouldn't change anything. Son has gone through a big change. I wouldn't change anything. I feel that I am a mum. There was squealing, screaming, now he kisses me, hugs me (M.10).

Son is the one who likes to fool around with us, dance, and then he imitates us, we are in a relationship, sometimes he takes his hand and I already know him and I know what he wants to do or for his dad to drop him off. He looks at us normally and smiles, but Dad won't play with cars, he prefers to spin the wheels of cars (M.8).

When he comes into the house, the child simply doesn't let him take off his shoes and undress, he just shouts that he wants to go to the pony or play somewhere. It's always been like that (M.11).

He really enjoys fooling around, nuzzling, blowing into his tummy, into his neck, taking my head and wanting to, and then laughing out loud. I think it's one of the few times of the day when we are in a relationship (M.2).

From the statements of the mothers interviewed, the best games with their children are those in which they are in good contact with them. Mothers appreciate it when the child looks, smiles and encourages the relationship themselves. These are activities that parents and children eagerly repeat because they are enjoyable for both. Moreover, this type of play allows parents to establish a good rapport with the child.

According to the mothers, children on the spectrum are interested in their siblings but are not able to interact with them.

The boys are rather reluctant to play with each other. The son takes away his brother's cars, which is probably why they don't play together. In the yard they play separately, the son with autism rides his bike and his brother plays in the sandpit.

Sometimes he looks at his brother and does the same, but it's rare, for example when brushing his teeth, in play it's not (M.1).

It is hardly surprising, therefore, that mothers regard the shared bartering of a child on the autism spectrum with a sibling as a kind of play in which a relationship is established.

With his brother at home, they start rubbing, they laugh at it, and they get into a relationship. Otherwise, they do not play, although the second son would very much like to (M.8).

He plays with his siblings for a while, it happens as if he listens to what they are saying, previously he did not react at all (M.3).

By analysing and interpreting the statements, it is possible to conclude that parents and siblings engage in play activities that succeed in triggering smiles, joy, eye contact, and the desire to cuddle in children on the autism spectrum, something that is very much lacking in the relationships between them and their household members daily. Through relationship games, it is possible to trigger better contact in children on the autism spectrum, as well as concentration of attention, which demonstrates progress in development.

A lot of progress was made just by playing because, for example, we were making a circle on a piece of paper "Here I am," "There is no me," a kind of "a kuku" as if to get her to focus, to look at me. At first, she didn't pay too much attention, but I didn't give up and she finally started paying attention, peeking to see what I was doing there (M.1).

A playground or playroom, a swimming pool, or a trampoline are places where children with autism spectrum disorders feel comfortable and have the opportunity to experience stimuli that are a source of pleasant sensations for them. The criterion for distinguishing the category "motor play – time spent together with parents" was mainly the motor activity undertaken by children on the autism spectrum and their parents.

We like to spend time together in a way that makes our son happy and content, so we go to the pool. He loves the water, and games in the garden, like swinging, riding the scooter or jumping on the trampoline. Then everyone is happy (M.8).

We also like to play movement games together as we go to different playgrounds together, partly this allows us to play together and initiate games that he can join in and he will be happy. We would like our son to let us enter more into any play with him (M.6).

Motor games, pool, trampoline, fooling around (M.9).

In the sandpit, we do cupcakes, play ball, and jump on the trampoline. My daughter used to sit with her back to us, now it happens that she says “Mum, come,” “Dad, come,” it’s still good (M.10).

We like to be together in the playground. In the beginning, when we went to the ‘Dwarf Park’ and I watched her, she would stand aside, later on, she would accost sometimes: “Hello,” “What’s your name,” but it was just a moment. She would walk away and either look at the children and see what they were doing, or she would look and then do what the children were doing, so later on I knew that she was also imitating. I often went to that park so she would be with those children. But still, she was standing on the side, it wasn’t like she was running somewhere with them, somewhere she would play. But now there is a moment that she forgot herself and she flies with these children, already slowly, maybe next year she will play with these children? Maybe it will be better (M.1).

The mothers surveyed singled out forms of play that were related to motor activity and were a source of pleasure for their children. These statements indicate that parents found the most enjoyable time with their child to be spent at the swimming pool and playground. These types of places are conducive to engaging in play activities that do not require the child on the autism spectrum to communicate, have a shared field of attention or pretend to use imagination. Therefore, children on the autism spectrum can undertake such play individually or with parental involvement. It is noteworthy that children on the autism spectrum share space with non-disabled peers during the described games, who can act as role models for them, which is a source of social development. In addition, the described games give parents the desired sense of normality of having their child among non-disabled peers. Spending time playing in a place where the behaviour of a child on the spectrum is similar to that of his or her neurotypical peers makes parents feel comfortable.

## **Discussion of research results**

The collected research material confirms the results of other authors’ findings that the manifestation of disorders in children with autism spectrum disorder is primitive forms of play activity (Pisula, 2005; Prokopiak, 2020; Román-Oyola et al., 2018; Winczura, 2017). Difficulties in cognitive and social functioning characteristic of children on the autism spectrum due to abnormal development of theory of mind, central

coherence and executive functions are not without impact on the development of play activity (Howlin et al., 2010; Frith, 2016; Lam, Yeung, 2012; Pufund, 2020). In addition, limited physical and eye contact, lack of shared attention and atypical forms of communication in autistic children limit opportunities for role-play with peers and adults (Barton, 2015; Kasari et al., 2010; Pisula, 2005, 2016; Winczura, 2017).

Research suggests that the complex play that occurs in neurotypical children is not available to alumni on the autism spectrum. At most, it is possible to speak of the seeds of pretend play and construction play or their very simple forms. A lack of interest in pretend play on the part of children may cause parents to stop initiating it. The results of the study make it necessary to be cautious in generalising opinions about the play of children on the autism spectrum. The statements of the surveyed mothers show that there are some children with autism spectrum disorders in whom primitive pretend play started to appear, although its course was quite typical and reproductive, or was related to following pretend instructions. The mothers' statements testify that even the smallest progression in pretend play is an important element in the development of children on the autism spectrum. The distinction of the category "pretend play – requires parental intervention" should be justified by the fact that with the acquisition of pretend play skills, play activity develops in children on the autism spectrum. Pretend play is recognised as one of the first manifestations of the theory of mind development (Howlin et al., 2010). Construction play, in which spatial plans can be realised through imagination and thinking, is very difficult for children on the autism spectrum to achieve. It has been shown that arranging or grouping blocks or manipulating them is more attractive for the analysed group of children than deliberate construction (Winczura, 2017; Wolfberg et al., 2012; Szczypczyk, 2009). In such situations, parents are limited to accompanying their pupils during the activities of block manipulation or tower building and tearing down, which are characteristic of the initial developmental phase of construction play in neurotypical children (Brzezińska et al., 2016; Hurlock, 1985). Research shows that children on the autism spectrum are sometimes able to surprise adults and undertake construction play involving building with Lego blocks using graphic instructions. This means that construction games may be accessible to some children on the autism spectrum.

Schematism is evident in virtually all play of children on the autism spectrum (Wolfberg et al., 2012; Pufund, 2020). The identification of the category "schematic play – rules difficult for parents to understand" is related to the fact that, during this activity, children on the autism spectrum can do what is familiar, repetitive, and enjoyable and thus completely absorb them. Parents observing their child's activity in this way feel anxious because, through schematic play, the child is in his or her world and reacts to an adult's attempt to get involved by crying and shouting. According to the parents interviewed, schematic play can be used to show the child other ways to play, e.g.

when the fixation is to pour water, for example, bathing people or other objects can be thrown into the water, which can feel like exploratory play. Breaking up schematic play in this way requires a lot of persistence and patience from carers.

It has been possible to establish that play activities related to children's "I want" activities and in interaction with others and tinged with positive emotions constitute the category of "relationship play – desired contact between parent and child." Such play takes place with a great deal of involvement on the part of the caregiver, who most often has to be the initiator and puts a lot of effort into maintaining the relationship with the child on the autism spectrum. The activities of frolicking, playing and hiding are enjoyable for the players. Their value lies in the fact that children on the autism spectrum interact with their parents and share a common field of attention, which has a value in itself in terms of their development (Kruk-Lasocka, 2021).

"Motor play – time spent together with parents" provides children on the autism spectrum with many pleasurable sensory experiences. Children do not need complex social skills or imagination to run, slide or swing. The mothers surveyed perceive joy and enjoyment of motor activity in their children during these games. This type of play helps to direct children's attention to the other person and positive bodily sensations (Olechnowicz, Wiktorowicz, 2013). The categories "relationship play – desired contact between parents and child" and "motor play – time spent together with parents" confirm the importance of this type of play activity of children on the autism spectrum for their parents (Román-Oyola et al., 2018). Play activities allow parents to experience their effectiveness in interacting with their children, as well as to enjoy spending time together.

The mothers surveyed are aware that with children on the autism spectrum, play does not occur spontaneously as it does with neurotypical children, but requires a great deal of involvement on their part. The research confirmed the findings of other authors that children's difficulties in engaging in play harm parents and their sense of agency, and are the cause of much frustration (Román-Oyola et al., 2018). The interviewees' statements testify to the fact that, despite the children's reluctance, they tried to join in with their specific play activity and were responsive to show at the right moment how to play. This shows that the mothers were properly guided by the teachers (special educators) in charge of their children's education not to give up on initiating the process of play, which is an important factor in development. The environment, learning and gaining experiences influence the nature and course of developmental changes (Brzezińska, 2005; Frith, 2016). The mothers interviewed emphasised that in children on the autism spectrum, where the level of impairment is very high and intellectual and social abilities are lower, other forms of therapy should be used to be able to teach the child play activities at a later stage. Such views of the mothers surveyed are indicative of an ongoing transformation in therapy for children on the autism spectrum involving the linking of a behavioural concept, based on structured teaching, and a developmental-social or

developmental-relational one, in which play is treated as a natural means of leading to development (Schreibman et al., 2015; Waligórska, Waligórski, 2015). In the case of the play of a child on the autism spectrum, in contrast to a child developing normally, the initiative belongs to the adult, acting as a model showing how play can be performed. Toys, which used to be an object of stimulation for children, start to become meaningful and playful over time thanks to such activities (Kruk-Lasocka, 2021).

According to the mothers, although the play of children on the autism spectrum is far from that observed in neurotypical children, it should not be abandoned. Play should be initiated or maintained, as it provides a substitute for better contact between adults and children. In addition, the interaction of children on the autism spectrum with their parents during play, such as smiling or friendly gestures, allows a natural reading of emotional-social information. In this way, children acquire the skills to receive and transmit various signals. Reading other people's schemas and being able to develop self-awareness based on recognising one's schemas are fundamental to the development of the theory of mind (Howlin et al., 2010). In the play, children learn what being in a relationship with a parent is actually about (Greenspan, Wieder, 2014; Kasari et al., 2010).

## **Conclusion**

This paper is part of a stream of studies on the manifestations of play activity in children on the autism spectrum and the use of play in supporting their development. The importance of this approach is confirmed by Western authors demonstrating the possibilities of supporting the development of children on the autism spectrum through the use of imitation, pretend and play, which is characteristic of naturalistic-developmental-behavioural interventions. What emerges from the research is a picture of the specific play of children on the autism spectrum as an activity that differs significantly from the play of neurotypical children. The findings justify the need to sensitise parents to their involvement in the process of triggering play activities in children on the autism spectrum, which is not necessary in the case of normally developing pupils. Parental triggering of play activities in children on the autism spectrum should include accompanying them in natural situations to learn their preferred, very simple forms of play. Teaching strategies related to the behavioural method can also be used, for example, modelling, i.e., motivating children to imitate adults during play. For this, it is useful to use reinforcements that motivate children to act, favourite toys, and objects that make them feel positive emotions. The aim of the adult intervention should be to seek to widen children's shared field of attention and to increase susceptibility to adult cues that enable imitation of different activities (Schreibman et al., 2015).

The presented slice of research on the play activities of children on the autism spectrum is not free of limitations. The research was qualitative and focused on exploring mothers' experiences of play activities for children on the autism spectrum. The result of the exploratory research refers only to the study group of mothers whose children received education and therapy in a specialised institution. Individual educational and therapeutic programmes were developed for the children in the kindergarten, which also included support for the parents, including mothers raising a child on the autism spectrum, by special educators. The mothers surveyed were characterised by a high level of knowledge regarding autism spectrum disorders, and they appreciated the importance of play for their children's development, as reflected in the statements made. The participation of other mothers in the study, who would have been guided by the belief that their children on the autism spectrum do not play, or would have been less involved in their therapy process, could have given a different picture of play activity. Furthermore, recruiting mothers whose children on the autism spectrum were characterised by better cognitive and social abilities for the study would also be reflected in other conceptual categories of play. The outcome space reflected in the selection of such rather than other analytical categories is to some extent burdened by the subjectivity of the authors of the study, who wanted to explore mothers' experiences of their children's play. The limitation was tried to reduce already at the stage of the research proper by ascertaining what are the experiences, beliefs and intentions of the mothers declaring a certain position on their children's play.

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