



RESEARCH PAPER**Obsessive-Compulsive Tendencies among Students with Autism Spectrum Disorder and Their Classroom Management**

Dr. Amna Arif¹ Dr. Zahida Parveen*² Maryam Khizer Hayat³

1. Assistant Professor, Department of Education, University of Management and Technology, Lahore, Punjab, Pakistan
2. Assistant Professor, Department of Special Education, Division of Education, University of Education, Lahore, Punjab, Pakistan
3. M.Phil. Special Education, Department of Education, University of Management and Technology, Lahore, Punjab, Pakistan

Corresponding Author

Zahida.parveen@ue.edu.pk

ABSTRACT

This study was descriptive in nature and used the sequential explanatory mixed method research design. The objectives of the study were to investigate the obsessive-compulsive tendencies among students with ASD, highlight the differences in obsessive-compulsive tendencies based on their demographic characteristics, explore the classroom management strategies used by teachers of students with ASD who have obsessive and compulsive tendencies, explore the classroom management strategies used by teachers of students with ASD. The sample of the study was 200 special education teachers and psychologists. The sample was selected using a purposive sampling technique. Data was collected by using a self-developed questionnaire. The researcher also conducted ten interviews with teachers to know about the management strategies they use in the class. After collecting the data, quantitative data were analyzed by using SPSS and for qualitative, thematic analysis was used. The findings of the study revealed that the most common obsessive tendencies in students with ASD are hoarding, repetition of purposeless actions, and ordering things. The common compulsive tendencies were ritualized hand washing, excessive showering, cleaning of items, checking things, self-damaging or self-mutilating behaviors, and checking associated with getting washed, dressed, or undressed. Their management strategies include a controlled environment, task analysis, reinforcement, sensory activities, outdoor activities, token economy and individualized sessions. Future research can conduct the study to explore this phenomenon in-depth and devise some teaching techniques to manage such children in the classroom successfully and improve their obsessive and compulsive tendencies.

KEYWORDS

Classroom Management, Hoarding, Obsessive-Compulsive Tendencies, Repetitive Checking

Introduction

Autism spectrum disorder is a universal group of neurodevelopmental disorders comprising severe impairments in social interaction, communication skills, and restricted and repetitive patterns of behaviors and interests. They also resist change which perseveres over their lifetime. The autism spectrum has specific patterns of behavior that frequently interfere with daily functioning. These patterns of behaviors play an important role in limited preoccupations. Children with Autism spectrum disorder have different sensory interests and difficulties in coping. Several research studies have claimed that the

symptoms of OCD are also present in children with ASD (Jaisoorya, Reddy & Srinath, 2003).

Obsessive-compulsive disorder in children presents with diverse symptoms. Individuals have equal mental representation, and these initial childhood symptoms frequently manifested in boys. Obsessive-compulsive symptoms are frequent in girls. Adults are addicted to sexual obsessions. Infrequently children report their symptoms to peers (Reddy, & Srinath, 2003). Individuals aspect this indication as ego-syntonic, they consider them a little difficult. Certain conclusions need further research. Obsessive-compulsive disorder is diagnosed more frequently in childhood than researchers, with prevalence estimates of .5 and 4 per cent (Hanna, et al., 2002).

Literature Review

The occurrence of OCD can be diagnosed by observing the compulsive behaviour of a person. Continuously washing and cleaning hands and fear of contamination (Storch, May & Wood, 2012). An individual with OCD is noticed through OC behaviours. OCD individuals are habitual to rearranging objects such as books toys, repeatedly positioning cushions, pillows etc. People who find hoarding behavior difficult for them to dispose of old items such as old toys, newspapers and clothes etc.

ASD and OCD have similarities, investigating to what degree OCD and ASD disorders occur in families. Examined the comorbidity patterns of OCD and ASD sequent danger of these disorders. We analyzed the risks of autism spectrum disorders in offspring of people with obsessive-compulsive disorder and contrariwise. CBT of OCD children with ASD, OCD is an anxiety disorder defined as an invasive thought, worries and repetitive behaviours that quell anxiety. Functional impairment frequently contributes to increased social isolation and advanced narrow behaviour and interests (Tantam, 2000).

Obsessive-compulsive disorder and Autism spectrum disorder are genetically interlinked. The current study focuses that adolescents have symptoms of co-occurrence conditions of obsessive-compulsive and autism spectrum disorder. The young person with Autism spectrum disorder and obsessive-compulsive disorder equally received cognitive behaviour therapies. Young people with obsessive-compulsive disorder and an autism spectrum disorder showed betterment in functioning. Family Accommodation in Families of Children with OCD Being supportive, but detached emotionally, is unable to do so, can result in accommodation of the child by a parent (Storch, et al., 2012).

OCD students feel anxiety and stress daily. If unsolved academic issues expect school avoidance. Peer tutoring is the best source for OCD students. A peer not only helps in developing friendships but also helps in note-taking and completion of the task. Students with obsessive-compulsive disorder show embarrassing behaviors then seat they away from their peer. These disturbing behaviors may be distressful to peers (Carter, Evans, & Leckman, 2020).

Materials and Method

Research Design

This study used the sequential explanatory mixed-method research design. The researcher first collected the data from 200 teachers quantitatively. After that phase, the interviews were conducted by choosing 10 teachers randomly out of 200 teachers. The interview was about classroom management strategies.

Sample and Sampling Technique

A sample of 200 special education teachers, psychologists and 10 parents of children with autism was selected by using the purposive sampling technique (See table 3.1). The purposive sampling technique is used when the researcher chose only a specific group of people and does not collect data from the people who do not meet the inclusion criteria of the sample for the study. The inclusion criterion of the study is the following:

1. The teacher should be working or have worked with students having autism.
2. Parents of children with autism from the province of Punjab.
3. Autistic children must be under the age range of 5 to 8 years.

Table 1
Sample details for the present study

Sr #	Institute	District	Sector	No. of Respondents
1	Rising sun institute for Special Children	Lahore	Private	45
2	Government Shadab training institute for mentally challenged children	Lahore	Public	35
3	National Society of Autism, Lahore	Sargodha	Private	30
4	Government shadab training institute for mentally challenged children	Lahore		35
5	Government special education center	Hafiz Abad	Public	30
6	Government special education center	Pindi bhatyaan	Public	19
7	Government special education center	Sargodha		

Instrumentation

With help of a conceptual framework and literature, the researcher develops a Scale under the supervision of her supervisor. That scale is conducted in the local language comprising 58 items. The respondents will give their responses on the options: yes, no and maybe on the scale. A self-developed instrument was used to collect data from the teachers of students with autism. The Cronbach alpha reliability of the instrument was analyzed in SPSS. The analysis revealed that the reliability value was .808. For an interview, an interview protocol was created in which there were total of 3 open-ended questions.

Data Analysis

After collecting the data, the quantitative data were analyzed by using SPSS, IBM-22. The researcher used descriptive and inferential statistics. The management strategies used by teachers were also explored by conducting interviews. Thematic analysis was used to find out the common themes that emerged from the conducted interviews.

Results and Discussion

Quantitative analysis was run by using SPSS and for qualitative data, thematic analysis was used. The detail analysis along with the description is in the following:

Table 2
Demographic information of Sample

Variables	%
Respondents	
Teachers	29%
Psychologists	46.5%
Parents	24.5%
Gender of Teachers	
Male	64%
Female	36%
Teachers' Experience	
1- 3 years	27.5%
4-5 years	30%
6-10 years	20%
11-15 years	35%

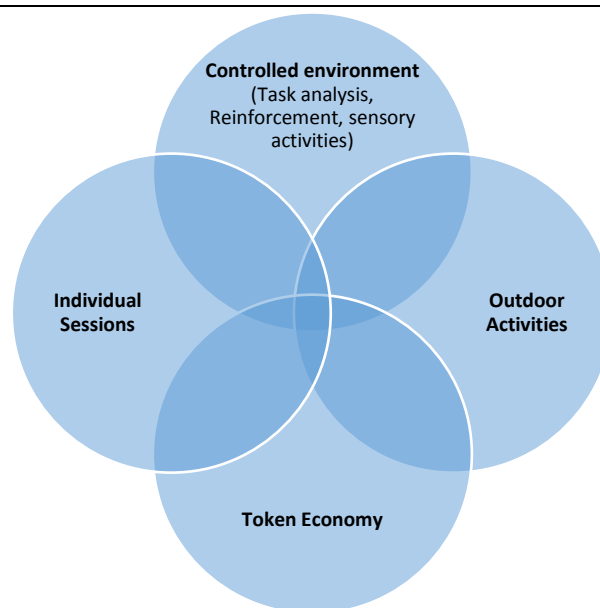


Figure 3: Classroom Management Strategies

In the present study, most commonly reported were concern with dirt, germs, certain illness, intrusive sounds, words, music, or numbers, fear of not wasting just the right things, excessive concern with right/wrong morality, lucky/unlucky numbers, colours, words, fear of losing things and fear might harm self. The previous study also supported the current finding as mentioned that people with OCD repeatedly count their daily life objects e.g. a number of lights, staircase etc. If they forget they count again. Some individuals have illogical fear about safety. They perpetually check the stove, doors windows etc. (Sigafos, et al 2009).

Obsessive-compulsive disorder is a neurological problem that affects one out of every 200 children in school. OCD has a significant impact on student's performance (Rodriguez, Thompson, Schlichenmeyer, & Stocco, 2012). Teachers must understand OCD and its manifestations in school settings to effectively interact with professionals. The existence of OC symptoms or tendencies affects the attention span of children who are studying in schools. Autism is not a necessity. Any child who develops the tendencies or symptoms of OCD can be disrupted and face diversion from his/her academic journey.

The literature discusses common OCD manifestations in schools and offers general and specific accommodations that trainers might use in their courses. It was also found that hoarding is the most common behaviour in children with Autism. The support from the previous research is there. An individual with OCD is noticed through OC behaviours. OCD individuals are habitual to rearranging objects such as books toys, repeatedly positioning cushions, pillows etc. People who find hoarding behavior difficult for them to dispose of old items such as old toys, newspapers and clothes etc (Storch, et al., 2012).

Another study endorsed the fact that continuously Washing and cleaning hands and fear of contamination is commonly present in children with an autism spectrum disorder. It was also found in the literature that hoarding did not respond well to CBT. Some promising data are showing that compared with other subtypes, participants with OCD (Abramowitz, Franklin, Schwartz, & Furr, 2008).

It was also found in the previous research that Obsessive-compulsive disorders look like ADHD. Children with the obsessive-compulsive disorder often have a problem concentrating in classroom activities due to their frequent obsessive thoughts. These students may try to avoid compulsive behaviors. If OCD children look toward a window or stare at a worksheet, teachers can understand behaviors such as distraction, disobedience and laziness (Adams, Badran, George, 2014).

Students with Obsessive-compulsive disorders have off-task behaviours. These behaviours may decrease when properly treated (March et al, 2013). As this study found the types of obsessions, it is also mentioned in the literature that adolescents and children ages 7 to seventeen have common obsessions such as aggression harm to self or others, religiosity and sexual urges (Storch, et al., 2012).

Obsessive Compulsive behaviors that are commonly encountered by clinicians are ordering, arranging, washing, praying, checking, praying touching etc. The presence of both compulsions and only obsessions is adequate to warrant. The prevalence of Compulsions in adolescents and children is higher than in the elder. The compulsion forces the child to act in an unnatural way and he/she is helpless and has to act the obsessions the way it is forcing him (Storch, May, & Wood, 2012).

This study was important to highlight the management strategies teachers' use when they have such children in their classroom who have autism and OC tendencies as well. There were some positive strategies and some negative. So, a good teacher or reader will deficiently opt for the positive strategies teachers used in the classroom.

Conclusion

In qualitative research, it is concluded that autistic students show different types of behavior in classroom such as hyper activity in which no sitting span, screaming, jumping, rocking body movements, sensory preferences and humming are included. These behaviours are very common in them. Whereas self-biting, attacking, echolalia, hand flapping and head banging are not found in every student. The conclusion made on the basis of quantitative research analysis is that most of the teachers are female having minimum teaching experience of 1- 5 years. Most of the students are equally below and average and very rarely few are above average in academic performance. These students are studying in 1-5 grades in which most of them are studying in 3-4 grades. Majority of them have moderate level of severity. Common behaviours of most of the students are repetitive, impulsive, inattentive, lack of socialization and acting out behaviours. Younger students are more impulsive whereas the older students have more behavioral issues. Younger students have more deficit in communication than the older one. More study

hours make the students more aggressive. Qualitative data revealed that differential behaviours and its management hinders the academic achievements of the children with autism whereas impact analysis of quantitative research showed that there is no significant impact of their behaviours in their academic achievements.

Recommendations

The following recommendation are furnished on the basis of the findings of the study:

1. Awareness campaigns for parents must be arranged by the school to provide awareness about obsessive –compulsive tendencies.
2. The training must be designed by psychologists on the management of such tendencies among students with ASD.
3. Initial screening must ensure the presence of such OC tendencies in children with ASD so the management plan can be made.

References

- Abramowitz, J.S., Wheaton, M.G., Storch, E.A. (2008) The status of hoarding as a symptom of obsessive-compulsive disorder. *Behaviour Research*, 46(9), 1026-1033.
- Abramowitz J, S., Franklin M. E., Schwartz S. A., Furr, J. M. (2003). Symptom presentation and outcome of cognitive-behavioral therapy for obsessive-compulsive disorder. *Journal of Consultancy Clinical Psychology*, 71(6):1049-57. doi: 10.1037/0022-006X.71.6.1049. PMID: 14622080.
- Adams, T. G, Badran, B. W, George, M. S. (2014) Integration of cortical brain stimulation and exposure and response prevention for obsessive-compulsive disorder (OCD). *Brain Stimulation*. 7(5):764-5.
- Carter, A., Evans, D.W., & Leckman, J. F. (2020). Ritual, habit, and perfectionism: the prevalence and development of compulsive-like behavior in normal young children. *Child Development*, 68 (5), 58–68.
- Hanna, G.L., Piacentini, J., Cantwell, D.P., Fischer, D.J., Himle, J.A., & Van, E.M. (2002). Obsessive-compulsive disorder with and without tics in a clinical sample of children and adolescents. *Depression and Anxiety*, 16, 59–63.
- Jaisooriya, T.S., Janardhan Reddy, Y.C., & Srinath, S. (2003). Is juvenile obsessive-compulsive disorder a developmental subtype of the disorder? Findings from an Indian study. *European Child and Adolescent Psychiatry*, 12, 290–297.
- Reddy, Y.C., & Srinath, S. (2003). Is juvenile obsessive-compulsive disorder a developmental subtype of the disorder? Findings from an Indian study. *European Child and Adolescent Psychiatry*, 12, 290–297.
- Rodriguez, N. M., Thompson, R. H., Schlichenmeyer, K., & Stocco, C. S. (2012). Functional analysis and treatment of arranging and ordering by individuals with an autism spectrum disorder. *Journal of Applied Behavior Analysis*, 45, 1–22.
- Storch, E.A., May, J.E., & Wood, J.J. (2012). Multiple informant agreement on the anxiety disorders interview schedule in youth with autism spectrum disorders. *Journal of child and adolescent psychopharmacology*, 22(4), 1044-5463. doi:10.1089/cap.2011.0114.
- Sigafoos, J., Green, V. A., Payne, D., O'Reilly, M. F., & Lancioni, G. E. (2009). A classroom-based antecedent intervention reduces obsessive-repetitive behavior in an adolescent with autism. *Clinical Case Studies*, 8(1), 3-13. doi:10.1177/1534650108327475
- Tantam, D. (2000). Psychological disorder in adolescents and adults with Asperger syndrome. *Autism*, 4, 47-62. doi: 10.1177/1362361300004001004