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A review of literature on the therapeutic use of drama to support communication with young autistic children

ABSTRACT

This literature review seeks to chart the current landscape of research related to drama, therapy and young autistic children needing support with communication. Beginning with key concepts to set out definitions for the review, I then demonstrate the search process as a scoping exercise and discuss the findings of two separate collections of studies: one of wider practices using drama as therapy, including group dramatherapy, and one collection of studies describing one-toone drama as therapy. The aim of the review is to gather the available evidence of whether drama as therapy can support the communicative strengths of young children on the autism spectrum, in particular those described as non-verbal or minimally verbal. I then seek to extrapolate how this might occur through presenting the outcomes of a theme analysis of seven case studies of one-to-one drama as therapy.

KEYWORDS

arts therapy non-verbal minimally verbal children theatre language nonspeaking neurodiversity

INTRODUCTION

Communication is a relational act that involves the sharing of thoughts, feelings, ideas and information with another. Many autistic children develop different approaches to communication which can be impacted by stress and sensory issues. This can give rise to challenges in how a child's efforts to communicate are regarded and understood. Inaccurate assumptions about an autistic person's strengths and capabilities are often drawn based upon their capacity for verbal communication which can have implications for their wellbeing and relationships. In the art form of drama, verbal communication is not privileged but rather dramatic space opens us up to a full multimodal experience of communication. Dramatherapy utilizes these principles in a therapeutic context with a focus on supporting the client. The aim of this literature review is to gather and present the available evidence of whether drama as therapy can support the communicative strengths of young children on the autism spectrum, in particular those described as non-verbal or minimally verbal.

Beginning with key concepts to set out definitions for the review, I then demonstrate the search process as a scoping exercise and discuss the findings of two separate collections of studies: one of wider practices using drama as therapy, including group dramatherapy, and one collection of studies describing one-to-one dramatherapy or psychodrama. I then seek to extrapolate how this might occur through presenting the outcomes of a theme analysis of the one-to-one studies.

KEY CONCEPTS

Communication as a relational act

Communication is described by Bogdashina as an act, comprising a sender, a receiver, something to transmit, an intention or desire to affect the other and a medium of transmission (2004: 27). Social communication, the sharing of thoughts, feelings, ideas and information with another person, can include acts of emotional expression, gesture, vocalization and speech. Communicative experiences from an early age are understood to be essential for learning how to initiate and attend in conversation, build joint attention and develop expressive language. Gratifying experiences of social interaction naturally reinforce the development of communication skills (Fuller and Kaiser 2020: 1695).

Definitions of autism

Autism is defined as 'a neurodevelopmental condition that affects the social and communication centre of the brain and the way an individual relates to people, situations and the immediate environment' (AutismNI 2022). The medical view of autism categorizes this condition as a 'neurodevelopmental disability or disorder' with a range of 'deficits' which are currently grouped as autism spectrum disorders and usually diagnosed between the age of 3 and 6 years, based on the DSM-V (2013: 31) or ICD-11 (6A02) diagnostic characteristics. However, the medical view is criticized for attributing as deficits in people on the autism spectrum human features which are susceptible to values related to temporal or cultural norms (Milton 2012: 4). In other words, the medical model of impairments or 'deficits' do not present a whole picture of a person on the autism spectrum. The neurodiversity movement draws on a social model of disability and ideas from biodiversity. This regards a person on the autism spectrum's perceptive experience as developing through a different distribution of interests, which could be defined as a strength or deficit depending on the agenda of the definer (Murray 2020: 22).

Although some argue that neurodiversity as an idea presents a sanitized view of autism which risks excluding those with significant language difficulties or intellectual disability (Kapp 2020: 2), what appears consistent is that autism is understood as a condition whereby people on the autism spectrum perceptually experience the world differently. In some cases, these perceptual differences can lead to significant challenges for the individual and their family.

While the medical model of autism fulfils a role in the field of medicine. I believe that in attempting to speak to the medical model, the arts therapies can draw upon the psycho-social and creative values at the root of their disciplines to enrich health practice.

The author's position

This literature review was conducted to inform my empirical research into dramatherapy with a view to studying the approach in line with more recent, best practice. While I acknowledge the protected clinical context of dramatherapy in the United Kingdom, I have framed the scope of the article 'drama as therapy', as I believe that dramatherapy can draw inspiration and technique from drama practice. My views have been influenced by the insight gained from professional experience both as a drama practitioner and a dramatherapist into how drama as therapy can offer a unique multimodal form of support for people. I have also learned from lived experience both as the sibling of an autistic individual how we have many ways of communicating when language is not shared and in my role as a parent of how communication appears to develop through non-verbal means first through the early social context a child is embedded in. I use both the terms 'autistic child or person', in support of the preferences of identity first language of many of those in the autistic community as described by Milton (2017: 4) and also 'person on the autism spectrum' in acknowledging a pluralist approach to language.

Developing communication on the autism spectrum

Human perception comprises both sensory and verbal/symbolic awareness, according to Bogdashina (2004: 46). Sensing is the primary mode of experience from birth. With time, verbal and symbolic modes of interpretation are said to prevail in most people, whereas people on the autism spectrum tend to use sensory-based interpretations of the world. Some typically developing people have more inter-modal systems, and some autistic people develop more capacity for verbal and symbolic interpretation as they grow (Bogdashina 2004: 46).

Studies suggest that autistic individuals present with differences in the early development of primary sensory-motor factors (Delafield-Butt and Trevarthen 2013: 2). These include oral motor skills, such as sucking, licking, lip smacking and coordinating vocalizations, and manual-motor skills, such as reaching, requesting, pointing and responding to joint attention, synchronizing with and imitating sounds and gesturing, which all affect the motor control that express contingencies in communicative conversation. Motor development influences an infant's approach to synchrony and coordination in intersubjective exchange and conversation and may affect their capacity to enjoy a shared experience (Gernsbacher et al. 2008: 2; Delafield-Butt and Trevarthen 2013: 2; Zampella et al. 2020: 3204).

Although autistic children may develop expressive and receptive language differently, many still acquire some language by 5 years of age, but research suggests that around 30 per cent have little or no functional language (Reinhartsen et al. 2019: 2448; Brignell et al. 2018: 7). The extent to which the child's language development is delayed or not accessible is never clear. Research findings also contradict assumptions that children on the autism spectrum who do not use speech fluently have intellectual or social deficits, and minimal language use in children does not necessarily indicate a low IQ (Tager-Flausberg and Kasari 2013: 3).

Expressive communication plays a role in eliciting responses from others, inviting opportunities for emotional co-regulation between a child and their caregiver. Co-regulation supports the development of strategies for externalization of stress and emotion (Ting and Weiss 2017: 686). The concern expressed by some families and professionals is that there are less favourable outcomes for children on the autism spectrum who do not develop communication, including a poorer quality of life both socially and functionally; also, in some cases experiences such as the frustration of not being understood can lead to increased aggression and self-injurious behaviour (Brignell et al. 2018: 7).

Differences in the development of communication can be greater in people on the autism spectrum, due to a divergence of perceptual experiences. While these differences may become individual strengths, intersubjective challenges of how a child's efforts to communicate are regarded by another as well as sensory and social contingencies can exacerbate potential difficulties. These in turn can influence the child's communicative development and well-being as they grow. This is understood as an effect of the double-empathy problem (Milton 2012: 883).

Autism, communication and drama

Conn encourages drama practitioners to consider 'whose communication is at issue?' in relationships between autistic people and other people, given that communication occurs with at least one other person (2019: xvii). She also argues that pathologizing difference risks overlooking what is helpful in a person's functioning (Conn 2019: xix). Sherratt and Peter argue that in a drama environment the triad of impairments upon which the medical model of autism is founded, developed by Wing (2002: 92) for diagnostic purposes, can be perceived as a triad of competencies 'when released through play and drama' (Sherratt and Peter 2002: 128). Recent research demonstrates that drama environments can, in fact, support different outcomes from the Autistic Diagnostic Observation Schedule, when diagnosing autism in children, aimed at building a strengths-based element to the diagnostic profile (Newman 2018). Drama is recommended by several professionals as an educational and therapeutic activity for autistic children to develop social skills, conversation skills, non-verbal communication and enjoyment in human contact (Williams 1996: 300; Bogdashina 2004: 245; Trevarthen et al. 1999: 162). Some people on the autism spectrum have described the social benefits they have gained through engaging in drama, such as the use of improvisational theatre to develop skills in spontaneity (Müller et al. 2008: 185).

Dramatherapy with autistic people described as minimally verbal or non-verbal

Dramatherapy is a state-registered health profession and psychodrama is a registered psychotherapeutic practice. Haythorne and Seymour describe the dramatherapists' perspective of drama as 'an implicit function within human development and part of the metaphorical vocabulary through which human beings express their thoughts and feelings' (2017: 5).

Some qualitative research surveys have been conducted on dramatherapy practice with autistic adults described as minimally verbal. Surveys recorded key themes relevant to practice, notably how dramatherapists sought new forms of relating with autistic 'non-verbal' clients through attuning to their body language, vocalizations and movement (Benbow and Jackson 2017: 122). With close attention to the client's communication style, the therapists aimed to discover a mutual interactive language on shared terms (Benbow and Jackson 2017: 127).

Also notable were five themes from Godfrey and Haythorne's research with parents and teachers of children on the autism spectrum receiving dramatherapy in schools of: Feelings: a safe place to explore; Peers: being included and making friends; Social skills: role play provides a short cut to learning about and practising social skills; Structure: predictability lessens anxiety; and Families: supporting the whole system. There were no negative comments about the dramatherapy recorded in this instance (Godfrey and Haythorne 2013: 25-26).

Porter conducted a survey interviewing Sesame trained dramatherapists who used the technique Movement with Touch and Sound MTS, when working with people described as having profound communication difficulties including some on the autism spectrum. Porter used grounded theory to understand their collective practice and draw out the theory of MTS in dramatherapy. She identified techniques of mirroring, mismatching and amplification in a dual process which involved the dramatherapist following the flow of the persons communication and knowing when to offer something new. Porter argued that this multimodal approach contains 'the synthesized use of these nonverbal modes of communication' (2014: 40).

In Lewis's recent chapter on attunement and the non-verbal autistic child, she stresses the importance of recognizing the bidirectionality of communication (2023: 367). She describes the role of attunement in the arts therapies specifically stating that 'in dramatherapy, this is achieved through cocreation of a narrative using imagination, therapeutic alliance, metaphor, play and a language of expression that works for the client' (Lewis 2023: 367).

Research gaps

This review is aimed at bridging a number of gaps in both autism and dramatherapy research. While there is a vast amount of research in the field of autism, the majority of studies have set aside autistic children who are considered as 'minimally verbal' or 'non-verbal' or who present as aggressive, largely due to greater difficulty with research compliance and standardized testing. The autism community seek to prioritize support to improve mental health and the development of communication skills of their members (Tager-Flausberg and Kasari 2013: 1; Green et al. 2022: 336). Dramatherapy research in general is described as very scarce when compared with other arts therapies (Feniger-Schaal and Orkibi 2020: 1; Bololia 2022: 1). There is limited documented empirical research in the use of dramatherapy specifically supporting communication skills of autistic people who are described as minimally or non-verbal.

METHODS

Literature review question

A question was formulated to systematically search relevant literature both within dramatherapy practice and across related disciplines of health and the arts. The PICO method was used to formulate the question for this review to limit bias and support search strategy (Rover 2018). What is the evidence of the effects of the therapeutic use of drama to support communication skills in young children on the autism spectrum?'

I performed an initial scoping exercise, extracting theoretical and technical themes and findings from studies that include drama, therapy, communication and autistic children under age 12.

Search strategy

Search terms were developed through checking the term 'Autism' against preferred subject headings of different fields of health-, medical- and artsbased platforms. I completed a systematic search of the following nine databases in May and June 2022. CINAHL, ERIC, JSTOR, Medline, ProQuest Complete, PsycInfo, Science Direct, Scopus and Web of Science. Further searches were conducted through the University search engine EBSCO, NADTA Journal, BADth Journal and the British Education Index.

Inclusion and exclusion criteria

For dramatherapy searches, peer-reviewed research articles or studies in the English language were included. These studies also included at least one child under the age of 12 on the autism spectrum, with or without other conditions, and reference to communication as an aim or outcome in the abstract or main body of the text. Studies with quantitative, qualitative and mixed methods were gathered. Grey literature was also sought under these

Studies of drama or theatre projects were included under the same criteria only if they had a reference to therapeutic aims or outcomes in the abstract or main text. A general search of papers on autism and communication was also conducted under the above criteria and checked for keywords 'drama' or 'theatre' within the abstract. Given the broad range of literature in the following areas and in order to source the most recent research, searches of studies in arts therapy (music, dance, art), play therapy and psychotherapy were sought under the same criteria with an additional date limit of studies from 2019 which directly referred to the use of 'drama' or 'theatre' in the abstract or main text. Studies of online therapy were excluded.

Initial searches through databases returned 1344 papers and additional records offered 107 results making a total of 1451. A total of 1159 papers were removed following deduplication and initial screening. Totally 291 papers were screened on title and abstract and body of text, as necessary. Thirty-five full text records were selected for analysis.

Data extraction

After the initial exclusion criteria was applied, I evaluated the remaining studies, grouping them on an excel spreadsheet according to relevance by

Table 1: Colourkey for datasets.

Colour Key		
Drama		
Arts Therapies (Art, Music, Dance)		
Occupational Therapy		
Dramatherapy Group Sessions		
Dramatherapy Individual Sessions		

population, age, themes of communication as an aim or outcome and the use of drama. I colour-coded the papers according to relevance, whether they referred to a study or not.

Thirty-five studies were kept: seven studies of the use of one-to-one drama as therapy (dramatherapy, drama therapy or psychodrama) and ten of group dramatherapy. There were two systematic reviews of dramatherapy, three of other arts therapies and one survey of dramatherapy. There were seven drama studies which included therapeutic ideas, three occupational therapy studies and three arts therapy studies. Two papers included case studies of both group dramatherapy and one-to-one dramatherapy (Lindkvist 1977; Gallo-Lopez 2012). These were treated as separate and data from each study were assigned to the relevant dataset.

I reviewed these texts more closely, with particular interest in the authors' descriptions of the communicative capacities of the children and the therapeutic use of drama, documenting these on a spreadsheet. The studies with participants having most significant communication difficulties were largely described as being 'minimally verbal' or 'non-verbal' and were studies of one-to-one dramatherapy or drama interventions, whereas the studies of group sessions were delivered with children largely described as 'high functioning', or with some or no description of communication difficulty. I resolved to bring focus to the studies of one-to-one sessions using drama as therapy (i.e. dramatherapy or psychodrama) by dividing the data into two sets charting the techniques, theories and findings of datasets 1 and 2 separately.

RESULTS

First, I present a summary of results from systematic reviews, and then I discuss the findings of the scoping exercise.

Systematic reviews and surveys

Six systematic reviews and one survey discuss the therapeutic use of drama to support communication in children on the autism spectrum.

Findings from systematic reviews, point to the strengths of dramatherapy as a modality that adjusts to the abilities and needs of people with cognitive difficulties and difficulties in verbal expression. This flexibility supports self-expression, imagination, communication and social skills development. The authors recognized a need to define mechanisms of change and components specific to dramatherapy, as the profession's lack of a unified protocol may affect research findings (Fenigar-Schaal and Orkibi 2020: 78; Bololia et al. 2022: 10).

Table 2: Dataset 1 consists of 23 studies.

		Drama				
Thorp, D., Stahmer, A. C. and	1005	'Effects of sociodramac play training on children with				
Schreibman, L.	1995	autism'				
Corbett, B. A., Swain, D. M. et al.	2014	'Improvement in social deficits in autism spectrum disorders using a theatre-based, peer-mediated intervention'				
Mehling, M. H., Tassé, M. J. and Root, R.	2016	'Shakespeare and autism: An exploratory evaluation of the Hunter Heartbeat Method'				
Newman, H.	2018	'Reimagining autism: How drama environments can aid the diagnosis and understanding of autism'				
Beadle-Brown, J. et al.	2018	'Imagining autism: Feasibility of a drama-based intervention on the social, communicative and imaginative behaviour of children with autism'				
Corbett, B. A., Ioannou, S. et al.	2019	'Treatment effects in social cognition and behavior following a theater-based intervention for youth with autism'				
Shefer, S. et al.	2019	'Benefits of medical clowning in the treatment of young children with autism spectrum disorder'				
Occupational Therapy						
Park, M.	2008	'Making scenes: Imaginative practices of a child with autism in a therapy session'				
Richards, L.	2021	'A 3-month interdisciplinary process drama program to build social skills in preschoolers with ASD: A feasibility study'				
Maas, C.	2021	'Improvisational theatre and occupational therapy for children with autism spectrum disorder'				
		Arts Therapies				
Durrani, H.	2021	'Sensory-based relational art therapy approach (S-BRATA): A framework for art therapy with children with ASD'				
Safonicheva, O. G. and Ovchinnikova, M. A.	2021	'Movements and development: Art-therapy approach in the complex rehabilitation of children with intellectual disorders, including autism'				
Thayer, F. and Bloomfield, B. S.	2021	'An evaluation of a developmental individual differences relationship-based (DIR®) creative arts therapies program for children with autism'				
	Gro	up Dramatherapy				
Lindkvist, M.	1977	'Drama and movement with autistic children'				
Miller, C.	2005	'Developing friendship skills with children with PDD: A case study'				
Tytherleigh, L. and Karkou, V.	2010	'Dramatherapy autism and relationship-building: A case study'				
Gallo-Lopez, L.	2012	'From monologue to dialogue: The use of play and drama therapy for children with autism spectrum disorders'				
Greene, J.	2012	'An educational psychology service evaluation of a dramatherapy intervention for children with additional needs in primary school'				
D'amico, M., LaLonde, C. and Snow, S.	2015	'Evaluating the efficacy of drama therapy in teaching social skills to children with autism spectrum disorders'				
Dooman, R.	2016	'Assessing the impact of early social behaviour of young children on the autistic spectrum'				
Naniwadekar, K., Ravi, A. and Sreevidya, M. S.	2016	'Impact of drama as a therapy for teaching social communication skills on children with ASD'				
Dyer, N.	2017	'Behold the tree: An exploration of the social integration of boys on the autistic spectrum in a mainstream primary school through a dramatherapy intervention'				
Pordanjani, S. R.	2021	'Effectiveness of drama therapy on social skills of autistic children'				

Table 3: Dataset 2 consists of seven studies.

One-to-One Drama as Therapy (Dramatherapy, Drama Therapy & Psychodrama)				
Lindkvist, M.	1977	'Drama and movement with autistic children'		
Ward, S.	1999	'Bulding a bridge: An exploration of the development of a relationship between a child diagnosed with autism and a dramatherapist'		
Caplan, K.	2006	'Drama therapy: A possible intervention for autism'		
Gallo-Lopez, L.	2012	'From monologue to dialogue'		
Pimpas, I.	2013	'A psychological perspective to dramatic reality: A path for emotional awareness in autism'		
Li, J., Wang, D., Guo, Z. and Li, K.	2015	'Using psychodrama to relieve social barriers in an autistic child: A case study and literature review'		
Ramsden, E.	2017	'Supporting agency, choice-making and the expression of "voice" with Kate: Dramatherapy in a mainstream primary school setting with a 9-year-old girl diagnosed with ASD and ADHD'		

Table 4: Systematic reviews and surveys.

Systematic Reviews & Surveys				
Godfrey, E. and Haythorne, D.	2013	'Benefits of dramatherapy for autism spectrum disorder: A qualitative analysis of feedback from parents and teachers of clients attending Roundabout dramatherapy sessions in schools'		
Fenigar-Schaal, R. and Orkibi, H.	2020	'Integrative systematic review of drama therapy intervention research'		
Amonkar, N., Su, WC., Bhat, A. N. and Srinivasan, S. M.	2021	'Effects of creative movement therapies on social communication, behavioral-affective, sensorimotor, cognitive, and functional participation skills of individuals with autism spectrum disorder: A systematic review'		
Aithal, S. et al.	2021	'A systematic review of the contribution of dance movement psychotherapy towards the well-being of children with autism spectrum disorders'		
Mayer-Benarous, H., Benarous, X., Vonthron, F. and Cohen, D.	2021	'Music therapy for children with autistic spectrum disorder and/or other neurodevelopmental disorders: A systematic review'		
Bololia, L., Williams, J. M., Goodall, K. and Macmahon, K.	2022	'Dramatherapy for children and adolescents with autism spectrum disorder: A systematic integrative review'		

Other systematic reviews overlapping arts therapy approaches include outcomes linked to drama, autistic children and communication such as Amonkar et al. (2021: 15) who included theatre-based interventions which reported medium improvements in social communication domains in theatrebased projects. Mayer-Benarous et al. (2021: 15) included a 2018 study by Zyga et al. where music and theatre techniques were combined in a musical theatre therapy project with 47 primary-aged children described as having 'ASD or a learning or attention disorder'. Significant changes in socio-emotional skills of the children were noted which include communication outcomes. In a systematic review of Dance Movement Therapy for children on the autism spectrum by Aithal et al. (2021), three of the nine studies reviewed utilized Jennings's (2002) Embodiment, Projection, Role (EPR) model of dramatic play development to inform their practice.

Discussion of techniques from datasets 1 and 2

Notable similarities across both datasets include the incorporation of movement and sensory motor play, projective play with objects and the creative use of objects to develop a playful relationship. Also notable was the use of nonverbal conversation through mimetics, improvisation, expressive amplification and gibberish. Dramatic devices, such as freezing the action, were noted in seventeen papers with some emphasis on fun, games and comedy in nine papers. There was a lesser emphasis on role play and enactment in dataset 2 possibly due to the context or the difference in communication capacities and needs of the children involved. The use of sensory objects is higher in dataset 2. It is possible that sensory motor activities, such as movement and physical contact, replaced some of the need for sensory objects and facilitated a sensory environment, as these feature highly as a technique in both datasets.

Discussion of theories from datasets 1 and 2

Both datasets share close similarities in their main theoretical influences, the most common being perspectives of child development and the use of developmental drama continuums in nineteen papers. This is followed by nineteen references to medical perspectives of autism, which are primarily deficit-based, although ten papers include autistic people's or relative's perspectives or views from the neurodiversity movement. Linking dramatic play to the development of social skills features in eighteen papers, while sixteen papers link this to the development of theory of mind. Psychodynamic theories feature in five of the studies.

Dramatherapy theories of sensory motor development, role theory, dramatic reality (or Play Space), linking neurological development and enactment, feature across both datasets. Individual dramatherapy sessions have less of an emphasis on social development and more on play development, building joint attention, agency and autonomy. This may be due to the considerable number of group sessions reported in dataset 1 which place an emphasis on social interaction between the children, whereas individual sessions emphasize the therapeutic relationship and development of the individual's capacity for expression.

FINDINGS

Findings from dataset 1

Of the 23 studies in dataset 1, thirteen provided quantitative outcomes. Eleven of the thirteen studies reported statistical improvement in communication domains, three of these reported mixed outcomes of some statistical change, depending on the measure used or the person reporting (i.e. parent, selfreport or researcher). Two papers reported no statistical change in communication domains. Of the qualitative results from the studies, seven reported general improvements in communication and nine reported that improvements in the children's communication skills persisted after follow-up or generalized to other contexts.

Findings of discrete qualitative descriptions of communication outcomes extracted from the studies include five reports of increased use of words to communicate during play/engagement, five reports of increased initiating conversation, four reports of increased listening or attending, three reports of increased reciprocal communication, four reports of tolerance of social contact and two reports of increased spontaneous communication. Also one report each of increased expressive language, sharing of interests and responsiveness in a drama environment. Greene reported a decrease in the children's self-report of capacity to make friends, although this is not a communication outcome per se (2012: 203).

Findings and analysis of studies from dataset 2

I now present an analysis of dataset 2, including an overview of the studies, a description of their methodologies and findings. The studies were all written by the practitioners themselves and range from 1977 to 2016. Two are from Canada, two from United Kingdom, one from Greece, one from United States and one from China. Six were delivered by training or qualified dramatherapists and one study was delivered by a psychologist, a nurse and special education teachers using psychodrama techniques. Two were dissertation case studies by trainee dramatherapists, three were taken from book chapters and two were journal publications.

Each of the seven studies concerned one participant. They consisted of four boys, aged between 4 and 5, and three girls, two aged 9 years old and one aged 11 at the start of her therapy. Six of the studies were qualitative and one used quantitative outcomes and parent feedback.

Findings from dataset 2

Qualitative findings

Findings related to communication extracted from the seven one-to-one studies are as follows. All seven studies reported qualitative improvements in the children's communication. Five studies reported improved communication skills persisting or generalizing to other contexts. Specific descriptions of communication included five reports of increased tolerance of contact (physical, eye or vocal) and four reports of increased expressiveness (vocal or physical). There are also three reports of increased initiation of contact, making choices, attending, responsiveness and conversation. There is one report of increased spontaneity in communication.

It is also notable that two of the seven authors consider that offering dramatherapy for autistic children attends to a gap in support left by more commonly used behavioural interventions, namely enhancing a child's expressiveness and flexibility in communicative exchange (Pimpas 2013: 58; Caplan 2006: 65), a similar argument is also posited in dataset 1 by Thayer (2021: 1) and Mehling et al. (2016: 108).

Theme analysis of dataset 2

Approaches and values

A theme analysis of dataset 2 was also conducted yielding the following reported Approaches and Values suitable for one-to-one dramatherapy with children on the autism spectrum to support their communication skills. Ramsden writes of the BADth code of practice that dramatherapists appreciate 'a variety of human experience and culture and the promotion of welfare through the expression of autonomy' (2017: 53).

These approaches and values may be helpful in informing the role of the dramatherapist in this context. With these in mind, I now present the results of the theme analysis.

Approaches

The dramatherapist:

- offers a supportive and facilitating relationship;
- attunes to child's presence and body language;
- adopts a playful approach (with fun and mischief);
- offers themselves as a responsive witness for the child (through verbal or non-verbal means);
- provides structure to support transitions (play-based rituals co-created from child's preferences) and
- includes parents when appropriate.

Values

- Dramatherapy is expressive and used for individual self-exploration.
- Uniqueness, choice and autonomy of the child are valued.
- One-to-one dramatherapy offers a bridge between the personal expression of the individual and the social world.
- Dramatherapy is flexible, relational and interactive.
- Play is developmental (but not necessarily linear).
- Awareness of social context and challenges of therapist and/or client is important.

LIMITATIONS

The broad scope of the research studies in dataset 1 mean that it is difficult to determine in all cases a clear link between the therapeutic use of drama and its benefit for communication skills in autistic children. Dataset 2 all have only one research participant, transparency of method and consistency of protocol is variable across the studies, yet they show consistency in qualitative outcomes despite geographical and temporal diversity. Degrees of change are noted but not measured in the qualitative studies, making it difficult to consistently quantify the changes across the studies in dataset 2.

DISCUSSION

This review has begun to map a previously uncharted field of evidence of the therapeutic use of drama with autistic children, to support communication, in particular those described as minimally or non-verbal. Cutting across disciplines to extract similarities and differences in practice findings has yielded more clarity on the potential for drama as therapy to support the children's natural communicative strengths.

There are notable distinctions between verbal language as communication and non-verbal communication. Opportunities for both verbal and nonverbal communication are valued in dramatherapy approaches. There is also a distinction between personal expression described in dataset 2 and social development described in many studies in dataset 1 which may correlate with the therapeutic context being one-to-one or group.

Particularly notable are Lindkvist's references to the tendency of autistic children to progress in blocks, developing strengths in memory and musicality and a capacity to offer and engage in metaphor when acted out, even if they do not use verbal language (1977: 2, 10). This is similar to the idea of a spiky profile Milton discusses which suggests that an autistic person can have

strengths and capabilities in certain areas but can also be subject to stress or sensory overload. The language capacities of an autistic individual can give rise to assumptions about their strengths and capabilities (Milton 2017: 11).

While many of the values of dramatherapy practice align with those of the neurodiversity movement, the theories drawn upon appear at times limited to verbal interaction. For example, many authors link drama and acting as aiding the development of theory of mind mechanism, or TOMM: however, TOMM has been criticized for its cognitive, and individualistic bias (Baron-Cohen 1997: 66; Milton 2017: 5). Jordan states that TOMM disregards the role of emotion in communication (1999: 77). Its use in conceptualizing non-verbal communication may be limited. The studies from dataset 2 are not so up to date, dating from 1977 to 2017. More recent research in the arts therapies draw on theories of intersubjectivity, attunement, object relations and enaction (Vaisvaser 2019; Hermans 2019; Durrani 2021b; Lewis 2023), which are relevant for dramatherapy research.

Pitruzzella argues that viewing humans through the enactive lens of intersubjectivity inverts the prerequisite of 'theory of mind' for relating' it is not that we understand others' inner worlds [...] because we are cognitively able to infer them; on the contrary, this cognitive ability can be developed because we are primordially connected to others' (2017: 50).

The common uses of body language and non-verbal conversation as a technique across the studies would be worthy of further research. The eleven references to 'Dramatic reality' or 'Play space' across both datasets and the techniques of structure and ritual which enable this suggest a unique set of techniques in dramatherapy which warrant further exploration.

Newman described the drama environments, which she researched to support strength-based elements in diagnoses of autism in children, as a 'liminal space between neurotypicality and neurodiversity [...] founded on individual interactions that are guided by the participant' (2018: 299).

It is possible that the liminal space of dramatic reality offers embodied communicative opportunities with a lower risk of misunderstanding than settings with more conventional expectations. This information may point to components specific to dramatherapy recognized as needing definition in the systematic reviews by (Fenigar-Schaal and Orkibi 2020: 78; Bololia et al. 2022).

SUMMARY

Communication has been described as a relational act which develops through a mutual combination of social, physiological and mental capacities to receive, interpret, share and express information. People develop communicative skills differently from infancy through their early relationships. These differences can be greater in people on the autism spectrum due to a greater divergence of perceptual experiences. Such differences can lead to challenges and risks in the development of communication between the autistic person and those in their environment, an effect of the double-empathy problem (Milton 2012: 883).

Results from systematic reviews and surveys indicate that dramatherapy is well suited to people with differences or difficulties in verbal expression, in that it provides a flexible approach to adjust to individual needs and abilities (Bololia et al. 2022; Fenigar-Schaal and Orkibi 2020). Other arts therapy reviews describe how drama and dramatherapy techniques and theories are incorporated into practice demonstrating medium to significant results in communication domains for autistic children (Aithal et al. 2021; Amonkar et al. 2021; Mayer-Beranous et al. 2021).

About 86% of the case studies analysed above using quantitative data reported statistical improvement in the children's communication skills with persistence and generalization of these skills reported, averaging at 40%. About 31% of the studies report the children's increased expressiveness or use of words to communicate and qualitative changes were reported across both datasets.

The challenge for dramatherapy now is to find ways to utilize and articulate the unique approach to communication that dramatic reality offers within a therapeutic context to create new opportunities for supporting the communicative strengths of autistic children.

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