

Summary of 2012-13 LUNCH Groups Programs  
June 14, 2013

## Overview:

This year we saw an increase in our total number of families from 34 to 52, spread out across five programs. Two new programs were added, 6-8 year olds and a second program for 8-11 year olds. The following data is based upon the results of our student, parent feedback, and results of our home generalization program (LUNCH Points).

Briefly, the program is based upon social learning and modeling principles, positive behavior management, cognitive behavioral intervention techniques, and developmentally-based models. Our general structure is that group members are dropped off by their parents twice monthly at either 4pm for the younger groups for two hours, or at 4:15pm for 2.5 hours. Group sizes typically range between 8-15 students, although our youngest group was very small, consisting of just four students (projections are for it to be for 8 students next year).

Our interventions for any particular child differ based upon the results of our initial assessment. However, we loosely identify students as falling into one of three discrete categories:

- **Internalizers:** These students tend to generally be more inhibited and can be more shy. They are usually well behaved and follow group rules. However they experience challenges meeting new people, entering into conversations, and will sometimes appear socially uncomfortable and isolate themselves. Common diagnoses include generalized anxiety, social anxiety disorder, selective mutism, depression, and autistic spectrum disorder.
- **Externalizers:** Students identified as externalizers are often gregarious and make friends easily. However, they can be impulsive, have difficulty with body boundaries, and sometimes are unaware when others have tired of being around them. It can be difficult for them to pay attention for sustained time periods and can often be selective about what they will or will not participate in. Children who are externalizers may exhibit tantrums, appear oppositional, and may have difficulty if they are not the center of attention or telling others what to do., Diagnoses include ADHD, Aspergers syndrome, oppositional defiant disorder, and depression.
- **Mixed:** We also see children in group who exhibit both externalizing and internalizing symptoms and behaviors.

The group members spend the first five to fifteen minutes socializing, monitored by staff (ratio 1 staff for every 3-5 group members for kid groups, 1:5 for the teen group). If a group member is observed standing off to the side, they are approached by staff who invites them to stand near members who are engaged in active conversation. Students

who converse are rewarded with raffle tickets. After the majority of the students have arrived or it is time to formally start the group they either head to the office (tween and teen groups) or go for a snack (kid groups).

### **Kid Group - Snacks**

Snack usually consists of heading into the local market, Gelsons. Sometimes they will be directed to the produce aisle and offered the opportunity to try fruits or other samples, while other times it is more free-form. Regardless, in choosing their snacks, they do so in groups, sharing with at least one another student. Seemingly simple, there are several skills developed in the course of this activity:

- Quick decision-making
- Accepting a disappointment (when no one else wants to share the item selected by a group member)
- Question-asking
- Sharing
- Hygiene and manners
- Conversational skills (they wind up sitting with each other, sharing the selected item)

Sometimes we go out to a restaurant and get appetizers or go out to a nearby yogurt shop; on occasions, we will head to the park and have everyone select what they wish to choose for their “picnic” (traveling items).

### **Tween/Teen Groups - Dinner**

Where as the younger groups immediately go for a snack, older groups had off to the office right away. Once there, they usually settle in for a few minutes and review LUNCH points, part of our home generalization program for parents.

## **Parent Feedback**

Survey responses were received from 75% of families whose children attended. Of those, 46% had attended the program previously. Eight-five percent of parents reported their children made major gains, an increase from previous group feedback. Areas where improvement was noted included the following (comments verbatim except for spelling errors and identifying information):

- Able to transition a little better from one activity to another.
- Although my child is still quick( meaning going from 0-60) to have an outburst, or outbursts, he is able, at a later point in time, come and apologize and try to talk about the behavior or behaviors.
- My child has benefitted from the summer and school year programs and has learned much more control over his temper and has better interactions with family and peers.

- My child is less demanding when requesting something. He asks calmly and nicely. He also consistently says "please" and "thank you".
- My child seems for more considerate of others responses to his words or actions and is forthcoming with an apology for any perceived transgression. He is far more compliant to requests. And, indeed, he seems to be maturing in his interactions.
- My child gets along much better with his peers at school, according to his teachers and administration. And still, he is not being invited on playdates, which is sad and confusing.
- By the end of the year, my child was much less likely to get upset if something wasn't going his way and much, much faster at recovering. Also he is genuinely concerned when others are having a problem - get hurt, sick, stressed out.
- He is able to calm himself down after being frustrated. Whereas before he would be upset and have a fit for hours.
- He is able to remember previous instructions and can recall events that happened days before. He engages in communication more often and he is able to express his thoughts.
- He is willing to try new foods. He attempts to engage with other kids.
- He recovers from a change much quicker, not running a way or having tantrums. He is more confident and social, saying hello and goodbye to friends and teachers in a timely correct fashion.
- He's has major improvement socially, emotionally, handling problems and communication.
- His communication and social skills have significantly improved with his peers.
- His patience for himself and others, controlling outburst, calming down when things didn't go well. Willingness to try new things, such as sports, food, movies, building things with step-dad, and even chores.
- Waits more patiently
- My child has been much better with the volume of his voice when talking. I rarely ask him to talk softer - especially inside - now.
- My child has made significant improvement in keeping track of his belonging. This change is apparent at home and at school. His teachers have been very impressed with his new found organization skills.
- Maintaining calm when others have meltdowns.
- Making plans with a friend.
- More on buying and handling money change. More confident on that aspect.
- Much better at getting up on time in the morning.
- Much better with homework and chores
- My child is much better at talking with peers who are not his best friend. He is better at welcoming others into a group and making sure everyone gets a turn.
- Recovering more quickly when things don't go his way
- He has made gains both at home and in the classroom in the area of controlling his emotions and recovering from "melt-downs" more quickly. He no longer leaves the classroom without permission and interacts more effectively with his classmates and siblings. He has made "play ground" friends and participates in the gardening club at lunch without prompting.
- She has improved in listening more of what she is ask what to do.

- She is more under control when things don't go her way. Although there are still outbursts, they are not as dramatic as they once were. Also, she doesn't use curse words any longer. She says you did not address this, but it happened - maybe the class, maybe just my lack of response.
- Understood that some of his behaviors are a problem and that he needs to be part of the solution: specifically, ending time with technology when asked; bringing home jackets, school books, lunch boxes; going to bed without arguing or asking to sleep in parents' room.
- We saw a significant improvement when he is transitioning from one activity to another, both at home and at school. His angry outbursts have become significantly less frequent.
- When he was asked the first time to get off his computer, I-phone, etc. he mostly listened.
- When observing my child in the videos at the parent dinner, I was surprised to see him take an interest in other children, play games appropriately, enjoy being the "center of attention" (in a good way) and even show leadership skills. (For example: Leading the group at laser tag to the monitors so they could watch their score come up.) At the toy store, I saw him pick up a mug that said "(another group member's name)" and show (that child).
- Willing to try new foods. Try his best to follow directions . Did his own homework w/o asking help. Try to make his own decision what kind of clothes to wear at night. Asking permission sometimes before to do his own thing.

Parents who did not report major changes occurring listed the following reasons for this:

- he has shown some improvement in social behavior but not much significant change in other area
- I think he is in that awkward adolescent stage. He isolates himself more than before. This was also his first year of high school and without an aide. Many changes for him and a lot more pressure.
- I think it's part an age thing and part because we started homeschooling in the middle of the year. He had a lot of adjusting to do just from those two things alone, never mind the fact that he's hitting tween years.
- none on a significant level.
- R.'s OCD often interferes with his improvement.
- This was a challenging year for A. and our family, because A. is finishing high school and we have had the challenging task of creating plans for the future, and Armand's medical condition has become increasingly scary because it is not yet stabilized. I feel I was not able to devote the time and energy to the program that would have helped A. make more substantive behavioral changes.