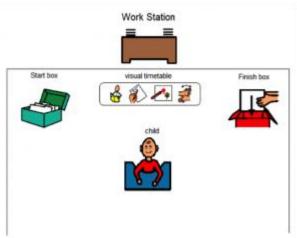


# TEACCH

The full name of TEACHH is Treatment and Education of Autistic and related Communication Handicapped Children. The approach is a Special Education programme designed in 1966 by researchers in the University of North Carolina.

# What is **TEACCH**?

TEACHH organises the physical environment and develops schedules and work systems for children, young people and adults. It builds on the strengths that many children with Autism Spectrum Conditions have (visual, detail and memory).



An example of a TEACHH work station:

The child/adult works from left to right. They have all their work in the start box. Each piece of work may have a visual timetable or sequencing strip to encourage independence. Therapy or teaching tasks are organised in order with a clear finish. When tasks are finished they are placed in the 'finished box' and the child/adult commences the next task. The TEACHH approach sets out clear and explicit expectations and it encourages independence.

# Why use TEACCH?

There are a range of benefits to using this approach, including (but not limited to) improving communication skills, as well as motor skills, cognition, perception and imitation.

### Who can benefit from TEACCH?

The TEACHH system was originally designed for children with Autism. However, it can be used with children with a range of Speech, Language and Communication Needs. Our therapists have successfully used the TEACHH principles with children and adults who have:

- Autistic Spectrum Conditions;
- Down Syndrome;
- Specific Language Impairment;
- Attention Deficit Hyperactivity Disorder;
- Learning Disability.

### Who can deliver TEACCH?

TEACCH can be delivered by anyone who has been specifically trained in the approach by a qualified Speech and Language Therapist.

### **Evidence for TEACCH**

Research into the effectiveness of TEACCH present conflicting findings.

### References

Eikeseth, S. (2009). Outcome of comprehensive psycho-educational interventions for young children withautism. *Research in Developmental Disabilities, 30*, 158–178.

Mukaddes, N. M., Kaynak, F. N., Kinali, G., Besikci, H., & Issever, H. (2004). Psychoeducational treatment of children with autism and reactive attachment disorder. *Autism*, *8*, 101–109.

Ozonoff, S. & Cathcart, K. (1998). Effectiveness of a home program intervention for young children with autism. *Journal of Autism and Developmental Disorders*, *28*, 25–32.

Schopler, E. & Reichler, R. J. (1971). Parents as co-therapists in the treatment of psychotic children. *Journal of Autism and Childhood Schizophrenia*, *1*, 87–102.

Schopler E., Reichler R. J., Bashford A., Lansing M. D. & Marcus L. M. (1990). *Individualized* Assessment and Treatment for Autistic and Developmentally Disabled Children, Vol. 1: *Psychoeducational Profile Revised* (PEP/R). Pro-Ed, Austin, TX.

Schopler, E. (2000). International Priorities for Developing Autism Services via the TEACCH Model-1. *International Journal of Mental Health*, *29*, 3–97.

Tsang, S. K., Shek, D. T., Lam, L. L., Tang, F. L., & Cheung, P. M. (2007). Brief report: Application of the TEACCH program on Chinese pre-school children with autism. Does culture make a difference? Journal of Autism and Developmental Disorders. 37(2):390-6.