

Chances are your child could be affected: Sensory Processing Disorder (SPD)

Lark Eshleman and Kyle Murray

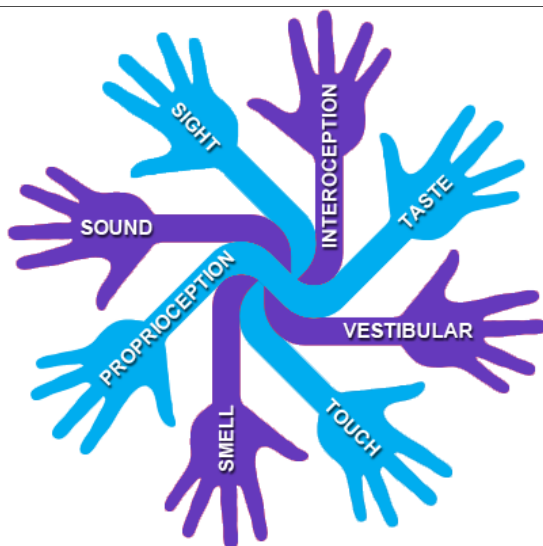
When Maureen Riley-Behringer adopted her now young adult daughter Tatiana from an orphanage at age 1, Tatiana's SPD challenges were evident very early. The 1-year-old had been under-stimulated and undernourished and was suffering from a bronchial infection when Riley-Behringer brought her home.

She had a flat affect until her nervous system "kicked in" and pretty much all she did was cry. In Tatiana's words, "It wasn't gradual, it was too much all at once."

After asking for help from several professionals, they were finally referred to an occupational therapist, who gave them hope and practical interventions: "Nice to meet you, get the potpourri out, shut off the music, and get the dog to stop barking, whatever it takes."

Understanding Our Senses

We all have senses (actually eight of them, not five, like we may have been taught in school). And we receive and process information from around and inside us, through these eight senses.



The five we all talk about are pretty easy. We listen to each other and to the world through our hearing/auditory sense. We see when it's morning and when it's night through our vision. Our sense of touch tells us to "QUICK! Let go!" of something that's too hot ... You get the picture.

But there are three "new" senses that have always been there, but are rarely talked about. We're now learning to

understand them as senses that help us to navigate through life.

For example, how do we know we're thirsty? Interoception lets us "read" our internal body and tells us, for example, that we need something to drink. Proprioception, on the other hand, helps us know where our body is in space; we might seek a lot of "bear hugs" from others, or regularly crash into things. When some of us have trouble calming down, our vestibular sense might have us hang upside down on the monkey bars until we feel more in control and calm.

But what happens when this information coming into our brains through our senses gets scrambled somehow, like coming in louder, harder or brighter than we can handle it? Or the opposite, and we can hardly hear, feel or see it at all?

Sensory Processing Disorder (SPD) is a condition in which the brain has trouble receiving and responding to information that comes in through the senses. For children with SPD, something that would be “just fine” for most of us is “too little” or “too much” for them.

One child with SPD, in a video called, “A Child’s View of Sensory Processing,” explains it like this: children with SPD are either “Big Cup” or “Little Cup,” and some children are “Big Cup” for some senses and “Little Cup” for other! “Big cup” means that the child is sensory seeking – always looking for sensory input -- always trying to fill the cup with stimuli, while “Little cup” means the child avoids sensory input, too much stimuli is making the cup overflow.

SPD manifests itself in any number of ways. Some of us “need” long sleeves or short sleeve shirts, regardless of the temperature. Or we have great difficulty walking barefoot, while others hate wearing shoes at all. As strange as it may seem, some of us explain through our behavior that we simply cannot handle having our head in an upside down or laying back position, or the opposite -- we always want to be upside down. Or get terribly anxious (even to the point of having melt-downs) when our feet are off the ground.

These are simple examples of what SPD behavior might look like; behaviors that seem “strange” might give parents a clue that their child is struggling to learn how to effectively process the kind of sensory information that we all receive on a regular basis.

An important thing for us as parents to remember is that if these behaviors seem to come from nowhere or are repeated in many different settings and at different times, and that the child seems genuinely upset about what is happening, they may be signals that a sensory processing evaluation is in order.

How do I know if my child might be affected by SPD?

SURPRISING FACTS

- A 2009 study suggests that 1 in every 6 children has sensory issues that get in the way of their daily functioning and learning (Article by *Child Mind Institute*).
- However, one professional study and multiple professional opinions show that at least 73 percent of children who have experienced some form of trauma have sensory issues that affect their daily functioning and learning.
- SPD often goes undetected due to symptoms that mimic those of other childhood disorders such as ADHD, learning disabilities, speech and language problems, poor auditory or visual discrimination, allergies, nutritional deficiencies and emotional imbalances (Article by *Focusing on the Family*).

Parents may want to look up the topic of sensory processing disorder to read more about it. Or, you may wish to use a Screening Tool, such as SPD Checklist- <https://www.sensory-processing-disorder.com/sensory-processing-disorder-checklist.html>

To get an idea of whether they want to explore further, here is a list of the eight senses and examples of what might go wrong with a child's processing:

TOUCH

Does your child get anxious with unexpected or light touch?

VESTIBULAR

Is your child always wanting to be spinning or turning upside down?

PROPRIOCEPTIVE

Does your child love roughhousing and/or wrestling play and has trouble stopping?

AUDITORY

Does your child notice minor sounds like the refrigerator humming or clocks ticking; do they cover their ears a lot?

ORAL

Does your child only eat hot or cold food; do they only eat certain brands of food?

SMELL

Is your child bothered by household smells like cooking?

VISUAL

Does your child have trouble making eye contact?

INTEROCEPTION

Is it hard for your child to know when they are full or if they are thirsty?

SOCIAL, EMOTIONAL, AND PLAY

Does your child struggle with having a meaningful two-way conversation?

Does your child easily get frustrated?

Does your child exhibit repetitive play for extended periods of time?

Where do you go for help?

Take your child to your doctor if you suspect something is going on. Your doctor can evaluate to rule out any physiological or neurological deficits. Once this is done, inquire about occupational therapy (OT) and a screening for SPD. OTs are equipped to function within a team of professionals to determine the need for specialized evaluation and intervention. They can identify and modify sensory and environmental barriers that limit performance and participation in everyday activities, as well as each child's individual strengths and each family's supports. In turn, they can then provide adaptive strategies to compensate to be able to function successfully when presented with motor and sensory factors during real life situations.

Parent Riley-Behringer encourages parents to walk next to your child during this sensory journey and the mother and daughter share additional insight about how occupational therapy helped Tatiana learn how to adapt to her new environment, see “Full Interview Notes with Maureen and Tatiana”.

Let's Get Practical: what can I try at home?

If you notice your child covering their ears a lot, limit the amount of “background” noise. Consider using ear plugs or headphones to block out noise.

If your child is covering their eyes or looking away a lot, consider letting them wear sunglasses.

If it looks like your child is getting too wound up, try a calming activity with your child sitting in your lap or nearby.

If your child seems to get upset over light or unexpected touch, work on getting him/her to allow you to start by rubbing their feet and working your way up to a hug.

If your child seems fidgety, try a stress ball or a small favorite toy that your child can keep in their pocket.

If your child is being too aggressive and seeking too much physical contact, try a weighted blanket/vest or let your child build a fort with couch cushions and climb in.

This Article has been published in the September/October issue of Fostering Families Today magazine.

About the Authors:

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