Understanding Sensory Processing Disorder

Do any of these scenarios sound familiar?

- While everyone is oohing and ahhing at the fireworks display, your child is screaming with eyes closed and hands over his ears.
- You get a call to pick your son up from a classmate’s birthday party because he “had a meltdown” when his friends were singing “Happy Birthday.”
- Your child cries and fights you every morning while getting dressed because her socks “hurt.”
- Your teenager leaves school without permission because the pep rally was “too loud and chaotic” and she “just couldn’t take it.”

These are just a few of the many examples of how everyday experiences, or even enjoyable experiences, can be excruciating for someone with Sensory Processing Disorder (SPD).

What is Sensory Processing Disorder?

Sensory Processing Disorder (SPD), also known as Sensory Integration Dysfunction (SID), is when your sensory system (taste, touch, hearing, sight, and smell) is out of balance or not regulated. Simply put, this happens when the sensory system either gets way too many sensations to process at one time or not enough. It causes difficulty in organizing and using sensory information in the brain, resulting in difficulty processing everyday situations. It impacts everything from movement, to emotions, attention, social skills, and other responses to sensory input.

Children with SPD can’t rely on their senses to give them an accurate picture of what is happening around them and don’t know how to behave appropriately in response. For example, a routine school fire drill can be a terrifying experience for a child whose brain isn’t properly processing the associated sound and movement involved in a fire drill. Without recognizing a child has SPD, the child’s fearful and frantic reaction to the fire alarm can be mistaken for “acting out for attention.”

Hypersensitivity vs. Hyposensitivity

A child with Sensory Processing Disorder can be either hypersensitive or hyposensitive.

Hypersensitivity occurs when a child is oversensitive to certain types of sensory input, while hyposensitivity is when a child is under-sensitive to certain types of sensory input.

Children who are hypersensitive will often avoid the sensation all together because it’s overwhelming, while a hyposensitive child might seek it out because it’s soothing.

Children may be hypersensitive to some sensations and hyposensitive to other sensations. They can also be overly sensitive one day and under sensitive to the very same

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sensation the next day. For example, a child may be craving spicy foods one day, while being unable to tolerate it the next.

A child with SPD may have difficulties in one or more of the following areas:

- Sensory exploration
- Emotional regulation
- Social interaction
- Motor skills
- Cognitive abilities
- Speech-language development
- Eating habits
- Grooming and dressing

For example, a child with SPD may be oversensitive to the sense of touch. This can result in an overreaction to any type of everyday physical contact such as an accidental bump in the lunch line. The inappropriate response or avoidance of physical contact can become socially isolating.

In contrast, a child who is under sensitive to touch may make excessive physical contact with people and objects. The child may touch other children too forcefully or inappropriately by biting or hitting.

Evaluations
You may be wondering how to determine if your child has sensory processing issues and when you should seek a diagnosis or therapy. Here are some questions to ask yourself:

- Do sensory issues get in the way of your child engaging in everyday activities or tasks? For example, does your child have an extreme reaction to common tasks like having his or her hair combed or taking a shower?
- Have teachers noted that your child is easily overwhelmed when the classroom is active or loud?
- Is your child frequently covering his or her ears or eyes?
- Will your child seek out quiet or dark places to calm?
- Is your child always moving and “crashing” into people and things without being aware?

As you may have already noted, all of the behaviors above could also be characteristics of a number of other issues. The good news is there are a variety of ways to have your child evaluated for SPD. You may want to start with your child’s pediatrician who can refer you to an occupational therapist. Other resources may include a birth to three program for younger children or your local school district.

Private mental health and social service agencies might also provide occupational therapy (OT) services or referrals.

What Can You Do?
In addition to working with a professional who provides SPD therapies, there are things parents can do to help children with SPD manage.

- Be sure to discuss your child’s sensory challenges with teachers, coaches, and even family members so that they can better understand and respond appropriately. Provide a written list of strategies that help your child. For example, seating a child in the front of the classroom may reduce the amount of visual stimulus and make it easier for teachers to watch for signs of sensory overload.

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If a child appears fearful or has an extreme reaction to an activity, avoid “forcing” participation and examine what sensory issue may be at play. What may seem like no big deal to someone who is regulated may be terrifying for a person with SPD.

Provide a sensory sensitive environment. For schools, is there a quiet place with dim lighting where a child who is overwhelmed can retreat? At home, is there a safe space with sensory rich activities for a child needing to jump, push, lift, pull, or crash?

Other Sensory Tools
Fortunately, there are now a variety of sensory products available for people with SPD including:

- Noise filtering earplugs
- Weighted blankets
- Pressure brushes
- Compression clothing
- Clothing without irritating seams or tags
- Textured chew tubes
- Balance discs
- Ball chairs
- Fidget foot bands

Your child’s occupational therapist can recommend tools that are right for his or her particular challenges.

Every Little Bit Helps
One Wisconsin foster and adoptive parent said that her daughter didn’t qualify for an SPD diagnosis, but they were still able to get a referral to see an occupational therapist.

“The OT was great,” she said. “She had some simple and seemingly commonsense activities that my daughter could do to help her at school and home. I was surprised that I didn’t think about them myself and was amazed to see how much they helped.”

She went on to say that she talked to the school and they were also agreeable in letting her daughter chew gum in class, for example, or take a break when feeling overwhelmed.

Sensory Processing Disorder can be difficult to diagnose since it can be mistaken for many other issues such as ADHD or even Oppositional Defiance. Although there is no “cure” for SPD, there are effective interventions. With a proper understanding, as well as early and consistent intervention, you can help your child find ways to better manage the day to day challenges.

Resources

From our lending library
- The Out-of-Sync Child, by Carol S. Kranowitz
- The Out-of-Sync Child Has Fun, by C.S. Kranowitz

Online Resources
- Understanding Sensory Integration
- Treating Sensory Processing Issues
- 7 Tips for Talking to Your Child’s Teacher About Sensory Processing Issues
- Sensory Integration Activities: Treatment That Works Skills That Matter
- Sensory Processing FAQ