Sensory Processing in Infants and Toddlers: Now that I know about it what do I do about it?

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Webinar provided by the Integrated Training Collaborative, with funding support from the Virginia DBHDS, American Recovery and Reinvestment Act (ARRA)

Tracy Miller

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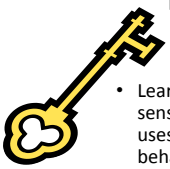
Sensory Processing in Infants and Toddlers

Now that I know what it is what do I do about it?

Sensory Processing

Sensory Processing

Key Concepts



- Learning occurs when a child experiences sensation, the brain interprets it, and then uses that information to plan and organize behavior.
- A deficit in the processing or interpretation of the sensation impacts conceptual and motor learning
- Our central nervous system (brain and spinal cord) can improve in the ability to process and interpret sensory input

Two babies same input

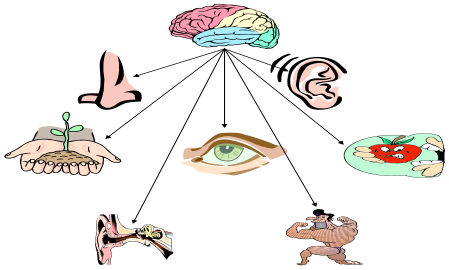
Sensory Processing Allows Us

- Explore and Play
- Complete daily chores
- Complete self-care tasks
- Complete school and work tasks
- Maintain focus and attention
- Manage our emotional states

Causes of Sensory Processing Dysfunction (SPD)

- Appears to be a genetic connection
- Possible causes include pre and post-natal environments
- 12-30% of the population
- Boys 3x as likely as girls
- Boys may be diagnosed more often because of disruptive behavior

Our Senses



Touch

- Receptors located through out the skin
- Discriminative touch tells us about the properties of things
- Protective touch tells us when are in danger

Red Flags Poor Touch Discrimination

- Hypo- sensitive
- Mouth objects past normal
- Touch hungry
- High pain tolerance
- Doesn't notice their shoes ate their socks
- Not aware they have food on their mouth
- Hyper vigilant visually
- Poor speech articulation
- Poor fine motor skills therefore poor play skills

Embedded Intervention Tactile Discrimination

Red Flags Poor Protective Touch

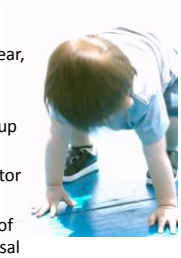
- Hyper-sensitive
- Tactile defensiveness/sensory defensiveness
- Babies arch away from caregivers
- Distressed over hygiene and grooming
- Do not like messy play
- Babies may crawl with fisted hands or curled toes
- Picky eater
- High frequent meltdowns
- Irritable, fussy, whiney miserable

Embedded Intervention

Protective Touch

Vestibular

- Receptors located in inner ear, semi-circular canal, the saccule, and the utricle
- Tells us if we are right side up or upside down
- Contributes to bilateral motor coordination
- Helps us manage our level of alertness, our state of arousal



Red Flags Vestibular

Hypo sensitive

- Sensory seeker
- Poor safety awareness
- Lack of fear
- Poor muscle tone and joint stability
- Difficulty with balance and protective responses
- Difficulty with activities that require bilateral motor coordination

Embedded Intervention

Hypo Sensitive Vestibular

Vestibular

Hyper-sensitive

- Gets car sick easily
- Avoids things that challenge balance
- More passive, clingy children
- Dislikes playground equipment
- Doesn't like changes in head position (diaper changes)
- Afraid of open stairs, escalators
- Lots of frequent meltdowns and falling apart

Embedded Intervention

Hypersensitive to movement

- Go slow
- Linear movement is more tolerable than any other.
- Do not impose

Proprioception

- Receptors located in tendons and joint, and muscles
- Tells us where our body parts are and what they are doing by sending information to the brain every time we move
- Provides us the feedback we need to modulate our force

Red Flags of Proprioceptive Dysfunction

- Break toys, crayons, etc. as they cannot grade their force
- Clumsy
- Crash into objects or persons
- May seek great quantities of jumping and crashing
- Bull in a china shop
- Have difficulty doing things without looking

Embedded Intervention

Proprioception

Benefits of developing sensory friendly environments for all children

- Improved ability to
- Play, participate, and learn
- Make transitions and go with the flow
- Experience fun and joy
- Decreased fear and anxiety
- Improved independence in functional activities
- Improved social interactions

Activities that increase alertness

- Movement
  - Playground, sit/spin, animal walks, stretches
- Tactile
  - Finger paint, light touch, shaving cream, squiggle pens, washing face with cool cloth
- Oral Motor
  - Crunchy foods, drinking through a straw, cold foods

Activities that calm

- Movement – slow rocking
- Reduce lighting – natural lighting
- Allow fidget toys
- Provide "womb" space
- "heavy-work" activities
- Sucking – pacifier, hard candy, slurpee
- Back rub
- Soft music

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Activities that organize

- Chewy foods – granola bars, licorice, cheese, dried fruits
- Hanging from chin-up or monkey bars
- Infants – flexed and swaddled
- "heavy-work"

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Preschool or home strategies

- Keep room organized and clutter free
- Avoid visual clutter
- Well defined work areas
- Natural lighting if possible
- Experiment with calming music
- Provide "womb" space
- Morning routine to organize and calm
  - Yoga, stretching and bending, jumping jacks
- Allow variety of positions for circle time
- Provide security of routine and predictability
- Structure transitions
- Pay attention to appropriate behaviors
- Provide support for circle or group time (fidgets, sitting support

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When to call an occupational therapist

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