

THIS IS WHAT SENSORY PROCESSING DISORDER FEELS LIKE TO PEOPLE WITH AUTISM

- [April 17, 2018](#)
- [Casey Nighbor](#)



April is [National Autism Awareness Month](#), the best time to highlight the benefits of bodywork for autism spectrum disorder.

In this article, we'll look at [CranioSacral Therapy](#)'s effect on sensory processing disorder, a condition experienced by most people diagnosed on the autism spectrum.

By definition, sensory processing and integration is the ability to feel, understand and organize sensory information from the body and environment.

Such information is received through the sensory systems, which include: vision, touch, smell, taste, hearing, as well as systems for knowing about gravity and position of body parts and movement.

As special-needs individuals' advocate Anna Jean Ayres, PhD, OTR, said, "Over 80 percent of the nervous system is involved in processing or organizing sensory input; and thus, the brain is primarily a sensory processing machine."

For most children, [sensory processing develops](#) in the course of ordinary childhood activities.

Motor planning (praxis) is a natural outcome of the process, as is the ability to adapt to incoming sensations. But for some children, sensory processing does not develop efficiently.

Sensory Processing Disorder: A Glitch in the CNS

When sensory processing disorder occurs, it is as though there is a glitch in the central nervous system. The brain cannot analyze, organize or connect (integrate) sensory messages easily or adequately.

Somewhere, in the circuitry of the sensory processing machine, there is a short. This short may be with inefficient sensory intake, neurological disorganization or inefficient motor, language, or emotional output.

Therefore, the individual with sensory processing disorder will not respond to ordinary sensations in an ordinary way.

Not all individuals with sensory processing disorder are autistic. However, for most who are diagnosed on the autistic spectrum, [there are challenges in sensory processing](#). Many experience oversensitivity to sounds, sights, movement or touch. Others may appear to under register or seek certain sensory stimuli.

Many on the spectrum are easily distracted or impulsive.

Often, there is a delay (or even absence) in speech and language development as well as motor skills (incoordination).

This contributes to problems with social interactions and emotional insecurity. Frequently, individuals with autism have difficulty understanding the emotions of others while themselves suffering extreme anxiety and emotional outbursts.

This is How Autistic People Describe Their Senses

Temple Grandin: “My hearing is like having a sound amplifier set on maximum loudness. My ears are like a microphone that picks up and amplifies sound. I have two choices: turn my ears on and get deluged with sound; or shut my ears off.

“I am like Data, the android man on Star Trek, the Next Generation. As he accumulates more information, he has a greater understanding of social relationships. I am a scientist who has to learn the strange ways of an alien culture.

“Whatever the reasons, I, as an autistic person, reacted in a fixated behavior pattern in order to reduce arousal to overstimulated nervous system.”

Sean Barron: “I loved repetition. Every time I turned on a light, I knew what would happen. When I flipped the switch, the light went on. It gave me a wonderful feeling of security because it was exactly the same last time.”

Bill Donovan: “I learned to talk at 4. I didn’t learn to communicate until 11 or 12.”

Darren White: “I was rarely able to hear sentences because my hearing distorted them. I was sometimes able to hear a word or two at the start and understand it. Then the next lot of words sort of merged into one another, and I could not make head or tail of it.”

Donna Williams: “I had just come from another classroom where I had been tortured by sharp, white fluorescent light which made reflections bounce off everything. It made the room race busily in a constant state of change. Light and shadow dancing on people’s faces as they spoke turned the scene into an animated cartoon.

“I wanted to understand emotions. I had dictionary definitions for most of them, and cartoon caricatures of others ... I also had trouble reading what other people felt.”

How CST Helps

One of the primary tenets of [CranioSacral Therapy](#) is that we “blend and meld” (a phrase used often by John E. Upledger, DO, OMM (1932-2002), the developer of CST) with the client in order to perceive what their body needs to facilitate positive change.

CST is a light touch manual manipulation that allows us to palpate at a very subtle level—even to perceive tension and dysfunction in the meninges, brain centers, nerve tracts and spinal cord.

Because “all behavior is communication,” As Ayres said, our first task is to listen and observe and to meet the individual where they are. In this way, CST practitioners establish the trust of an individual with autism.

For them, given their sensory processing challenges, the world can be an overwhelming, anxiety-producing place.

Anything unfamiliar (new places, new people, new situations) can be very frightening and elicit a fight, flight or freeze (sympathetic nervous system) response.

Gaining their trust is of primary importance in order for them to feel safe.

The need to feel safe is an innate human condition. [In a CST session](#), our expectation is *not* to coerce, coax or force an autistic individual into positions convenient to us. Instead, we allow them to posture on the table however they are comfortable.

We may need to allow them to sit or even stand at the table in order for them to feel comfortable to be treated.

Always, we allow them to play or engage with whatever object helps them calm or organize their nervous system. Being touched by a stranger requires all the self-calming they can muster, and we can facilitate that.

In the [Upledger Institute International](#)’s CranioSacral for Pediatrics curriculums, we are taught a variety of strategies for helping to facilitate that calm and safety.

Since the craniosacral system is the one system that houses the entire central nervous system, it is possible to facilitate corrections of some of the glitches that have resulted in sensory processing disorder.

Using the bones as handles to release tension in the intracranial membranes and dural tube—the membrane sac which houses the spinal cord—we can help make more efficient neural

connections so that both sensory and motor components of the central nervous system function better.

Often, because of CST's ability to balance the autonomic nervous system, we CST practitioners can facilitate a much calmer, relaxed (parasympathetic) state in which the autistic individual can then focus and interact more successfully.

We can work directly, through the membranes and soft tissue, to facilitate better communication between body and brain, brain and body.

All systems—neurological, musculoskeletal, respiratory, digestive, circulatory, endocrine—can be helped by CST. We have the potential to help the autistic individual with sensory processing disorder make sense of their senses.

About the Author



Rebecca Flowers is an instructor for CranioSacral Therapy specializing in pediatrics. Flowers established the first Pediatric Occupational Therapy outpatient rehabilitation program at Ball Memorial Hospital in Muncie, Indiana. Later, utilizing both CranioSacral Therapy and Sensory Integration, she established the first alternative Occupational Therapy clinic in Indiana, where she employed physicians, nurses, physical and occupational therapists, massage therapists. She was asked by John E. Upledger, DO, OMM, to join the [Upledger Institute International](https://www.upledgerinstitute.com/) clinic staff and to become an instructor in 1998.

<https://www.massagemag.com/sensory-processing-disorder-autism-cst-88859/>