

## **Impacting Children: CranioSacral Therapy and Pediatrics**

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Working with children is an art as well as a science. Using CranioSacral Therapy (CST) on a child can be especially gratifying as a qualified CST practitioner can facilitate significant changes that can positively improve the quality of a child's life. It's an exciting experience – but it requires more from the therapist than working with an adult.

Working with a child requires a different set of skills, among which are keen observation and refined palpation techniques. For example, the craniosacral rhythm of a child, as well as messages from the child, is much more subtle than those from older clients. Therapists must sharpen their sensitivities and perceptual skills so they can appropriately respond to these messages. Above all, they must know how to blend and trust and allow the child to be self directed, which will enable the child to feel safe.

Having an awareness of how children develop physically, emotionally, psychologically, and socially, and having an understanding of the neurology behind this developmental sequence is also very helpful - especially when there's been a "glitch" in the process. What might these glitches be? What do they look like? Knowing the "science" is important in understanding the child you're trying to help. Also knowing how to work with the dynamics of the family as a unit is an integral part of the child's healing process.

"The inner wisdom of a child is every bit as intelligent as that of an adult," said Dr. John E. Upledger, an osteopathic physician and surgeon credited with developing CranioSacral Therapy (and one of the founding columnists for *Massage Today*). "It knows what its body needs to correct its dysfunctions. It knows why those dysfunctions are present. It has a softer voice than the adult inner wisdom; therefore the CranioSacral therapist must learn to listen more carefully. Once the connection is made, all the information you need will be forthcoming."

The gentle nature of CST, as well as the premise of following the child's inner wisdom makes this modality a safe mode of treatment. It is very effective for newborns and babies with misshapen heads, and newborns who do not latch on well to nurse. Children all along the spectrum of autism and learning disabilities, including ADD, ADHD, dyslexia and discalcula also respond well to CST. Other neurological problems that have benefitted from CST include children with cerebral palsy, plagiocephaly, synostosis and seizure disorders.

The number of children who have Sensory Integration Dysfunction/"Sensory Processing Disorder" (SPD) is growing and therapists have reported positive outcomes from the use of CranioSacral Therapy. In fact, its success has led to our adding a class specifically for CST Applications to Sensory Integration to the Upledger Institute International's Pediatric curriculum. Other common dysfunctions and disorders often seen among CST pediatric clients include genetic anomalies, chromosomal defects, allergies, immune system dysfunction and structural issues.

Due to the CST system's intimate connection with the autonomic nervous system (ANS) - the CranioSacral system consists of the membranes (meninges) that surround the brain and spinal cord and surround and traverse the ANS - CST has been quite helpful with abused and molested children. Below is a letter from Connie Treis, RN, LMFT, the founder of a mental health clinic who has suggested CranioSacral Therapy for many children, as she has been very impressed with the outcomes:

"As a Licensed Marriage and Family Therapist, I have worked for 20 years with Attachment Disordered Children using many interventions, (i.e. Psychoeducation for parents, Play Therapy, Eye Movement Desensitization and Reprocessing, Cognitive Behavioral Therapy and nurturing holding guiding the parents. All of this has been done as a collaborative approach in conjunction with the work of Psychologists, Psychiatrists, Medical Practitioners, Social Workers, other LMFT's, school personnel, the juvenile justice system, child welfare system, parents and extended family members (birth, adopted and foster care). All of these means have been very effective, however, when I began to refer some of the children for CranioSacral Therapy, a whole new shift began for treatment. Reactive Attachment Disorder is the most severe form of attachment disorder problems. It means that the break in the bond with the primary attachment figure took place within the first two to three years of life. Children exhibit various symptoms from frozen watchfulness to tactile defensiveness and aggression. All of these children have difficulty trusting and fear being touched and loved, even though they need both desperately to grow up to be resilient, loving adults. Because of CranioSacral Therapy's deep respect for the Inner Physician, the requirement to first ASK at both an inner and outer level BEFORE touching, and the very light touch following the Significance Detector, these children, when they are ready, can achieve deeper and more permanent healing because they are being asked and then allowed to be in control. It is not the only therapy I would recommend for every child. A good psychological and medical work-up should precede the work. These are to rule out differential diagnoses, both medically and psychologically. A mental health professional well-versed in the work with RAD should stay integrally involved, both to monitor the child's psychological welfare and to maintain support and interconnection with the parents."

CranioSacral Therapy has such far reaching effects and is easily blended with other modalities, which makes it an optimal therapy for children. What a privilege and honor it is to be able to help children improve their health and quality of life as well as their families'. CranioSacral Therapy is enabling children to enjoy a healthier life now, and to look forward to a brighter future.

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