Sensory Processing Disorder
By Stacey Lotshaw

An Introduction

- Do you have a child who is in constant motion—swinging, spinning, running, jumping, hopping, and so on?
- Do you have a child who struggles to get up and move—lays around, fatigues easily, does not want to join activities, etc.?
- Is getting your child dressed a battle—seams are bothersome, something itches, fabrics feel funny, you dread trying to put their socks on, and so on?
- Does your child cover their ears when there are loud noises?
- Does your child seem overly controlling and throws tantrums without reason?
- Do you avoid situations to prevent meltdowns and tantrums?
- Have family and friends provided advice: “If you only _____,” “All you need is more discipline,” “You are too lenient,” etc.?
- Have you ever felt like you are not a successful parent? That you are doing something wrong?

If you answered yes to any of these questions, then your child may have what is known as Sensory Processing Disorder (SPD). This series of articles will allow you to learn about and explore what SPD is and how this disorder manifests itself. You will learn about my family’s personal struggles with SPD as my 11-year-old daughter was diagnosed at the age of four. My goal is for you to learn something that can help your child or another child you know learn to better cope in this sensory-rich world in which we live.

A. Jean Ayres, Ph.D. was an occupational therapist in the 1950s and 1960s and was the first to identify sensory problems and develop a way to assess them in children. To put it in easy-to-understand terms, SPD is the inability to use information received from one’s senses to efficiently and effectively perform daily life skills (Karnowitz, 2005). For all of us, our nervous system takes in information so that we can process it, organize it, and then deal with it. Any disruption in this process can lead to problems with motor coordination, sleeping, eating, paying attention, learning, and/or emotional and social functioning. The problem with trying to describe SPD is that it can cover a myriad of symptoms and is more of an umbrella used to label any issues with the senses.

There are three main categories of SPD that fall under the main umbrella: Sensory Modulation Disorder, Sensory Discrimination Disorder, and Sensory-Based Motor Disorder. Sensory Modulation Disorder affects the person by making it difficult to regulate how they respond to a stimulus. They can be over-responsive, under-responsive, or seek extreme amounts of the input. Sensory Discrimination Disorder affects the person’s ability to know where input is coming from, how strong the input is, or if the input should even be paid attention to. Sensory-Based Motor Disorder affects how a person is able to function
in the physical world. They may be clumsy, have poor coordination, or may even be unable to sit up straight with good posture. No matter the category, it all comes back to our senses and how we interact with our world. (SPD Life, 2016)

When thinking about our senses, most of us only think of the main five: sight, hearing, taste, touch, and smell. In addition to our five environmental senses, we have three internal senses. We have a vestibular sense that uses our inner ear to help us balance and coordinate our movements—it is how we sense gravity and why we get dizzy when we spin ourselves in circles for long periods. We have a proprioceptive sense. This body system allows our brain to know what our muscles and joints are doing; it allows us to move fluidly and, if necessary, quickly. Our final sense is interoception, or our body’s sense of our internal organs and how they are functioning. This is the sense that tells you when you are hungry, when you are thirsty, when you need to use the restroom; it also helps to regulate heartbeat and breathing. A child with SPD can have a system that is over-responsive, defensive, or hypersensitive or a system that is under-responsive or hyposensitive. (Karnowitz, 2005)

My youngest daughter was born five weeks early, weighing just 4 pounds, 11 ounces. For the most part, she hit her early developmental milestones within a few months of their expected ages. When she was about five years old, I knew she was experiencing fine motor delays and could not do fine motor tasks at a level that was expected. As a special education teacher, I knew something was wrong, and I pushed my pediatrician for a referral to an occupational therapist (OT) so that I could get her the help she needed. Little did I know what door this would open, and I had no idea about the adventure I was starting. During the intake, the OT noticed what an active child I had and asked if we could do some sensory profiles, as she truly believed that Beka was struggling in other areas beyond her fine motor skills. I had no idea at this point about SPD or any of the signs or symptoms. The only sensory issues I knew about were the ones that were displayed by children with autism, and my child had not been diagnosed or labeled as autistic. I had taught students who had autism and sensory issues but had never thought of it in terms of a stand-alone disorder.

Doing a sensory profile on my daughter was an eye opener. I had not realized that refusing to wear any type of sock or shoe because the seams were bothersome was something that a lot of other people dealt with. As I completed the questions, I began to realize that my concerns over seemingly unrelated behaviors may, in fact, be related behaviors after all. Beka was a difficult child who melted down at any change in routine, and I perceived these tantrums as a way to control her environment and get what she wanted. She craved adult contact to the point where she was coming into our bed every night and sleeping with my husband and me. She loved to spin and swing for hours on end. She refused to go into places with loud noises and would often cry or run away if pushed to do so. I began to view these issues from a different light once they were put into the context of being part of a sensory disorder. I was going to have to learn it all on my own.

At the end of the OT evaluation, my daughter was diagnosed with fine motor delays, visual/motor integration issues, and a sensory processing disorder. She was labeled as being a sensory seeker—someone who cannot get enough sensory input and is in constant search of sensation. Many of these
children are seen as hyperactive, but in reality, they are like the robot on Short Circuit—all they want is “input.” They can also be very exhausting. Along with being a sensory seeker, Beka is auditorily defensive and hypersensitive to clothing and certain textures. You will learn more about our challenges as we have additional articles, but needless to say, raising her has been anything but boring or mundane.

My advanced degrees and years of teaching special education had taught me nothing about SPD. The first place I turned was to the Internet and Amazon. One book stood out above all the others: The Out of Sync Child by Carol Stock Kranowitz, M.A. Within its pages, I found my daughter, and at the same time, I found that I am not alone, that I am not a bad parent, and that with a lot of hard work and patience, life could be different—we could find our “normal.”

I know all of this may be as confusing to some of you as it was to me when I first began my journey. Over the coming weeks, we will be exploring each sense in depth and will look at what to do if you think your child may have sensory issues. We will also explore further what SPD is and what it is not—what other disorders it often walks hand in hand with and what it means when it is a stand-alone disorder. SPD is often misunderstood and misdiagnosed, but hopefully these articles will help you to better understand this often complex and life-altering disorder.