



Fetal Alcohol Exposure: Time to Know, Time to Act

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Parent Support Strategies

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SENSORY INTEGRATION: HOW THE BRAIN RECEIVES AND PROCESSES INFORMATION

“Sensory integration is a developmental process which takes place in the human nervous system and it occurs in each of us” (Snider, page 2), Sensory integration involves our ability to take in information through the senses, organize the information in the brain, and use it to respond appropriately to a particular situation. This process involves the central nervous system, which consists of the spinal cord and the brain.

Sensory integration begins at conception, and continues from infancy through childhood. Although the process of sensory integration is matured and integrated at approximately eight to ten years of age, sensory integration continues to be refined throughout our lives.

Dr. Jane Ayres originated the theory of sensory integration. Although her research is most commonly identified with learning disabled children it has been extended to include many other forms of neurobehavioral development including cognitive impairment, autism and sensory defensiveness. Many substance exposed children and children with FAS/E have sensory integrative problems similar to those originally identified by Dr. Ayres.

According to Dr. Ayres, the brain must properly process information from the senses to develop concentration and organization, self-esteem, self-control, academic learning ability, the capacity for abstract reasoning, and specialization of each side of the body and brain.

All the information or input we receive about our bodies and the world comes through our sensory systems or senses. In her book, Sensory Integration and the Child, Dr. Ayres describes the sensory process like this:

Sensations flow into the brain like streams flowing into a lake. Countless bits of sensory information enter our brain at every moment, not only from our eyes and ears, but also from every place in our bodies. The brain must organize all of these sensations if a person is to move, learn, and behave normally. The brain locates, sorts, and orders sensations somewhat as a policeman directs moving cars. When sensations flow in a well-organized or integrated manner, the brain can use those sensations to form perception, behaviors and learning (figure 1).

When the flow of sensations is disorganized, Dr. Ayres says life becomes like a rush hour traffic jam. The brain has difficulty organizing and sorting the sensory information it is bombarded with making it difficult for a child to focus on what is important at the time (figure 2). For example, the child does not pay attention to the teacher because he cannot screen out irrelevant background stimuli such as the sound of a heater fan or the feel of clothing on skin.

In the book, How Does Your Engine Run: A Leader's Guide to the Alert Program for Self-Regulation. Williams and Shellenberger use the analogy of a computer to describe sensory integration. To write a letter, someone types information into a computer (input), the computer processes the information and prints the letter on a piece of paper (output). If the letter contains a mistake, it might be due to a typing error but if the typing is correct, then you might consider an internal processing error in the computer.

The central nervous system acts like a computer. The central nervous system receives input through our senses – what we see, hear, touch, taste and smell as well as how we experience movement and gravity. The brain sorts and organizes this information to generate our output – the ability to learn, move, express our feelings, and behave normally (figure 3).

If the brain is not sorting and organizing information correctly, a child may have problems paying attention, learning, moving and interaction with others and the environment. Vision and hearing assessments can determine whether the child is registering sensory input correctly. If these assessments do not find any difficulties receiving sensory input, the problem might be how the brain processes the sensory information it receives. Through clinical observations, sensory history, and standardized tests, a multidisciplinary team can help determine how the child's brain processes sensory input.

Children who cannot process and use the sensory input they receive often have a sensory integrative disorder. The disorder may include sensory defensiveness, which is an inability to tolerate various kinds of sensory stimulation. Many children with FAS/E have difficulty processing, organizing, and coping with the sensory information that constantly bombards their systems. They cannot perform the many complex tasks necessary for learning and everyday functioning. This can cause a child to be disorganized, confused, out of control, emotionally upset, angry and difficult to live with.

It is not always easy to live with and love children. It is sometimes less easy to live with and love children who have a sensory integrative disorder. Sensory defensiveness can cause children to seek to control every aspect of their lives by being excessively demanding, unreasonable, explosively angry, picky and bossy (Trott, page 1).

Often teachers say children with sensory integrative disorders have behavior problems but the behavior is only a symptom. The real problem is that the children's brains cannot make sense of the world. Their difficulties are sometimes compounded by unstable socioeconomic and emotional circumstances, including attachment and bonding difficulties.

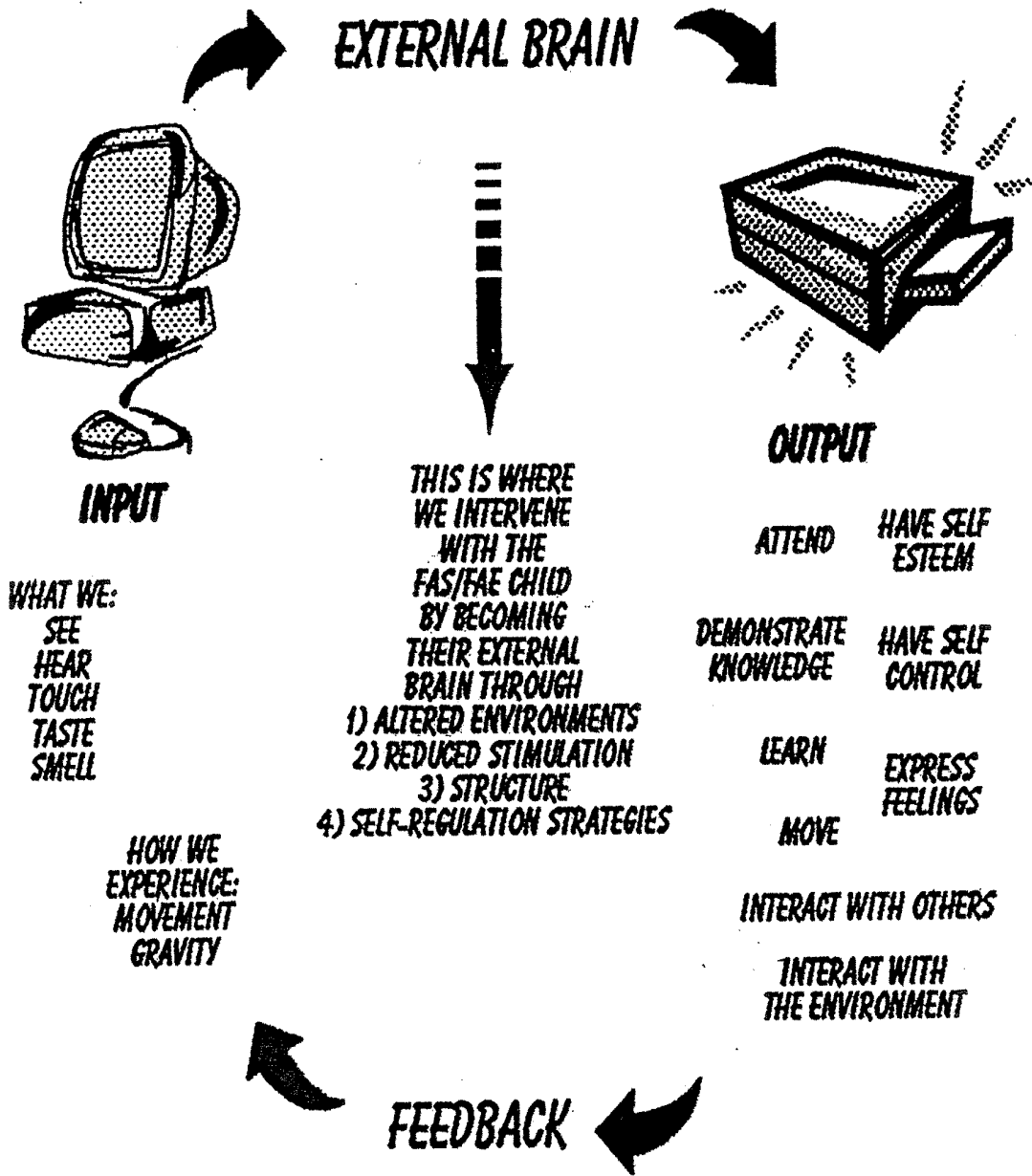
These children need help and support to prevent their lives from becoming so frustrating, confusing and unpleasant that they give up trying to learn, behave, and interact appropriately. It is easy to give them the message that they can do nothing right: we often forget to let them know how special and important they are.

Understanding that sensory integrative disorders result from central nervous system damage and the brain's inability to process information properly often leads to increased acceptance and understanding that the child is not always deliberately trying to defy or hurt you and others. This involves a refraining of our perceptions, a paradigm shift in our conventional way of thinking.

THE EXTERNAL BRAIN: STRATEGIES TO HELP CHILDREN COPE WITH SENSORY PROCESSING DIFFICULTIES

Dr. Sterling Clarren, an American expert, says children with FAS/E often need an external brain to help them cope with and understand the world around them. The Interagency Program has expanded Dr. Clarren's external brain strategy in our work illustrating where we can intervene with external brain strategies such as environmental modifications, reduced sensory stimulation, structure sensory modulation techniques and self-regulation. These external brain strategies can help substance-exposed children make better sense of the world, thus improving their behavior and everyday functioning.

We have found the external brain strategy useful with children who have sensory processing difficulties because it helps the brain process sensory information more effectively through interventions such as environmental modifications, reduced sensory stimulation, structure and self regulation. The external brain helps a substance-exposed child make better sense of the world and see it as a safer, more predictable place.



HOW SENSORY INTEGRATION WORKS

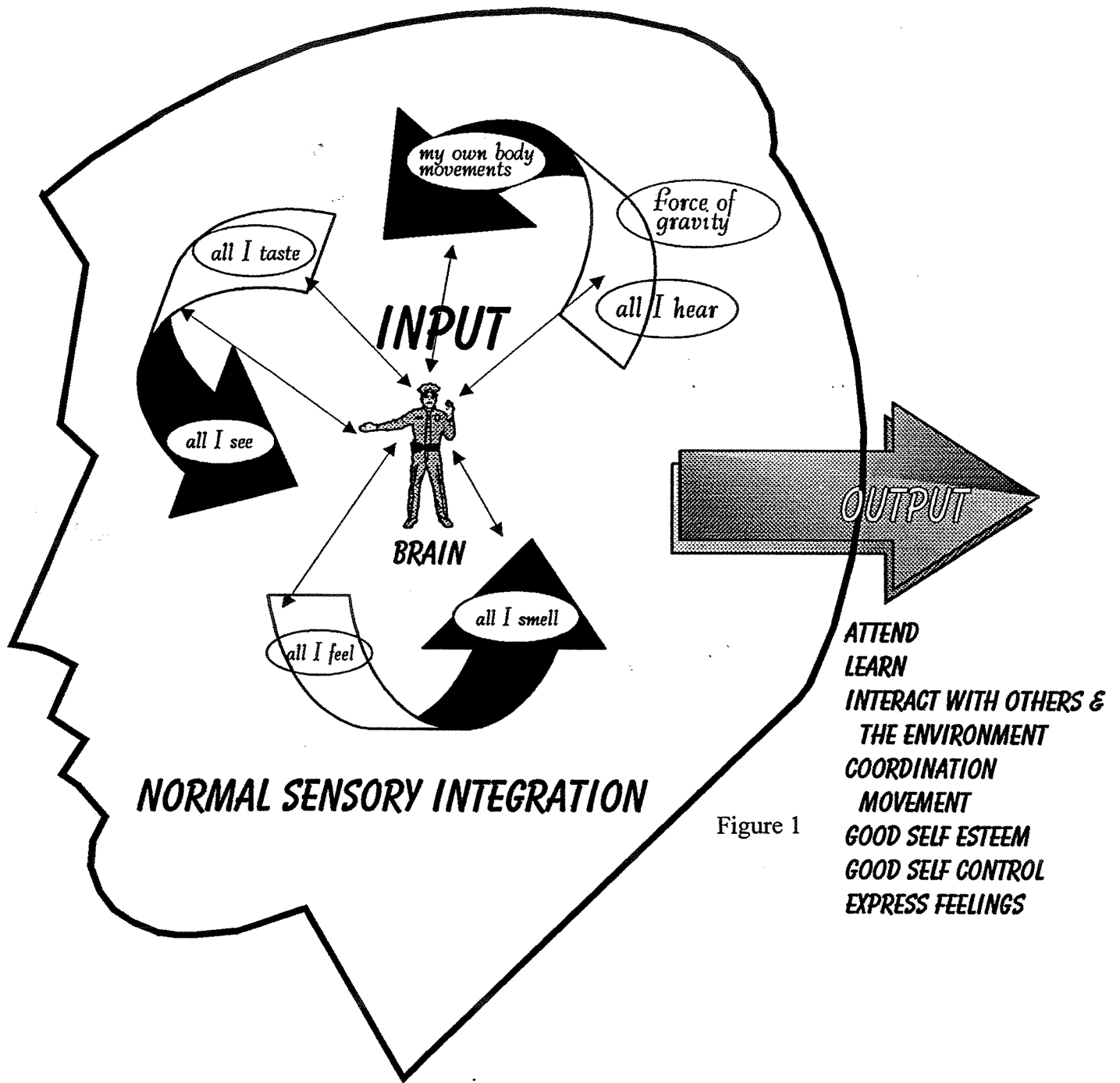
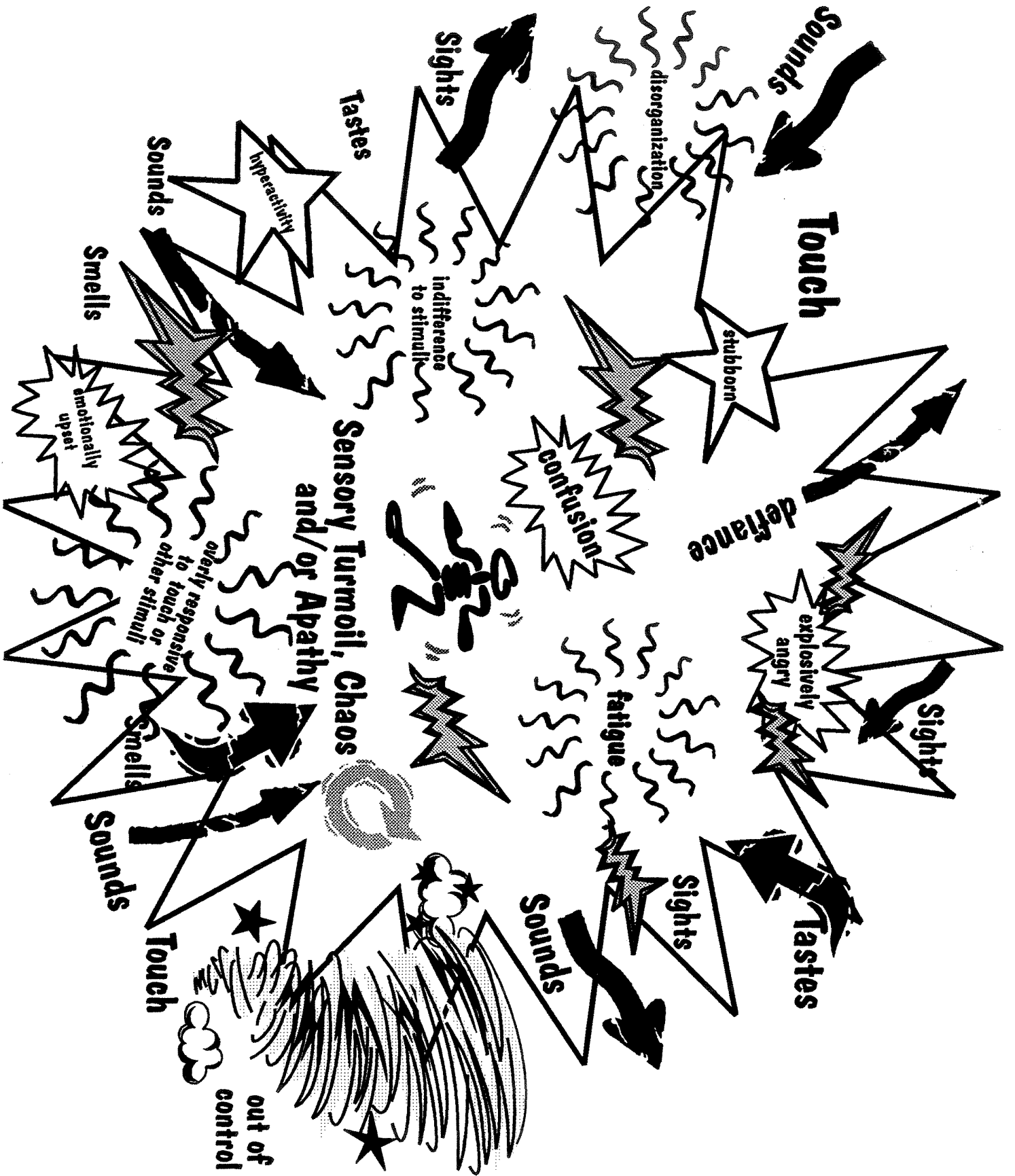


Figure 1



*Every move we make,
every response,
every word we say,
is dependent upon what
we take in through our
senses.*



Lined writing area consisting of 20 horizontal lines.

UNDERSTANDING SENSORY INTEGRATION

Visual/Sight Sensations

see

The Oversensitive Child

*distracted by visual stimuli

The Undersensitive Child

*child needs to touch everything

hear

*child averts eyes when too much to see

*child misses important visual clues-can't see patterns

touch

*poor eye contact

*can't 'read' body language

taste

*hyper-vigilant to visual stimuli

*can't discriminate/find objects in large cluttered space

*child can't calm self in visually 'loud' space

*difficulty in putting puzzles together

smell

*child becomes aggressive in visually 'loud' space

*easily loses place when reading

movement

*squints

*unable to visually scan across page without losing the sentence

*difficulty in rooms with fluorescent lighting

gravity

*uncomfortable in bright light; prefers the dark

Smell/Taste Sensations

see

The Oversensitive Child

The Undersensitive Child

*smells create illness

*poor sense of smell

hear

*textures create gag reflex
Tolerates a narrow range of
food - poor eater

*doesn't notice foul odours

touch

*child unable to focus when
food is cooking

*child likes spicy/strong tasting food

taste

*child cannot focus when
certain smells in room

*child is disinterested in eating

smell

*smells or tastes toy, object prior
to play

*pica (chewing and eating non-edible
items)

movement

gravity

Hearing/ Auditory Sensations

The Oversensitive Child

The Undersensitive Child

hear

*all noise-even barely audible hums are distracting

*child does not respond to noise prompts

*intolerant to background noise

*may not respond when name is called

touch

*dislikes crowds and noisy places

*the child listens to music very loud

*the child talks softly

*the child talks loudly

taste

*upset by loud/unexpected noises

*the child constantly asks you to repeat yourself

smell

*covers ears frequently

*the child looks confused when verbally asked to do something

*may startle to loud noises (P.A. system, door banging, fire alarm)

movement

*constantly making sounds to block out other "annoying" sounds (hums, sings)

gravity

Movement/Vestibular Sensations

The Oversensitive Child

The Undersensitive Child

see

*child avoids movement in the playground, gym, or on the stairs (gravitational insecurity)

*child craves fast, vigorous movement
-swinging,-rocking,-spinning

hear

* child feels sick when in moving vehicle

* no respect for heights; takes unnecessary risks on the playground and in the gym

touch

* dislikes car/bus rides

*poor sitting balance in chairs and on floor and while changing body position

taste

*child is anxious when off balance (falls when eyes are closed)

*difficulty maintaining attention as the need to balance takes up so much energy

*becomes excited or anxious in an environment full of movement (gym, recess, lunch room)

*low body tone; needs frequent movement breaks

smell

movement

*language delays

gravity

*unable to imitate facial feedback and body expressions.

*hyperactive/distractible

*difficulty with visual tracking; easily loses place when reading

Proprioceptive Dysfunction

see

*child is rigid, tense, “locks” joints in order to maintain position

*child slouches and slumps; seems to have weak muscles

hear

*child is uncoordinated.

*seems to prop body up

touch

*difficulty accommodating to changes in the environment (re-organized classroom)

*poor sense of body boundaries; does not “feel” body position

taste

*child avoids playground activities that require coordination

*child bumps into objects, furniture, or peers unintentionally

smell

*prefers sedentary activities

*difficulty staying in one place, likes to take frequent movement breaks

*child is socially awkward

*child struggles to hold objects: weak or overcompensated grip

*squeezes self into small places, (e.g. between the sofa and the wall instead of on the sofa to interact)

*tires easily; poor endurance

movement

*self injurious

*seems accident prone

*excessive clapping, crashing, head banging

*seems to enjoy falling and crashing

*may drop toy or use excessive/not enough force when playing with the toy

*seeks out deep pressure hugs

Touch/Tactile Sensation

The Oversensitive Child

- Avoids touch
- reacts STRONGLY to light or unexpected touch
- State of "Red Alert"- *line ups!*
- Low tolerance to pain
- Reacts to dirt/food on body
- Hates to dress
 - has clothing preferences
 - tags/seams on clothes may cause *Reactions!!!*
- Will react to possibility of touch
- Tickles are painful
- May hate different textures in mouth
 - Toothbrushes?!!!
- Hyperactivity:
"off the wall" speed

The Undersensitive Child

- Unaware of touch
- "Touch Hunger"
- High tolerance to pain
- Likes elastics, etc. which constricts parts of body
- Likes clothes tight
- Likes to crash & bang or brush up against things
- Prefers scratches & deep touch
- May NOT feel food in mouth
 - sloppy eating/difficulty in eating
 - uses mouth to explore

PARADIGM SHIFTS AND FAS/FAE

As our understanding of the meaning of 'organic brain differences' is integrated into every day life, at home and in the community, parents and caregivers undergo a personal and professional paradigm shift in how they understand and feel about children with FAS/FAE. The shift includes moving from:

FROM SEEING CHILD AS:

Won't
Bad
Lazy
Lies
Doesn't try
Mean
Doesn't care, shut down
Refuses to sit still
Fussy, demanding
Resisting
Trying to make me mad
Trying to get attention
Acting younger
Thief
Doesn't try
Inappropriate
Not trying to get the obvious

TO UNDERSTANDING CHILD AS:

Can't
Frustrated, defended, challenged
Tries hard
Confabulates / fills in
Exhausted or can't start
Defensive, hurt, abused
Can't show feelings
Overstimulated
Oversensitive
Doesn't "get it"
Can't remember
Needing contact, support
Being younger
Doesn't understand ownership
Tired of always failing
May not understand proprieties
Needing many reteachings

Preliminary findings from a pre-post test developed by the University of Wisconsin clearly document these significant shifts in professional:

PERSONAL SHIFT FROM:

Hopelessness
Fear
Chaos, confusion
Anger
Power struggles
Frustration
Exhaustion
No good outcomes
Isolation

TO FEELINGS OF:

Hope
Understanding
Organization, meaningfulness
Refraining perceptions, defusing
Working with, rather than at
Trying differently, not harder
Reenergized, new options to try
Seeing, supporting strengths
Networking, collaboration

PROFESSIONAL SHIFT FROM:

Traditional
Applying consequences
Traditional interventions

TO:

Changing people

Recognizing brain differences
Preventing problems
Expanding professional options, developing effective strategies.
Changing environments

Environmental Checklist

Proactive Classroom Model

The amount of stimulus in the physical environment is essential to any discussion regarding an appropriate intervention plan for a child with attention problems. The following conditions signify a beneficial or excellent physical environment; Moving toward providing these environmental conditions will assist those with attention problems.

Read the following checklist and think about your work setting. Place a check mark next to those describing an environmental condition that you are willing to strive toward:

- Stimulus in classroom is not overwhelming. Decorations/displays on walls, hanging from ceiling, on the closets, etc. are nonexistent or minimal at most.
- Shelves are closed with doors or drapes and are kept tidy. The covers (doors or drapes) are a plain, non-patterned, soft-colored material.
- A storage area is available enabling teachers to remove equipment and reduce stimuli.
- Children have experiences working individually, in pairs, or in small groups. Their desks or tables provide them with opportunities to be by themselves in a protected area or the room.
- Color of the walls, cupboards, desks, shelves, etc. is not bright. There are few colors. The colors are soft and soothing.
- Bulletin boards are not decorated with brightly colored figures.
- Students with attention problems sit in the optimum location with the least distractions.
- Major traffic areas in the classroom do not have students with attention problems sitting next to them (pencil sharpener, door, bathroom, sink, teacher's desk, etc.) The traffic areas are clearly defined.
- There are areas in the classroom that are private, secluded, and free of stimulus where children are free to go to work, think, calm down, etc.

The noise level in the room is low: background noise is minimized or removed. There is quiet talking and times of silence. Occasionally soft, soothing music is playing.

- ❑ The intercom is rarely used.
- ❑ The lighting in the room does not cause a glare. It does not hum, nor does it flicker,
- ❑ Disturbing sounds in the classroom are tracked down and removed. The heater pipes slamming doors, etc.

- ❑ Furniture is used to provide boundaries to delineate work/play areas.

- ❑ Areas and materials are labeled with both words and pictures, and these are placed at the eye level of children.

- ❑ The daily schedule (in words and pictures) is clearly visible in the classroom.

- ❑ The classroom rules are posted, and they are listed in positive terms.

- ❑ Children have a way to store their belongings neatly and in an organized fashion.

- ❑ Children do not have to go from room to room during the day.

- ❑ Children have a simple routine for preparing to go out for recess and for returning from recess.

- ❑ There are simple routines for going to lunch in the building.

- ❑ The rules in the lunchroom are clear and simple.

- ❑ Materials in the classroom are safe and well-maintained.

- ❑ People do not walk in and out of the classroom continually during the day.

- ❑ The primary adults in the classroom are consistent in being at school and with the children.

- ❑ The class avoids disruptions of the daily schedule, including many assemblies, field trips, and special events

“EXTERNAL BRAIN” STRATEGIES

1) STRUCTURE AND ROUTINE

- reduce choices
- adapt environments
- use a very structured, consistent, predictable daily routine

2) LESS TALK, MORE MULTI-SENSORY LEARNING OPPORTUNITIES

- visual cues
- auditory
- tactile and kinesthetic learning
- slow, concise speech using as few words as possible
- animated voice and gestures
- TEACH... REPEAT... RETEACH

3) BE CONCRETE - DON'T ASSUME ANYTHING

- difficulty with abstract concepts (i.e. time, money, ownership)
- difficulty generalizing
- poor problem solving **skills**
- teach skills in context

4) LANGUAGE FACILITATION

- facilitative language techniques
- developing pragmatic language (social language)
- direct teaching

5) GROSS MOTOR PROGRAMMING

- low muscle tone and decreased muscle strength
- poor body awareness/balance/postural stability

6) BE AWARE OF THE “TIME BOMBS”

- reduce stimulation levels
- calming techniques
- transitions

BRIDGES PROGRAM

“EXTERNAL BRAIN” STRATEGIES

The Bridges program has adapted its classroom environment to become the student’s “external brain”. These “external brain” strategies can be broken down into 4 categories, which include:

- structure and routine
- less talk, more multi-sensory learning opportunities
- be concrete-don’t assume anything
- be aware of the “time bombs”

Outlined below is specific strategies in each of these areas.

1) **STRUCTURE AND ROUTINE**

- provide **structure** rather than **control**. Control generates power struggles whereas structure invites participation and involvement in the process.
- **establish routines for everything**. This includes routines for starting the day, ending the day, washroom use, snack time, etc.
- **reduce choices**. Individuals with FAS have difficulty making choices. Too many choices results in frustration which can lead to behaviours. Therefore, reduce the number of choices available, i.e. during free play, give 2 choices of centres.
- **calendar time**:
 - same daily routine, same language, i.e. use a very structured, consistent, predictable daily routine;
 - use carpet square or move and sit cushion to designate child’s space;
 - try a bean bag chair or chair that will give support;
 - sitting beside teacher; engage child in handing items over to teacher for discussion may help maintain attention;

- fidget toys (koosh balls, soft balls, squishy balls) or favourite toys may be helpful; have special toys which are only used at these times;
- if a child likes to chew on clothes, hands, etc., provide them with something appropriate to chew, i.e. gum, candy or water bottles;
- use deep pressure for calming, i.e. weighted or x-ray vests, sit on floor with arms and legs wrapped around student;
- give acceptable movement breaks - often a student's distractibility can be seen as avoidance. With a movement break-often student's more likely to return to the group more able to maintain attention;
- use a puppet and animated voice and gestures to maintain focus;
- reduce the amount of visual stimuli on walls. Cover all extraneous material except for the material being presented.
- use picture time-line as day planner. Use linear (horizontal) placement (Mayer Johnson program works well)

2) **LESS TALK, MORE MULTI-SENSORY LEARNING OPPORTUNITIES**

Visual

- use visual cues, pictures, instructions whenever possible, i.e. break steps down visually for routines such as washing hands or dressing in winter clothes.
- use pictures to display students' birthdays; display pictures of staff they will see on a regular basis (stranger awareness).
- use visual boundaries and markers on floor and carpet for line-ups, circle time and to indicate boundaries for play.
- reduce stimulation in the room by removing dangling/hanging displays from ceilings, which are within distractible students' lines of vision.
- put supplies in boxes with labels that have picture clues as well as words, Ensure that these supplies remain in the same location so students know where to look for them,

- if using tables, mark the student's spot with masking tape so they have their own "personal space" and they know where this space begins and ends.
- set up a study carrel or another quiet area where individual students can go to work if they are distracted.
- **"Handwriting without Tears"** printing method. Use consistently in journals and other printed work.

Auditory

- use slow, firm, concise speech using as few words as possible. **Pair** verbal teaching with visual cues, gestures or demonstration.
- emphasize key words or phrases with voice tone and inflection.
- present one direction at a time.

Tactile & Kinesthetic

- use obstacle courses to teach concepts (e.g. over, under, around)
- incorporate touch, taste, smell into the learning experience whenever possible

TEACH...REPEAT...RETEACH... A skill taught one day may not be retained to the next or generalized into another setting.

3) BE CONCRETE - DON'T ASSUME ANYTHING (K. Jones, 1997)

- difficulty with abstract concepts such as time, money, ownership;
 - linear time (horizontal) instead of circular time;
 - label student's personal items with their name.
- difficulty generalizing, therefore, teach each skill in context in all settings (e.g. "No hitting" has to be taught in the classroom, gym, playground, hall, etc.).
- teach social skills
 - modeling
 - break skills into small steps
 - reinforce desired appropriate behaviour with an immediate visual reward system.

4) **BE AWARE OF THE “TIME BOMBS” (K. Jones, 1997)**

- reduce stimulation levels. Reduce clutter and visual stimulation on shelves by covering up with sheets.
- use room dividers to block off areas not in use at the time, thereby reducing the stimulation.
- have natural lighting whenever possible. Do not use fluorescent lighting. Have ability to dim lights.
- furniture:
 - use bean bag chairs, rocking chairs; appropriate height tables and chairs with armrests.
- don't set the child up for failure. If necessary avoid assemblies, field day and other unstructured school activities.
- calming techniques:
 - use a designated spot as a calming space (not for the purpose of “punishment” or time out, rather for calming down purposes) where students can withdraw to when they feel overwhelmed or overstimulated.
 - use a rocking chair to help calm the student
 - if possible, paint the walls and/or bulletin boards a pastel blue color which will help create a calm environment.
 - other calming techniques
- transitions - transitions are extremely difficult for students with FAS. Therefore, give plenty of warning before a transition is to take place. Use verbal warnings, timers, and songs to tell the students of a transition.

Redesigning Environments for Students with FAS/E

Classroom Environment

1. Provide for a “self-calming space” rather than a “time-out space” where the child can retreat if overstimulated or fearful. This should be a quiet, safe space - a carrel, loft, appliance box or tent, behind a couch, bookcase, etc., safely away from general activity. This area should be free of visual stimuli on the walls and can be filled with soft pillows, blankets, a beanbag chair or rocking chair, or stuffed animals. Soft, calming music may also ‘help the child calm down depending on the child’s sensorimotor preference. This should never be used for punishment or as a consequence for negative behaviour.
2. Offer alternatives to “regular” individual work space when behaviour starts to escalate or individual has difficulty focusing.

This could involve:

- desk facing the corner or bare wall
- table top study carrel or table surrounded by room dividers
- be creative

If there is a need to change the classroom or home environment include the child in this process. Listen to what the child has to offer or feels would work for him/her.

3. plain walls (a slate blue color works well)
4. no posters, artwork, etc. within child’s vision while seated at desk
5. no mobiles, wind socks, hanging plants, etc.

6. **cover lower part of windows (to limit view of outside)**
7. **cover bookcases, shelves, etc. (sheets with velcro to fasten work well)**
8. **avoid clutter on desk top; the student's environment must be safe, organized, consistent and predictable; keep everything in its place**
9. **soft lighting - use natural lighting or all spectrum lighting**
10. **limit distractions (visitors, PA announcements, etc.)**
11. **outline boundaries for circle time area, line-ups, and lay areas using court tape or masking tape. To help students to remember how to sit in circle use rug samples or cushions on the floor to define each student's space.**
12. **separate areas by barriers such as shelves or room dividers. Keep areas contained and avoid large, cluttered, unstructured areas**
13. **Keep bulletin boards uncluttered. Use several larger visual items rather than many smaller items.**

Situations Best Avoided

- a) **standing in long lines**
- b) **noisy, crowded hallways/spaces**
- c) **unstructured environments (recess, lunchroom, assemblies)**
- d) **field trips to the mall or Festival of Lights! Have one-on-one adult supervision on field trips**

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‘HOW DOES YOUR ENGINE RUN?’

A Leader’s Guide to The Alert Program for Self-Regulation

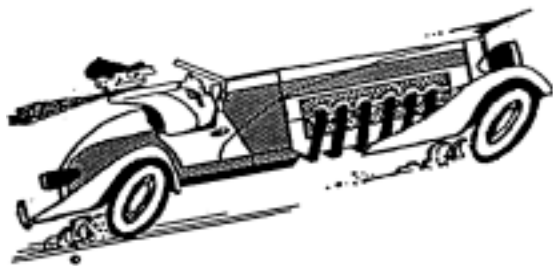
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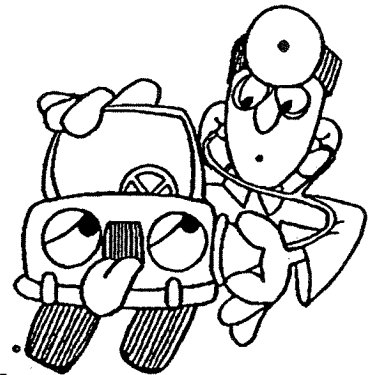
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CHANGING HOW ALERT YOU FEEL

If your body is like a car engine, sometimes you may feel like your engine is running in



high speed,



in low speed,.

Or “Just right”



When your engine is in high speed, you may find it difficult to pay attention, to sit quietly in your seat, or get your work completed. When your engine is in low speed, you also may find it hard to concentrate, you may “daydream” easily, or feel like a “couch potato.” When you are in the “just right” place, it’s usually easier to pay attention, to get your work done, and to have fun.



If you want to change your engine speed from high or low to get into the “just right” feeling, you may want to try the following:

SENSORY-MOTOR PREFERENCE CHECKLISTS (FOR

ADULTS)

DIRECTIONS: This checklist was developed to help adults recognize what strategies their own nervous systems employ to attain an appropriate state of alertness. Mark the items below that you use to increase (↑) or to decrease (↓) your state of alertness. You might mark both (↑↓) on some items. Others you might not use at all.

PUT SOMETHING IN YOUR MOUTH (ORAL MOTOR INPUT).

drink a milkshake
suck on hard candy
crunch or suck on ice pieces
tongue in cheek movements
“chew” on pencil / pen
chew on coffee swizzle sticks
take slow deep breaths
suck, lick, bite on your lips or the inside of your cheeks
drink carbonated drink eat a cold popsicle eat a pickle

chew gum
crunch on nuts / pretzels/chips
bite on nails / cuticle
eat popcorn / cut up vegetables
eat chips and a spicy dip
smoke cigarettes
chew on buttons, sweatshirt strings or collars whistle while you work
drink coffee / tea (caffeinated)
drink hot cocoa or warm milk
other:

MOVE (VESTIBULAR / PROPRIOCEPTIVE INPUT):

rock in a rocking chair
shift or “squirm”¹ in a chair
push chair back on 2 legs
aerobic exercise
isometrics / lift weights
rock own body slightly
scrub kitchen floor
roll neck and head slowly

sit with crossed legs and bounce one slightly
run / jog
ride bike
tap toe, heel or foot
dance
tap pencil / pen
yard work
stretch / shake body parts
Other:

TOUCH (TACTILE INPUT):

twist own hair
move keys or coins in pocket with your hand _cool
shower warm bath
receive a massage
pet a dog or cat
drum fingers or pencil on table
rub gently on skin / clothes

Fidget with the following:
a straw
paper clips
cuticle/nails
pencil / pen
earring or necklace
phone cord while talking
put fingers near mouth¹, eye, or nose
other:

LOOK (VISUAL INPUT):

open window shades after a boring movie in a classroom
watch a fireplace
watch fish tank
watch sunset / sunrise
Watch oil and water" toys

How do you react to:
dim lighting
fluorescent lighting
sunlight through bedroom window when sleeping
rose colored room
a "cluttered desk" when needing to concentrate

LISTEN (AUDITORY INPUT)

listen to Classical Music
listen to Hard Rock
listen to others "hum"
work in "quiet" room
work in "noisy" room
sing or talk to self

How do you react to:
scratch on a chalkboard
"squeak" of a mechanical pencil
fire siren
waking to an unusual noise
dog barking (almost constantly)

QUESTIONS TO PONDER

1. Review this Sensory-Motor Preference Checklist. Think about what you do in a small subtle manner to maintain an appropriate alert level that a child with a less mature nervous system may need to do in a larger more intense way.
2. Notice which types of sensory input are comforting to your nervous system and which types of sensory input bother your nervous system. Are your items clustered in a certain category of sensory input?
3. Consider how often (frequency), how long (duration), how much (intensity), and with what rhythm (fast, slow, uneven or even,) you use these inputs to change your state of alertness.
4. When you are needing to concentrate at your work space, what sensory input do you prefer to work most efficiently?
 - a) What do you put in or around your mouth? (Example: food, drink, gum. etc.)
 - b) What do you prefer to touch? (Example: clothing texture of chair, fidgeting with objects, etc.)
 - c) What types of movement do you use? (Example: rock in chair or movement breaks to stretch or walk, etc.)
 - d) What are your visual preferences? (Example: natural lighting from window, use of a lamp, brightly colored walls. Are you an "in" person working best with your desk cleared off or an "out" person whose desk is piled high with papers, etc.)
 - e) What auditory input do you use? (Example: do you listen to music while you work? If so, what type of beat? Do you like to talk to yourself or others and work at the same time? Do you prefer a quiet environment?, etc.)

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