



National Training and Development Curriculum

FOR FOSTER AND ADOPTIVE PARENTS



ACCESSING SERVICES & SUPPORTS

ACCESSING SERVICES AND SUPPORTS- RIGHT TIME VIDEO

Key Points

General Information:

- All parents who foster or adopt may need services and supports because all children, even those you've been parenting from a very young age, will have experienced some level of separation, loss and grief.
- Even if things are seemingly well in the home, children may need extra supports with social skills, emotional development, cognitive ability and/or their physical abilities. Parents who foster or adopt will oftentimes need to seek out services.
- You are not in this alone. It will be important to know what services and supports are available in your area, from the very beginning of your journey.

Part I: Key Strategies to Advocate

- Partner with providers of care:
 - Don't make demands, come with solutions;
 - Schools are often places where advocacy is needed to make sure the educational and behavioral needs of children are being met;
 - Inform yourself of where your child's development should be and what is needed to help them achieve that. Advocacy can help children reach their full capacity;
 - Be present and helpful in locations children may need support, such as school settings;
 - Try not to be intimidated by professionals and remember that your voice is equally important in regards to the child's needs and;
 - Keep advocacy efforts focused on the child's needs and not how the issues impact parents.
- Keep records of everything including:
 - Child's background information;
 - Medical records;
 - School report cards and educational information and;
 - Any information you receive about the child;

There may be little information currently available, especially for children adopted internationally, in which case, it is critical to partner with a pediatric clinic that specializes in international adoption.

Write everything down/document as much as possible (such as a log of medication names, doses, dates and the child's reactions to medication).

Keep your documentation all in one place, such a notebook. This will be especially helpful when you are thinking of what you might want to ask professionals or strategies that they give you.

- Be proactive in seeking services:
 - Proactively seek out services and supports in your area and get connected to groups such as support networks and do it long before there is a crisis.
 - Every child who has been adopted or in foster care has experienced loss, which may result in the child or parent needing some level of extra support. It is important that families do not wait until the child or family is in crisis to seek out support.
 - If possible try to predict and meet the child's needs before they become visible.
- Become a lifelong learner:
 - Recognize that as the child grows or as children move into your home you will need new strategies. As a result, it is important to continue to expand your skills.
 - Issues that may surface as children grow include loss and grief, attachment and identity. As children encounter some of these issues, it may result in the need for new skills, resources, and support.
 - As part of your learning, you can refer to books, magazines, conferences, workshops, videos, support groups with other parents, and advice/guidance from professionals.
 - Learn all you can about children's development, yet remember these developmental milestones are not always hard and fast but instead suggested guidelines. Use them to know what services you may need for the child.
 - Research services and supports before a child comes to live with you, including support groups.
- Self-Care:
 - Don't forget about yourself.
 - If you are at the end of your rope, you will not be an effective advocate for the child.
 - Self-care is critical for you to be an effective parent. Self-care includes getting enough sleep, exercise, and healthy food. It also means paying attention to family relationships, like marriage.
- Create a group of family and friends who understand the child's needs and can provide support.

Part 2: Your Therapeutic Network

- The therapeutic network is made up of everyone that can be of help in caring for a child who is being fostered or has been adopted. These networks can be made up of formal or informal supports.
 - 1) Formal support includes all the professional supports you can access:
 - Professionals working with your family should understand trauma, loss and grief, identity development, and parenting in racially and culturally diverse families.
 - They should help everyone in the family know how to respond when different issues, challenges and opportunities come up.
 - Formal supports include things such as counselors, therapists, doctors and support groups. All should be trauma informed and knowledgeable about foster care/adoption.
 - Solidify your network by partnering with other adults in your child's life, like teachers, coaches and mentors who feel like the best fit for you and your family.
 - 2) Informal supports are those that start informally, as the title suggests:
 - You might find connecting with other parents who are fostering and adopting is helpful. They will help you to know when what you are experiencing is typical.
 - You might find these groups online or through local support groups. If you can't find any, ask professionals like child welfare staff, counselors and pediatricians for their suggestions.
 - If you are connected with a local parent group or religious institution, there could be a sub-group on fostering/adopting.
 - It will make a big difference if you share the information and education that you are receiving about how to parent children who have experienced trauma, separation and loss with your friends and family so they can support you and the child.
 - Kinship caregivers in particular can benefit from finding people in similar situations and specialized support groups:
 - These groups may be helpful to share resources, recommend professionals and help you feel that you are not alone.
 - Kinship caregivers may need specific support due to the complexity of relationships with the child's birth parents- both formal and informal support groups can be helpful to give advice and support.
- Just as it is important to find supports for parents who are fostering or adopting, it is important to find peer support for children:
 - Groups can also be available to children in foster care and those who were adopted through the internet, blogs, social media and local groups that take place in your area.
 - There are many ways to find these services. You can talk to the local child welfare agency, professionals, other parents who are fostering or adopting, and schools.
 - Even after a child is adopted, services and supports are available. Make sure you ask the local child welfare agency about services and supports that continue to be available to you and the child you are caring for.

- Sometimes for children, the need for support is associated with specific events or times of the year- these are called “triggers.” Parents should be aware of and plan for these in advance. These events could include: birthdays, anniversaries of placement, holidays/ceremonies, school projects, births or deaths of family members or pets, divorce, contact with birth parents/relatives, or if/when the child and/or family members move in or out of the home.

Part 3: The Types of Services Available

- Be sure to look for organizations and providers that have experience and understanding with:
 - Separations, grief and loss
 - Trauma
 - Foster Care and Adoption
- There are many different types of services and supports including:
 - Mental health services including counseling and psychiatry
 - Health services
 - Academic assistance
 - Occupational therapy
 - Support groups
 - Training for yourself and others in your informal network
 - Respite - Important to remember that both you and the child can benefit from a break
- Make a written list of who you can call for support and be sure to have their phone numbers saved and/or posted for easy access.
 - Being prepared in advance will give you one less thing to worry about if/when a crisis is actually occurring
 - Anticipate that the people on your list have some training and information about your child’s needs
- Adoption and foster care is a commitment that you do not have to make alone. Services can help to meet challenges, solve problems, and preserve your family. Services can bring positive results, promote healthy family relationships, and resolve issues common to families who foster or adopt.



Podcast Transcripts

This transcript was exported on Sep 12, 2022 - [view latest version here](#).

April Dinwoodie: In this episode, we welcome Kim Stevens. Kim has been with NACAC since 2006, managing two of their largest projects. In her 25 plus years of child welfare work, Kim has provided training and consultation both nationally and internationally on kinship care, foster care, adoption, parenting, positive youth development, advocacy, and leadership, trauma, and recovery, and youth permanency.

She and her husband, Buddy, have six children, four of whom were adopted from foster care. Welcome to the podcast, Kim.

Kim Stevens: It's great to be with you, April.

April Dinwoodie: I really can't think of a better person to help us understand the importance of accessing services and supports. So we're going to jump right in.

Kim, why is it so important for parents who are fostering or adopting to get connected with services and supports?

Kim Stevens: Well, that's a great question, April. The majority of these children have experienced trauma and loss and parenting them can be very challenging. The experiences have impacted the children in all the domains of their life. And this oftentimes requires the help of professionals who understand the impact of trauma and separation. And it can also help the child, but help the person who is parenting the child.

I really can't imagine myself going through the journey without getting the supports and services that we had to avail ourselves of.

April Dinwoodie: Well, I'm so glad that your experience can help others. And so not only your professional endeavors, but also your personal connection to this experience. So this really is a great help for parents.

I've certainly seen the positive impact of families getting surrounded by services and supports. Can you describe some of the services that children and families may need?

Kim Stevens: Sure. And most of these are actually services that our children needed over the years, and happy to tell the other families out there that our kids are grown and doing really well.

What we found that our children needed were certainly things around counseling for both our children, but also for the family as a whole. We were very clear that we didn't want our children to ever feel like they were identified as a problem, if it were, but more that the whole family needed to learn a new way of being a family. And that idea of normalizing the experience of needing services and supports, I think is important for all the members of the family.

We needed to get speech and occupational therapy for some of our children. Certainly after school support and specialized childcare can be very important for a child who has experienced loss, trauma or separation. That feeling of being apart from your caregiver can often trigger reactions. So you need a childcare who understands and can respond accordingly.

Medical care is very important. Many of our kids have come to us without all of the medical pieces in place. And we have to sometimes put together some puzzle pieces and figure out what they need to be healthy and strong.

And special education services are almost universally needed. Not to say that the children who come to us through foster care and adoption don't have the same capacity and the same abilities as other children, but oftentimes just the moving and the transitions can set them back in school. So we want to give them all the supports that they can get so that they can achieve and get to the same place as their peers.

April Dinwoodie: We talked a little bit about the services for children and young people, but you said that this is all really about families too. It's a unit. So can you share some of your thoughts specifically on what type of supports families who are fostering and adopting may need?

Kim Stevens: Oh, absolutely. April. I think in many ways the families need to get some services even more than the children do. I know that both my husband and myself and our two birth children who welcomed adoptive siblings into the family, but then as more children joined us even, our already adopted children, all of us benefited from going to special classes, taking special training, learning more about the impacts of trauma, the impacts of loss, and the impacts of changing family dynamics.

It really helped us understand and normalize some of the experiences that we were having. Realized that we were doing the best we could, each of us parents and children alike, but that yes, having some extra help and some new understandings was really going to be very important for us to feel successful.

We definitely benefited from family therapy. So our children, several of our children, went to individual therapy, but we also made sure that we went to therapy as a family. Again, both to support all the members of the family, but also so that those kids who were really struggling to try to figure out their role in this new family dynamic never had to feel as though that burden of doing the work was all on them.

Sometimes many parents, actually, I wouldn't say sometimes I would say most of the time, parents can find lots and lots of help and support by being part of a parent-to-parent network or a parent support group. And certainly for kids, birth adopted foster, all of them benefit from being part of a peer group where they can feel as though their experience is not unique to them and where they

can find commonality, they can find friendships, and more than anything else, they can find a place to have fun, relax, be themselves and not have to explain themselves all the time.

April Dinwoodie: Before we move on, I thought it might be important just to briefly explain the differences between formal and informal supports, just so that people have a clear understanding of that?

Kim Stevens: Oh, sure. And I think it's such an important question, April, because both are critical. So when you think about a formal support, that is usually something that's connected to a professional. It could be with a school system. It could be something paid for with insurance or out of pocket. Most often the providers require professional degrees. So you can think of people like family therapists, individual counselor, occupational therapist, speech therapist, physical therapist.

They're also, you want to think about being connected to a psychiatrist if you are going to be doing medication management. You don't want to be doing that without somebody really very skilled and knowledgeable.

And then for informal supports that can usually consist of family, friends, and other experienced foster, adoptive, and kinship parents. Those people who really understand, those people that accept your family, support your family, respect your family, and are kind of in it with you to the best of their ability. And those are the people that you can find in your neighborhood, in your faith community, in your own family and through support groups and other parent and peer networks.

April Dinwoodie: That's great, Kim. All really specific examples of what these two things and together really combined the formal and informal really create the conditions for healing and success and for thriving. So that's really good. Now, more specific, what does a therapeutic network look like and how do you create one?

Kim Stevens: Right. So a therapeutic network in large part does consist of some of those formal supports that I listed. I think, for me anyway, and for most of the families that I've seen that really feel as though their network is working for their child and for their family, those are networks of providers and programs that are very committed to working together on behalf of meeting the needs.

So rather than 10 different appointments, and each person has a different idea, your therapeutic network should be committed to having regular, maybe monthly or quarterly meetings as a team, talking about a child and a family holistically and talking about how what each of them provides leads to the best outcome for healing, for wellness, for wellbeing.

The other thing about it is that in order to put together the best therapeutic network for your child, it really requires a thorough complete assessment to

figure out exactly what is the child struggling with? What are their strengths? We certainly don't want to forget that piece of it and to figure out how those strengths and needs also work within that network.

I would say one of the things that sometimes gets lost in the mix, and I sure do want to encourage parents to never lose this piece of it, is that your child, even as a young child, should be at the center of that therapeutic network, should feel as though it's their team working with them and for them rather than working sort of on them, if you know what I mean?

Because I think oftentimes our kids who have come through some of these difficult experiences of loss can feel like there's something wrong with them when actually they are some of the strongest, most capable people in the world who just need a bit of help to try to figure out where they came from and where they're going.

April Dinwoodie: That's so well said, Kim, and I so appreciate you mentioning assessments because really knowledge is power. And the more you know, the better that you can support your family and your child.

So what I'm hearing you say is really about leaning into advocacy and proactively seeking out the services and supports that may be needed. How can foster and adoptive parents, or how can parents that are fostering and adopting, learn to be these proactive advocates?

Kim Stevens: April, that question about being a good advocate is really one of the most important things that parents who are fostering or adopting need to either have coming into it, or boy, they need to develop it pretty darn quickly.

You want to be the person who is your child's most loyal and fiercest cheerleader. You want to constantly be thinking about what they need. You want to pay attention to what they are telling you, both verbally and non verbally. You need to remember that you are the person that is caring for this child 24 hours a day. So you know that child better than anybody else.

And when you're hearing, "No, no, no," know that you can ask the questions. I think one of the most important questions that I learned to ask when I was facing someone who did not want to provide for my child the things that they needed was to simply ask them, why? Why do you think that won't work? Why do you think it's not the right answer? What do you think would be a better answer?

And when you ask the question, why, as an advocate, you often are able to get the person who is not providing what your child needs to kind of talk themselves into a corner. They eventually come around to realize what is the right answer. I think one thing that parents who are fostering or adopting should do is keep a log, write down the things that you're observing, write down

the behaviors, write down the times of the day or different things that happened around that. So that you can provide some clues to the professionals that you're going to be looking to, to give you the answers and to give you the services that you need.

Pay attention to things like anniversary, special dates, special times of the year. One of the things that you can do as a really good advocate is if there is a challenging behavior, or if there is a concern that you are trying to advocate on behalf of also pay attention to when it's not happening, sometimes we can learn more about when things are not happening than we can when they are.

So what was it that happened before you went to the grocery store on Tuesday that did not result in a tantrum in the middle of the grocery store? Was it a change in your behavior? Was it a change in circumstances? That kind of information can be very, very helpful.

And then once those services are in place that you need, you want to be an active team member. You want to be available, you want to be responsive. You want to show gratitude and appreciation for the people that are trying to help you and your family. You want to make sure that they know how valuable that they are in this partnership, and you want to be able to report back to them any and all positive changes that you see because everybody is more motivated when they see that there is something great happening and especially your child is going to be.

And so, April, one of the very important things about being a good advocate for your child is that it involves very, very good problem solving skills. My friends and I, who are fostering and adopting, we refer to ourselves as members of the problem solving club. And we don't take no for an answer. We just keep looking for solutions.

April Dinwoodie: And what you were talking about, Kim, which I so appreciate is this idea of a team effort. And then all of this real commitment to keeping notes and logs and noticing and listening. And then the thing that I love so much is being grateful and proactively sharing the positive changes that are going, "Oh, this is so important."

The next question I have for you is why is it so important for parents who are fostering or adopting to get connected to a support group or peer-to-peer network?

Kim Stevens: So, April, that's a great question. This really is a different kind of parenting. When we are surrounding ourselves with other people who have walked this same walk, they can tell us what they've done that has worked. They can hold our hands and hold our hope for us when we sometimes can't hold our hope for ourselves.

They can normalize an experience that to much of the world does not look normal, but in fact is quite normal and quite expected, in fact. When we have families that are experiencing similar things and they can share their successes, it gives us ideas for how we can also be successful.

Oftentimes we can find folks who are willing to provide respite for either us or for our child, remembering that the children are also balancing a whole lot of emotional baggage when they come into our families.

When I have struggled with different issues that my kids have had, I've been able to turn to other parents who have had kids with the same issues who have given me perfect wonderful on target advice.

April Dinwoodie:

I know all that you shared will be so helpful to families as they look to access services and supports for their family, for their children, and so I thank you so much.

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**NTDC Right Time Training
ACCESSING SERVICES AND SUPPORTS
QUESTIONS AND ANSWERS**

Question 1: Why is it important for parents who are fostering or adopting to connect with services and supports in their community?

The needs of children who have experienced trauma, separation or loss differ from the needs of children who have not had those experiences. These experiences often have long-lasting effects on all areas of how a child functions, including physical, mental, behavioral and social. A child who has experienced trauma, separation or loss or a combination of all three often shows typical child behaviors that parents find challenging; but the child tends to show these challenging behaviors more often, for longer times and at greater intensity than other children. The frequency, intensity and duration of the child's challenging behaviors can stress families beyond their ability to cope.

The parenting skills that you have developed (or learned from your parents) might not always be effective with children who have experienced trauma, separation and loss. You may need to find support and assistance from professionals and other families who have fostered or adopted children. It is important for you to identify the services and supports available in your community. You need to find out how to "plug into the service network" to access these services even if you don't need them right now. Getting to know the service system and how to access services **before** a need arises is a positive, **proactive** approach. This proactive outreach is important preparation. It will let you know which services and supports are available and how to access them when a challenge does arise.

Other proactive steps include: 1) staying connected with your caseworker or the local child welfare agency so that you have up-to-date information about new services and training opportunities available to you and 2) working with your caseworker to understand the child's history and life story, which can help you to identify needs that may arise in the future. It's easy for these proactive steps to get pushed aside by the demands of everyday life, but don't let that happen to you. One of the most important steps in preparing to foster or to adopt a child is to connect with services and supports long before you, the child or your family is in crisis. Remember that the long-lasting effects of trauma, separation and loss do not disappear just because the child is in a safe place. You might need different types and levels of support and services over time. As children reach different developmental milestones and life transitions, it is common for families to need different supports and services to meet their children's changing needs.

Question 2: What are some strategies that parents who are fostering or adopting can use

to find local services?

One of the most effective ways to find local services and supports is to ask other parents who have experience fostering or adopting a child. They can tell you which professionals or services they have used that truly understand the unique needs of children who have experienced trauma, separation and loss. Groups for parents who are fostering and adopting often meet in person and are organized through a local child welfare agency. Some parenting support groups “meet” online and hold online discussions that you can join. Most states and tribes have some type of association or coalition for families who are fostering or adopting children. You can find the type of parenting group that your state or tribe offers by going to www.childwelfare.gov and typing in the search bar “State Foster/Adoptive Family Associations/Coalitions.” It may be important to check in with a tribe to find out which resources are tribally relevant for that tribe’s children and/or the parents who are fostering or adopting.

If you are fostering a child, the child’s case manager should be able to connect you with services and supports. Likewise, if you have adopted a child, you can contact the local child welfare agency for help finding local services and supports. These will vary greatly from one community to the next, but almost all communities will offer training opportunities at various times during the year. Attending parent trainings can be extremely helpful because the training gives you the chance to increase your knowledge, to learn new skills and to connect with other parents and professionals in your area who are involved with foster care or adoption.

Furthermore, there are national groups for parents who are fostering or adopting. These groups hold various training opportunities and conferences during the year. They are also good resources for information that can be helpful to parents who are fostering and adopting. Examples of these national groups are the North American Council on Adoptable Children (www.nacac.org) and the National Foster Parent Association (www.nfpaonline.org). Another national group, Generations United (www.gu.org), focuses specifically on families caring for children through kinship guardianship.

Question 3: Why is it important for parents who are fostering or adopting to find providers and programs that are trauma-informed, adoption-competent, or both?

The term ***trauma-informed*** refers to care and services that recognize that experiencing trauma, separation or loss has long-lasting effects on an individual's life. The term ***adoption-competent*** describes professionals such as health-care providers, therapists or teachers who have received special training in understanding adoption and the unique needs of children who have been adopted and families that have adopted children. An adoption-competent provider is trauma-informed and has special insight into the complex issues in adoption, including the language, loss and grief, attachment, expectations, norms, family dynamics and range of feelings in the adoption experience.

Many families report that professionals who are not trauma-informed providers or adoption-competent providers, or both, do not understand the issues that can arise for children and

families who are involved with the foster care system or with adoption. This is true even of the best, most highly respected providers in the community. Because providers without special training in trauma or adoption don't fully understand the complex issues that can arise, they may end up treating a child as if the child had a mental-health diagnosis versus treating the separation and loss that may be at the core of the child's issues. When behaviors are misdiagnosed, the treatment provided doesn't actually address the child's core issues. Likewise, providers who are not adoption-competent, trauma-informed, or both, are more likely to give out information and to make suggestions to parents who are fostering or adopting that might be unhelpful or might bring shame and guilt to the family. It is important to remember that children who have experienced trauma, loss or separation often do not respond well to traditional parenting, educational, mental health and other practices.

Question 4: What is a therapeutic network, and how do you develop this type of network?

A **therapeutic network** is made up of professionals, providers and program leaders who are working together to meet all of a child's needs. In other words, the purpose of a therapeutic network is to make sure that there is a group of professionals surrounding the child and family who understand the child's needs and are actively working together to meet those needs. One of the most important steps in creating a therapeutic network is to obtain an in-depth, high-quality assessment of the child's needs so that you (and the child welfare agency if the child is still in care) can identify the providers, programs and services that can address those needs. If the child is in foster care, the child's case manager will be primarily responsible for developing the therapeutic network. Remember that you are crucial to this network as the advocate for the child. The insights you have about the child's behavior and emotional patterns on a daily basis is vital information for the network in determining how best to meet the child's needs.

After you have identified the members of the child's therapeutic network, it can be helpful to plan how you will share information across the network. One strategy is to get the network members to agree to a regular schedule of meetings. If you are fostering the child, the child's caseworker likely will organize these meetings. Holding regular meetings will help to ensure that everyone is on the same page and understands the care plan and goals for the child. Sometimes members of a therapeutic network have differing opinions about the best treatment approaches. At the network's first meeting, the members should discuss how they will handle disagreements and should agree on a process for talking about and resolving these differences.

Question 5: When should parents who are fostering or adopting begin to look for supports and services?

The best time to locate the services and supports available in your community is **before** you need them, especially because finding providers who are available and have expertise in the

areas needed may take time. Check with your child welfare agency about services and support that they provide and/or are aware of within the community. If the child is an enrolled tribal member, this may impact access, referrals and coordination of services in the tribal communities. Tribal nations may have resources that children who are enrolled members can access even if they don't live in the tribal community. Families who are fostering or adopting need to identify all of the services and supports available in their community so that they will know where to go and whom to contact when a need arises. Families need to be proactive not only in identifying these services but also in contacting the service providers before a specific service is needed.

Seeking services is a normal part of preparing to foster or to adopt because a family needs to be prepared to address issues that a child is currently facing as well as the challenges that might arise as the child ages and develops. The more supports and services that can be put in place early on, the better prepared a family will be to handle whatever situations arise.

The effects of trauma, separation and loss on a child do not go away quickly. This impact likely will ebb and flow over time, and it might increase at different times throughout the child's life. Even when life has been going well, a new developmental stage, a life transition (such as moving from middle school to high school) or a milestone (such as the anniversary of an important event, a birthday or a holiday) can bring up new questions from the child. When a new developmental stage or milestone is approaching, you need to watch for signs that the child might need additional support. You might notice changes in the child's mood, eating habits or sleeping patterns. If you see such changes, create more opportunities for the child to talk with you; and be prepared to "plug into" your service network to get additional support for the child and yourself.

Question 6: How can parents who are fostering or adopting be effective advocates?

Being an **advocate** for a child means that you speak out in the best interests of the child. Advocacy can mean that you push for something, argue in favor for or against certain services or even plead for something that the child needs. Sometimes a parent who is fostering or adopting will need to advocate for services or supports that the child needs. This advocacy can occur in numerous places, including in the child's school, on the child welfare team and with local service providers. A parent who is fostering or adopting has unique knowledge that comes from living with the child and understanding the child's needs and how those needs are changing over time. As a result, it is important for a parent who is fostering or adopting to stay involved with the child welfare team and the child's service providers to make sure that the child is receiving the supports needed to excel.

Listed below are some strategies that you can use to be an effective advocate for a child that you are fostering or adopting:

- If the child is involved with the child welfare team, make sure to consult with the team and the case manager before you do any type of advocacy.
- Attend meetings and events, and stay informed about the child's progress in school and other areas.
- Keep a record of services that the child has been offered and those that have been requested.
- Use ***child-first language*** to identify the issue or need in a way that refers to the child first and the issue or need second. For example, instead of saying "an autistic child," say "a child with autism." Instead of saying "Jayme is developmentally delayed," say "Jayme has difficulty being focused and completing tasks."
- Assume that everyone has the child's best interests at heart.
- Express the issues of concern to you clearly, and state the outcomes that you want.
- Understand and address the issue not only from your own viewpoint but also from the opposing point of view. This will help you to anticipate questions and to reduce the potential for a "No" response.
- Do your research; know what is available and what is required.
- Talk less, and listen more. Often, the other party eventually will get to the answer you need if you let that person talk.
- Bring a backup. Having someone with you will help you to stay focused on your goal. Your backup can take notes and offer suggestions. Choose someone who is emotionally neutral, professional and able to act as a notetaker.

Question 7: How can a parent who is fostering become an active partner with the child welfare team to ensure that the child's needs are being met?

Open communication with the child welfare team is essential to making sure that the child's needs are met. The team can get information from the child's history, but you have the day-to-day information about the child. Together these produce a full picture of the child's needs. Keep track (preferably in a logbook or notebook) of all the issues and strategies you have used successfully to address the child's needs. Document milestones and important events as well to keep a record of the child's successes, interests and talents. Keep the case manager informed of the child's progress, and alert the case manager about any issues that arise. Attend meetings held by the child welfare team; bring along documentation related to the child's school, medical care, dental care and mental health providers.

Question 8: What is the Child Welfare Information Gateway?

The Child Welfare Information Gateway (www.childwelfare.gov) is a resource-rich, online "virtual library" of everything related to child welfare in general, foster care, adoption, kinship care and more. It includes hundreds of easy-to-understand articles about a wide range of topics, including parenting, children's issues, school, transitions, medical and mental health

issues, parenting teens and more. The website has a search option; so, you can type a few key words into it to find what you need! You also can find a listing on the site for each state or tribe's foster care and adoption manager and their contact information. The Child Welfare Information Gateway also includes information about each state or tribe's laws and regulations related to fostering and adopting a child. The website additionally includes your community's child welfare data.

Question 9: What are some of the informal supports that you potentially can use when raising an American Indian Alaskan Native child?

American Indian Alaskan Natives always have had built-in networks of persons who can be depended on to help, especially with raising children. These networks of individuals and groups can be considered family through blood relation or "like kin." Perhaps similar to your own experience in your upbringing, a child of American Indian Alaskan Native heritage may refer to pseudo family members (fictive kin) as the child's other mom or dad, uncle, auntie, siblings, cousins, mentors, coaches and teachers who are like kin to the child. This is in keeping with the view that all of life is relational and that many communities are one large extended family of relatives whose basis is respect.

It is important for you to gain knowledge and understanding of the child's pre-existing relations (those prior to and while in foster care) to maintain healthy connections for the child, when possible. Your support for positive relationships -- particularly those that involve culture -- is essential to the child's well-being. Culture is an important factor in the well-being of American Indian Alaskan Native children. These types of informal networks can be elders, tribal mentors and others who are knowledgeable concerning tribal traditions and who keep crucial tribal customs. These culturally relevant resources can be particularly helpful meeting a child's needs, especially in helping the child to have and to support a sense of belonging.

You cannot assume who or what is important to a child; so, it is never too late to ask and to involve these individuals in the life of the child in your care, when possible. Below are some examples of questions to ask the child and others connected with the child, including the child's family and members of the child's tribal nation. You might ask open-ended questions (those that elicit answers to who, what, when, where and why):

- Who is important to you and your family and the child?
- Whom do you call when you need help?
- What can you tell me about the people who help you or other members of your family or [Fill in the name of the child.]?
- How do they help you, other members of your family or [Fill in the child's name.]?

- What overview can you give of tribal or clanship affiliation; tribal traditional or informal adoption practices; other ways of knowing who is kin or “like kin” through blood, cultural or other recognized tribal practices; American Indian Alaskan Native community structures that can provide inclusive, culturally safe environments for the child and the parents fostering or adopting the child?

To gather perspectives about the degree of helpfulness and strength of these informal networks and supporters, you might ask questions of the child or the child’s family such as:

- Whom do you see or talk with regularly?
- How does the [Fill in the individual, community or group name.] help to support you?
- Which supports that we have talked about are particularly helpful for you, your family or the child, if any?
- Which supports that we have talked about not particularly helpful for you, your family or the child, if any?
- Which supports that we have talked about are stressful for you, your family or the child, if any?

All of the informal resources outlined for the child can be applicable as well to the parent who is fostering or adopting. Interviews conducted with American Indian Alaskan Native parents who are fostering or adopting have revealed that peer support through informal groups is especially helpful. Those interviewed found that peer support, among other factors mentioned, helped them not to feel alone or defeated when they faced parenting challenges.

Raising Your Kin

What's Happening

No matter why or how they came to live with you, your relative's children will benefit from being in your home. When children cannot be with their parents, living with a family member may provide:

- Fewer moves from place to place
- The comfort of a familiar language, culture, and family history
- A chance to stay with siblings
- More contact with their parents, depending on the situation

What You Might Be Seeing

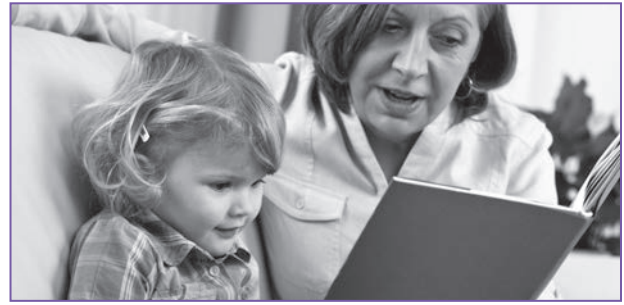
Despite these benefits, the children will face some unique challenges:

- They may feel insecure and unsure that you will take care of them.
- They may act out or challenge you.
- They will miss their parents.
- They may be anxious or depressed.
- They may seem young or act too old for their ages.

What You Can Do

It will take time for your relative's children to feel safe and secure in their new home with you. You can encourage these good feelings in a number of ways:

- Set up a daily routine of mealtimes, bedtime, and other activities.
- Help the children feel "at home" by creating a space just for them. Allow them to bring comfort items from home, such as bedding, stuffed animals, and photos or posters.
- Talk to the children, and listen when they talk to you.



- Set up a few rules and explain your expectations. Then, enforce the rules consistently.
- Reward positive behavior. When children make mistakes, focus on teaching rather than punishing.
- Be as involved with their school as you can, and encourage your children to participate in school activities.

This is a big job, and you may need help from your community. Here are some suggestions:

- Help with housing or other bills, clothing, or school supplies may be available in your community to help you meet the children's needs.
- Join or start a support group in your neighborhood. Often there are local kinship caregivers support groups.
- Ask for help and referrals from a church leader, the counselor at the children's school, or a social services agency.
- If necessary, get professional help to address any special needs your relative's children may have, such as medical care, mental health care, or special education. Use respite care if it is available.

For more information on support for kin raising children, visit Information Gateway's About Kinship Care web section at <http://www.childwelfare.gov/topics/outofhome/kinship/about/>.

Remember: Parenting a relative's child brings special challenges and special joys. Do not hesitate to ask for help or seek services in your community for yourself and your children.

This tip sheet was created with information from experts in national organizations that work to prevent child maltreatment and promote well-being. At <https://www.childwelfare.gov/topics/preventing/preventionmonth/resources/tip-sheets/>, you can download this tip sheet and get more parenting tips, or call 800.394.3366.

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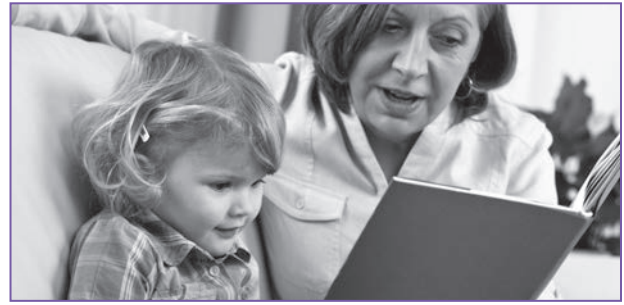
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Resources for Relative and Kinship Caregivers

This section provides resources for kinship caregivers and outlines where relatives can go to find the support they need to be successful. Resources include handbooks and information about legal, financial, and other issues common to kinship families. The section also provides guidance on changing family dynamics and establishing permanency.

- Guides and Handbooks
- Legal and Financial Information
- Impact on Caregivers
- Changing Family Dynamics
- Establishing Permanency

GrandFacts: State Fact Sheets for Grandparents and Other Relatives Raising Children

Grandfamilies.org (2019)
Provides 52 State-specific factsheets, including information on kinship caregiver data, State programs and local resources, public benefits, educational assistance, legal information, and State laws. National information and resources for Washington, DC, are also included.

Grandfamilies and COVID-19: Families of Unique Origins Face Unique Challenges

Day-Burget (2020)
Robert Wood Johnson Foundation
Explores the unique challenges faced by grandfamilies during the COVID-19 pandemic, highlights the benefits of kinship caregiving, and lists policy and practice recommendations to support grandfamilies and kinship caregivers during the pandemic.

Grandfamilies Resources

Grandfamilies.org (2019)
Gives access to free and online resources in support of grandfamilies, including information on laws, financial assistance, health care, housing, caregiver support, education, and more. The site also includes links to national organizations and publications for kinship caregivers.

GRAND Resource: Help for Grandfamilies Impacted by Opioids and Other Substance Use

Generations United (2019)
Provides tips, useful information, and a list of resources to help grandfamilies, both inside and outside the foster care system, impacted by opioids or other substances.

Kinship Caregivers and the Child Welfare System

Series Title Factsheets for Families
Author(s) Child Welfare Information Gateway
Availability [View](#)
[Download \(PDF - 575KB\)](#)
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[Ordene \(Gratis\)](#)
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Discusses issues of interest to the growing number of grandparents and other relatives caring for children whose own parents are unable to care for them. Sometimes, the arrangement (referred to as "kinship care") is an informal, private arrangement between the parents and relative caregivers; in other situations, the local child welfare agency is involved. This factsheet is designed to help kinship caregivers--including grandparents, aunts and uncles, other relatives, and family friends caring for children--work effectively with the child welfare system. Resources, such as links to more detailed information or places to find help, are included.

Kinship Navigator Programs Practical Tips and Resources

Generations United (2020)
Provides practical tips and resources for kinship navigator programs to assist caregivers in learning the programs and services. It also summarizes federal program requirements and tips for programs that build on these legal requirements.

Kinship Resources

Kids Matter, Inc. (2016)
Lists resources that aid kinship caregivers, including grandparents raising grandchildren, young adults raising younger siblings, and all forms of extended kinship families. The site also includes links to national organizations.

Partnering With Relatives to Promote Reunification

Series Title Factsheets for Families
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[Ordene \(Gratis\)](#)
Year Published 2020

Shares stories and advice from caregivers and birth parents who have experienced kinship care on the importance of maintaining boundaries, managing family dynamics, building trust, positive parenting and communication, and securing support.

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Spotlight On

Kinship Caregiving Options: Considerations for Caregivers [PDF](#) (PDF - 4,440 KB)
American Bar Association (2021)

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SENSORY INTEGRATION

SENSORY INTEGRATION RIGHT TIME VIDEO

Key Points

General Information

Starting in infancy, children begin to discover the world through their senses. Sometimes children have difficulty understanding the information that comes in through their senses. When this happens, their difficulty processing sensory information can affect how a child learns, plays, and forms relationships.

Part 1: Defining Sensory Integration and Sensory Processing Disorder

- Humans have five external senses: vision, hearing, smell, taste, and touch.
 - These five senses have receptors for receiving information from outside the body. For example, our ears are receptors for sound (hearing) and our eyes are receptors for vision.
 - Our senses continuously receive and interpret information from the environment all day long.
 - We take in information through our senses and act on that information every day without even thinking about the process.
- We have two additional senses that are internal and less well known. These are sometimes called the “hidden senses” because the information comes from the inside the body rather than from outside the body. The two internal senses are the vestibular sense and the proprioceptive sense
 - The vestibular sense is located in the inner ear:
 - The receptor for this sense is movement, especially head movement.
 - The vestibular sense tells a person if their head or body is moving, giving them a sense of occupying space and is responsible for a person’s balance.
 - Examples of vestibular sensory inputs include spinning, swinging, and rocking. .
 - The proprioceptive sensory input comes from the muscles and joints in the body.
 - The proprioceptive sense is activated anytime we push/pull or put tension on the muscles and joints.
 - Without proprioceptive sense information, we would not know what our body parts are doing or how to coordinate moving them. For example, when we move our feet and legs to walk upstairs, proprioception updates our brain so it contracts the muscles at just the right time, putting enough pressure on the joints so we successfully climb one step at a time.
- The term “sensory integration” refers to the brain processes by which we take in information through all of our senses, register that information, organize it, and then respond to the sensory information. This theory was introduced in the 1960s by Dr. A. Jean Ayres.



- Sensory processing disorder is a condition in which the brain has trouble receiving, organizing, and responding appropriately to information that comes in through the senses.
- Every person's responses to sensory input falls along a continuum or scale; each person has preferences and a different threshold for how much input they can tolerate from each sense. Sensory input can be understood like cups being filled — each person has a different point at which their cup (sense) is too full or empty. When a person's sense/cup overflows, the person can't handle any more input for that sense.
- Every person has different size cups for their senses. Some people might have big cups for every sense, some might have little cups for each sense, and still others might have different sizes of cups for different senses. For example, the same person might have a big cup for hearing and be able to handle all the noise input in the world with no problem, but at the same time this person might have a little cup for touch and not be able to handle certain kinds of touch at all.
- Most people learn to adapt to too much or too little sensory input. When we have too much sensory input, we figure out how to avoid that level of input (e.g., not eating certain foods, avoiding crowds), find ways to manage our environment (e.g., finding a quiet place to work), or take steps to lessen the effects of unwanted sensory input (e.g., deep breathing or meditation). If we need more sensory input, we adapt to get extra sensory input such as riding a roller coaster or listening to loud music.
- When a child cannot handle sensory input and their sensitivity gets in the way of daily functioning, it could signal a sensory processing problem. As such, it is critical for parents who are fostering or adopting to “tune in” to the child and be aware of the child's behavior so they can determine if the child is over or under stimulated.
- When children have challenges with sensory processing and integration, it can show up as behavior problems because they do not take in the world the same way that others do. A parent who is fostering or adopting should ask for an evaluation if they see a child's behavior getting in the way of typical activities and social functioning.
- Problems with sensory integration can occur in three areas, but many don't fit in just one area:
 1. **Sensory avoiding** — refers to children who over respond to sensory information. Examples of sensory-avoiding behaviors include dislike of loud noises; dislike of bright lights; difficulty being in a crowd; not liking to be touched or hugged, even by someone close to them; and/or being extremely bothered by certain textures such as scratchy tags on clothing or having their socks off.
 2. **Sensory seeking** — refers to children who need more sensory input to function or crave more sensory information. Examples of children's sensory-seeking behaviors include clumsiness or frequently falling down; running around the house and crashing into things; climbing and jumping off of things; spinning, hopping, twirling as fast as possible; and touching everything with their hands, including other people.
 3. **Under responsive** — refers to children who underreact to sensory input. Under-responsive behavior can be more difficult to identify than the other two sensory integration problems because under-responsive behaviors are less obvious and are often overlooked. Examples of children's under-responsive behaviors include hanging back and not getting involved with peers or their environment; being very passive, inactive, or sitting around; being unaware of loud noises; not noticing pain in response to bumps and cuts; and being too “easy.”



Part 2: Managing Sensory Processing Challenges

- It is important for parents who are fostering or adopting to not only try to understand how a child's early experiences have influenced their sensory integration but also try to be a "sensory detective" so that they can create a "sensory diet" that can meet a child's needs.
- Starting at the beginning of life, all children need sensory experiences that engage their senses. For young infants, sensory stimulation comes through parents rocking them, feeding them, interacting with them, looking into their eyes, and showing them the world. Children who have not had enough sensory stimulation or who had challenging experiences as infants are more likely to have sensory processing difficulties as they grow up.
- Parents who are fostering or adopting will need to observe the child's behavior to identify sensory needs. Being observant about potential sensory problems will help parents to know not only how and what a child needs to be successful but also how to help the child learn what they need at a given time. Parents who are fostering or adopting can be sensory detectives by
 - Keeping a journal of the child's behavior, tracking when children struggle and then trying to identify if a pattern exists or if certain things seem to act as triggers;
 - Noticing the time of day when challenges seem to occur most often, such as before mealtimes or at bedtime; and
 - Paying attention to when children look for extra sensory experiences, whether anything triggers their need for extra sensory input, or when they seem to pull away.
- It can be tricky to tell the difference between a misbehavior, a sensory-seeking behavior (e.g., crashing into walls or people), or a sensory-avoiding behavior (e.g., hiding). A child's sensory problems might increase during times of elevated stress. Tracking behaviors helps parents plan strategies for stressful times when a child might have greater difficulty with sensory behaviors.
- To maximize a child's success, parents who are fostering or adopting can introduce a "sensory diet" consisting of activities and adaptations that give the child the sensory input they need while minimizing the things that distract or overwhelm the child. Parents often work in partnership with an occupational therapist to create a sensory diet based on the specific needs of the child.
- Sensory diets can be thought of as a "mix 'n match menu."
 - For a child who seeks more sensory input and feels the need to hit or crash into things, the sensory diet might include a pillow mountain or a punching bag. Other sensory diet options might include activities with high tactile sensory inputs such as finger painting, shaping clay or Play-Doh, or playing with a water and sand table.
 - For children who are overly responsive to sensory input and are sensory-avoidant, the sensory diet might include giving the child noise-canceling headphones, a white sound machine to mask background noise, dimmer switches for lights, or tag-less clothing options.
 - For children who over respond to sensory input, a balanced sensory diet would likely include activities to increase the child's "response threshold" so the child will eventually be able to handle more sensory input. Children who are under responsive need more sensory input than other children to register the same sensation. For example, if a child moves slowly in the morning and has difficulty being alert, the sensory diet could include doing 10 jumping jacks as soon as they wake up or taking a shower that ends with cold water.



- Giving children access to objects that simulate their senses throughout the day might help to avoid behavior meltdowns. This part of the sensory diet could include activities that involve slimy things, bouncy balls, weighted blankets, and things with nice smells such as hand lotion. Water activities might also be a particularly good match for some children's sensory needs.
- Activities that are sensory rich do not take away from family time, but rather can shape family time. Sensory-rich play is great because these activities can meet the children's sensory needs while building attachments among family members.

Part 3: Strategies for Success

- Mealtime is a common time for sensory challenges to come up. Children who are overly responsive might have concerns with how a certain food looks, feels, the texture in their mouth, or the sounds when they chew the food. Mealtimes can also cause sensory overload in other ways such as multiple conversations, dishes clanking, or the sounds of forks and knives scraping on plates. Some children might not be able to sit still and stay at the table, which can make it difficult for the family to eat a meal together. However, the family can use adaptations such as "sit and move" cushions that allow a child to wobble in their chair, or giving a child a fidget toy to keep their hands busy so that they are better able to sit at the table during meals.
- School is often a challenging environment for children with sensory processing needs. Children can find it difficult to learn when sensory input is getting in the way. For example, when a child's senses are overwhelmed by the chair they are sitting in, the clothing they are wearing, the noise in the classroom, or the smell of the cleaning products used in the classroom, then the child might be unable to focus their attention on the lesson. Over-stimulated children might be up and down a lot or have a hard time staying focused. Parents who are fostering or adopting might need to advocate with the school on behalf of the child.
 - Parents should partner with teachers to get the child's sensory integration needs met.
 - Parents might need to request an Individualized Education Program (IEP; for students who qualify for special education) or get a Section 504 plan (for students who require some form of accommodation but do not meet criteria for special education). These documents can detail anything the child needs such as when a child can have a snack, where a child sits and what they need to sit on (such as a wiggle or sensory seat, or with a weighted lap pad), or what can be put in or under the child's desk to give the child something to fidget with (such as either side of Velcro or a smooth rock).
- Bedtime can be especially challenging for children with sensory processing needs. Some children might have a hard time falling asleep because they have difficulty calming themselves. Parents who are fostering or adopting can help a child learn to calm themselves by introducing calming routines for bedtime such as taking a warm bath (if that works to calm their sensory system), followed by a story, and then going to bed with a weighted blanket. Other children might need to have stimulating activity right before bedtime (such as a pillow fight or playing outside), which is followed by the calming activities.
- As with many aspects of fostering and adopting, parents need new specialized parenting tools and the support of a team to address the needs of a child who has sensory integration needs.



SENSORY INTEGRATION CHALLENGES

Tactile: Sense of Touch

TACTILE		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Seeks out difference in temperatures, vibrations, & sensations	Difficulty knowing where they are being touched	Distressed by clothing (tags/ seams)
High pain tolerance (bite or pinch self or others)	Difficulty knowing what they are holding without looking	Avoids certain textures
Seeks oral stimulation (sweet, salty, or bitter; carbonation or frozen food)	Difficulty searching with hands through a bag	Avoidant of light touch (tickling) but may crave deep touch (bear hug)
Always touching things & always messy/ dirty "impulsive"	Difficulty describing how an object feels (smooth, bumpy, etc.)	Distorted walking (walking on toes)

SENSORY INTEGRATION CHALLENGES

Vestibular: Sense of balance, movement and spatial orientation through head position, centered in the inner ear

VESTIBULAR		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Engages in risky behaviors	Difficulty in determining body posture	Excessive fear of falling during daily movement activities (biking, climbing)
Runs instead of walks	Unaware of body in space	Avoids hanging upside-down
Engages in constant motion (often DX ADHD)	Falls out of their chair	Avoids movement (spinning, swinging, level changes, rocking)
Seeks out spinning, swinging, rocking	Poor perception of elevation	Prefers sedentary activities

SENSORY INTEGRATION CHALLENGES

Proprioception: Sense of self and movement through receptors in muscles and joints ear

PROPRIOCEPTION		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Seeks out hard pressure (stomps feet when walking, tight clothing, tucked in tightly, bear hugs)	Difficulty regulating pressure to pick up or hold an object	Avoids pushing, pulling, & carrying activities
High pain tolerance "rough houses"		Difficulty holding objects
Uses too much pressure to complete an activity (breaks crayons/ pencils)	Difficulty regulating body output to preform a physical activity	Oral defensiveness (difficulty chewing/ sucking)
Biting/ sucking of fingers, clothes, & objects		Prefers sedentary activities

REGULATION AND SENSORY INTEGRATION

Self-Regulation for Parents Who Are Fostering or Adopting

As parents who are fostering or adopting, one of our critical tasks is to help our children who have experienced trauma, loss, and separation learn self-regulating skills as an element in their healing and growth. When triggered, children who have experienced trauma, loss or separation can have behaviors that escalate and potentially make a stressful situation worse. It is important to understand that we cannot help children regulate if we are not first regulated ourselves.

What Does It Mean to Be Regulated?

Self-regulation involves observing and then managing your own feelings and reactions. As a parent you want to be able to attend to what is important in the moment – maintaining a calm presence and “taking care of business”; in this case, the business of being an effective parent. Sensory processing allows you to recognize what your body and your environment are telling you, understand the meaning or impact, and respond accordingly.

There are a number of strategies that you can use to self-regulate and the more you practice them, the more readily you will be able to access them in times of need. Some recommended ways to self-regulate include:

- Practicing mindfulness – this is a way of being in the moment, aware of your presence in space and time, and without judgment about yourself.
- Making time to engage in sensory input that is both satisfying and soothing. By caring for yourself in those moments, even for just a few minutes, you can find renewed perspective. A warm bath, soothing music, aromatherapy, a walk in nature, or engaging in an activity that you enjoy can all help you be at your best.
- Engage in the activities described below – both on your own when possible, and with your child. You both will benefit and practicing together will help build attachment and attunement!

How Can You Help A Child To Regulate?

The activities in this handout may help children to stay focused and organized throughout the day. Just as you may jiggle your knee or chew gum to stay awake or soak in a hot tub to unwind, children need to engage in stabilizing, focusing activities as well.

Everyone has a unique set of sensory needs. You can expect that an over-aroused or agitated child will need calming activities while a tired, lethargic, or under-aroused child needs stimulation. Work with the children you are caring for to determine the best “menu” of activities to meet their individualized needs. Having a practiced plan in place can be a very effective way to equip yourself and the children with effective strategies when difficult or triggering situations occur.

As you and the children you are caring for gain more experience in using these sensory activities and cues, you may find that they are not triggered as often, may be able to increase their attention span, may decrease difficult behaviors, and gain experiencing managing transitions. And remember, while many of the activities may seem like things you would typically do with younger children, they can be fun for all ages; especially for youth who lost opportunities to be children when they were young.

Proprioception

Proprioception is the body’s ability to sense itself, and is guided by receptors in the body (skin, muscles, joints) that connect with the brain through the nervous system so that even without sight, a person knows what his or her body is doing.

Children who are clumsy, uncoordinated, and sensory seeking are often experiencing proprioceptive dysfunction. The following are common signs of proprioceptive dysfunction:

- **Sensory seeking** (pushes, writes too hard, plays rough, bangs or shakes feet while sitting, chews, bites, and likes tight clothes)
- **Poor motor planning/control & body awareness** (difficulty going up and down stairs, bumps into people and objects frequently, difficulty riding a bike)
- **Poor postural control** (slumps, unable to stand on one foot, needs to rest head on desk while working)

Activities to Support Proprioceptive Input:

- **Jump!** Have the child jump on a mini-trampoline or rebounder or play hopscotch.
- **Push and pull.** Have the child vacuum, carry books from one room to another, help wash windows or a tabletop, and transfer wet laundry from the washing machine to the dryer.
- **Heavy lifting.** Without straining, shovel snow or lift free weights.
- **Push, pull, and carry.** Rake leaves, push heavy objects like firewood in a wheelbarrow, do push-ups against the wall, wear a heavy knapsack (not too heavy!) or pull a luggage cart-style backpack, or mow the lawn with a push mower.
- **Reassuring pressure.** Use a weighted vest or lap pad from a therapy catalog, or place light weights in the pockets of a fishing, athletic or regular type of vest.

Vestibular

Vestibular input (movement and balance, centered in the inner ear) is critical for brain development beginning in utero. It is how we calm infants and make them smile and giggle. We rock them, bounce them, swing them, and sway them. All of this movement is doing a whole lot more than putting them to sleep or making them smile. It is creating a foundation for the brain and development. This need for movement continues throughout life and is especially crucial in the developmental years, but it is necessary throughout our lives to support self-regulation.

Creating opportunities for experiencing missed childhood activities can be very beneficial and has the added benefit of providing time and space for you to play together – a wonderful healing and relationship-building strategy.

Activities to Support Vestibular Input:

- **Swing.** Encourage the child to swing on playground swings, trying various types of swings and movements, such as front to back and side to side.
- **Get upside down.** Have the child hang upside down from playground equipment, do somersaults, or do a headstand.
- **Swing and roll.** Encourage the child to use playground swings and roll down a grassy or snowy hill (which good proprioceptive input as well).
- **Spin.** Encourage the child to go on amusement park rides that spin.
- **Swing and spin.** Swing on a hammock, use playground swings or merry-go-round
- **Move that body!** Do cartwheels, swim (doing flip turns and somersaults in the water), do jumping jacks, and dance.

Tactile

The tactile sense detects light touch, deep pressure, texture, temperature, vibration, and pain. This includes both the skin covering your body and the skin lining the inside of your mouth. Oral tactile issues can contribute to picky eating and feeding difficulties.

Tactile dysfunction can be seen in several categories:

- Tactile defensiveness is when a child over reacts to harmless, light touches, and may become anxious, aggressive, or withdrawn. Messy activities, certain foods, haircuts or dental cleanings, and the way clothes “feel” can also trigger exaggerated reactions. For many, even the feeling of a tag inside a shirt can sensory overload.
- Hypo-responsiveness is a very low arousal level, resulting in an inability to be aware of touch. With this dysfunction, a child may not register pain or discomfort, understand others’ responses to pain or discomfort, or have an awareness of their body in relation to space or other people.

- Touch-seeking is a need for excessive amounts of touching. Some children will try to touch everything. Often children will rub or bite their skin, twirl hair (their own and others'), and chew on inedible objects like pencils, toys, and clothing.

Activities to Support Tactile Input:

- **Food and drink.** Provide the child with frozen foods (popsicles, frozen fruit or vegetables) and mixed temperature foods (hot fudge sundae, hot taco with cold toppings, etc.).
- **Get in touch with nature.** Encourage the child to walk barefoot in the grass (avoiding pesticide applications), sand, or dirt. Have the child garden and repot indoor plants.
- **Choice in clothing.** Encourage the child to shop with you, trying on everything to ensure that it feels right. Also a great way to spend positive time together!
- **Tactile hobbies.** Sculpt, sew, weave, crochet or knit. Create a scrapbook (which involves lots of pasting and working with different textures). Use sandpaper to smooth a woodworking project. Make things out of clay, and try using a potter's wheel.
- **"High fives"** throughout the day.
- **Drawing** in sand or salt.
- **Tactile box** to collect small items and different textures to match and sort.
- **Face and body paints**, temporary tattoos or stickers.

Auditory

Auditory input refers to both what we hear and how we listen, and is connected with the vestibular sense. In addition to various types of recorded and live music, there are some ways children can get calming and organizing auditory input.

Activities to Support Auditory Input:

- **Get outside and listen.** Go to the beach or sit still and listen to the rain, thunder, and so on. If you hear birds singing, try to identify what direction a bird is calling from.
- **Listen to natural sound recordings.** There are many recordings of rain falling, ocean waves, bird songs, and so on. Sometimes natural sound recordings also feature light instrumentation with flutes, keyboards, etc. Some children find they sleep better if they play such music.
- **Find calming, focusing music.** Listen to music specially engineered to promote calm, focus, energy, or creativity. Keep in mind, of course, that musical preference is very individual, so this will take some experimentation.
- **Encourage learning to make music.** Provide the child with musical instruments and encourage the child to play and even take lessons.
- **Create pleasant sounds.** Get a white noise machine, tabletop rocks-and-water fountain, or aquarium.

Visual

Visual input can often be overstimulating for a child with sensory issues. Think about ways you can simplify the visual field at home or school for a calming, organizing effect. Alternately, if the child seems “tuned out” and doesn’t respond easily to visual stimulation, add brightly colored objects to encourage visual attention.

Activities to Support Visual Input:

- **Avoid excess.** Hide clutter in bins or boxes or behind curtains or doors—a simple, solid-color curtain hung over a bookshelf instantly reduces visual clutter. In rooms where the child spends a lot of time, try to use solid colored rugs instead of patterned ones. Solid-colored walls in neutral or soft colors are less stimulating than patterned wallpaper in bold colors.
- **Seat the child separate from others.** Have the child sit at the front of a classroom where there is less distraction. The child may also need to sit away from the window or in the back of the room. Work with the teacher to see which seat placement works best.
- **Be color-sensitive.** Avoid toys, clothes, towels, etc., in colors that the child finds distressing.

Smell

Olfactory input (sense of smell) comes through the nose and goes straight to the most primitive, emotional part of the brain. Many times a smell can trigger a trauma reaction, so take note of and ask about smells that are distressing.

Activities to Support Smell Input:

- **Smell inventory.** When a child first moves into your home, invite the child to take a tour throughout your house and yard, using their nose to determine both comfort and discomfort. Do what you can to adjust any odors to increase their sense of belonging.
- **Scent memories.** Ask the child what smells from their past or present bring warm or happy feelings and memories. Bring those smells (apple kugel baking, pine tree, etc.) into your home naturally.
- **Smell stuff!** Explore scents with the child to find ones that work best to meet your goal (either to soothe or wake the child up). Everyone has different preferences, but vanilla, lavender, and rose scents are generally calming. Peppermint and citrus are usually alerting. For example, if the child needs help staying calm and loves vanilla. You can use high-quality vanilla soap and bath oils at bath time, vanilla candles or essential oils in an aromatherapy machine at bedtime, and vanilla body lotion. Avoid synthetic scents. Some children do not tolerate strong scents well. For them, use unscented laundry detergent and shampoos, and other unscented products.

Q & A: SENSORY INTEGRATION

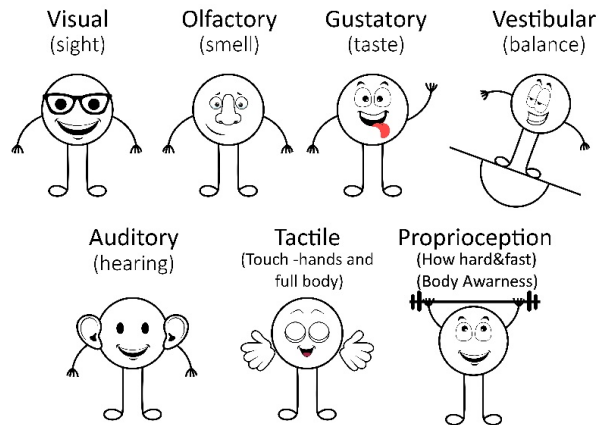
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Question 1: What are the senses?

Sensory processing is the brain's ability to take in, organize, and respond to information from our senses. This is how we make sense of the world around us. The five basic senses are touch, sight, hearing, smell and taste. We also get information from two internal senses: vestibular (sense of balance, movement and spatial orientation through head position, centered in the inner ear) and proprioception (our sense of fast or slow movement and of how much force -- hard or soft pressure -- we use or can tolerate). Our brains constantly are filtering and reacting to all the stimuli or inputs from our senses.



Question 2: How do sensory integration challenges impact a child?

Organizing sensory input from multiple senses is called *sensory integration*. Sensory integration challenges can have an impact on every area of a person's life, including a child's social, emotional, physical and cognitive development. These challenges can cause a child to have a hard time concentrating, to have trouble with organization, to feel low self-esteem and a low sense of confidence, to lack self-control, to have difficulty self-regulating, to have challenges forming attachments and relationships, and to experience problems with feeding.

Question 3: How can I know if a child is exhibiting a sensory integration challenge versus a behavioral challenge?

One simple way to tell the difference is to notice what stops the behavior. **Sensory integration** challenges often continue until the child gets help regulating their body. A child with sensory challenges may not be able to calm down without help or changes to the environment. This might mean changing the environment—like lowering lights or turning off loud sounds—or offering something calming, like a weighted blanket. **Behavioral challenges** usually stop when the child gets something they want—like a reward, a toy, or attention. If the behavior happens when the caregiver is watching but stops when the caregiver looks away, it's likely the child is seeking attention rather than reacting to a sensory issue.



Question 4: How do a child's sensory needs change as the child's regulation and arousal levels change?

Our sensory needs go up and down throughout the day. Depending on a child's arousal level and degree of ability to self-regulate, the child might be set up for success or might face sensory challenges.

If the child's brain and whole body are nourished with everything that the child needs — sufficient restful sleep, adequate and frequent water and food (stabilized blood sugar level), purposeful movement and meaningful interaction — then the child will be more likely to respond appropriately to sensory inputs.

However, if the child is hungry, thirsty, tired or lonely or has begun a new activity that is challenging, then the child's brain and body already are having a hard time regulating, making sense of all the sensory inputs and figuring out how to meet those needs. When a child is juggling too many needs, sensory challenges are more likely to occur.

A child who has experienced trauma, separation or loss already has a difficult time with self-regulation and handling all of their needs. Trying to handle many different needs at the same time — relational and sensory needs plus needs for dealing with trauma and regulation — can be overwhelming for the child.

Question 5: What is sensory processing disorder (SPD)?

Sensory processing disorder (SPD) is a condition in which the brain has trouble receiving and responding to information that comes into the body through the senses. The brain of a person with sensory processing disorder cannot process all the information entering through *seven* senses at the same time to develop a clear picture of what's happening internally and externally.

Sensory processing disorder often is identified when children are in their toddler years. A diagnosis of SPD must be determined by an evaluation conducted by an occupational therapist. Even if the child is not diagnosed with SPD, the child might have sensory needs that will impact the child's abilities and behaviors and therefore will need to be addressed.

Children with *sensory seeking* behaviors may seem to require “more than usual” amounts of certain inputs or actions. Children with *sensory defensive* behaviors may seem “overwhelmed” by certain situations and sensations; so, they try to avoid these any way they can. Children with *sensory discrimination* behaviors may struggle with determining differences in sizes, shapes and textures. They also may have difficulty determining the sources of sounds and the position and movement of their bodies.



Table 1: Possible signs of **sensory integration** challenges

TACTILE		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Seeks out difference in temperatures, vibrations & sensations	Difficulties knowing where they are being touched	Distressed by clothing (tags/seams)
High pain tolerance (bite or pinch self or others)	Difficulty knowing what they are holding without looking	Avoids certain textures
Seeks oral stimulation (sweet, salty, or bitter; carbonation or frozen food)	Difficulty searching with hands through a bag	Avoidant of light touch (tickling) but may crave deep touch (bear hug)
Always touching things & always messy / dirty "impulsive"	Difficulty describing how an object feels (smooth, bumpy, etc.)	Distorted walking (walking on toes)
VESTIBULAR		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Engages in risky behaviors	Difficulty in determining body posture	Excessive fear of falling during daily movement activities (biking, climbing)
Runs instead of walks	Unaware of body in space	Avoids hanging upside-down
Engages in constant motion (often diagnosed ADHD)	Falls out of their chair	Avoids movement (spinning, swinging, level changes, rocking)
Seeks out spinning, swinging, rocking	Poor perception of elevation	Prefers sedentary activities
PROPRIOCEPTION		
SEEKING BEHAVIORS	DESCRIMINATION BEHAVIORS	DEFENSIVE BEHAVIORS
Seeks out hard pressure (stomps feet when walking, tight clothing, tucked in tightly, bear hugs)	Difficulty regulating pressure to pick up or hold an object	Avoids pushing, pulling & carrying activities
High pain tolerance "rough houses"		Difficulty holding objects
Uses too much pressure to complete an activity (breaks crayons / pencils)	Difficulty regulating body output to perform a physical activity	Oral defensiveness (difficulty chewing / sucking)
Biting / sucking of fingers, clothes & objects		Prefers sedentary activities



Question 6: How can a child's sensory needs change with age? Can a child outgrow sensory integration challenges?

Every individual has personal sensory preferences. Our reaction to a particular stimulus or sensory input might be based on our arousal level or our ability to self-regulate at the time when our brains receive and process that input.

A child's sensory needs can change moment-to-moment, day-to-day and year-to-year. A child will not "grow out of" sensory processing challenges. However, with support, the child can learn to tolerate and develop strategies for responding more appropriately to these challenges. To have a positive impact over time on how a child copes with sensory processing challenges intervention and therapy by a professional is required. The goal of this intervention is to increase the ability of the child to self-identify arousal levels and sensory inputs that trigger the child's challenging behaviors while increasing the child's ability to self-regulate. The therapy and skills learned will affect how the child's sensory processing challenges change as the child grows and matures.

Question 7: How do a child's early experiences of trauma, neglect or both affect the child's current sensory experiences?

It is estimated that two out of every 20 children who have had healthy developmental experiences will have sensory processing challenges, compared to 18 out of 20 children who have experienced trauma, separation or loss. Early relationships shape how we interact with the world. When young children do not consistently receive basic forms of nourishment—such as restful sleep, adequate food and water, movement and meaningful connection—it affects brain development, emotional regulation, and learning.

Babies and young children depend on adults to provide a safe, stable environment. If those early caregivers were neglectful, frightening, or harmful, the child may struggle to trust others to meet their needs. In response, they may attempt to meet their own needs in ways that are inappropriate or ineffective.

Early trauma can cause emotional areas of the brain to become overactive and grow larger, while the thinking areas may remain underdeveloped due to the brain's focus on survival. Since the thinking parts of the brain are not fully developed until our mid-twenties, early adversity can have long-term effects.

Our earliest memories are stored in the body. Sensory input—like a sound or touch—sends messages to the brain, which categorizes the experience as safe or unsafe based on past experiences. If the input is linked to a traumatic memory, it may trigger a fight, flight, or freeze response. Verbal memory develops later and helps us make sense of "what happened," but it often cannot override the body's reaction.



For example, if a child experienced sexual abuse where the perpetrator spoke calmly and gently stroked the child's arm beforehand, that same sensory experience from a safe adult may later trigger fear or distress. Similarly, children who have lived in orphanages, group care, or neglectful environments may lack foundational sensory and relational experiences, making it more difficult for them to process everyday sensory input in a regulated way.

Question 8: How do sensory integration challenges impact a family?

Successfully supporting a child with sensory processing issues involves the whole family. A family fostering or adopting a child may find the process of identifying and then accommodating the child's needs very time-consuming and stressful. All family members will need to have plans and strategies for self-care so that they can cope with the child's behaviors and adapt to meet the child's needs. Informing immediate and extended family members, school personnel and community members about the child's sensory processing issues and proactively educating them about the best ways they can support the child are important. This proactive work will hopefully help to increase appropriate responses and acceptance of the child and decrease the possibility of persons overreacting to the child's behaviors, incorrectly interpreting them or blaming the child.

Question 9: Which strategies can parents who are fostering or adopting use to manage a child's sensory integration challenges?

As a parent who is fostering or adopting, you need to become the child's sensory detective. Identify specific details about the times when the child is experiencing more challenges — the time of day, what is happening and whether the child's basic needs (sleep, food, water, etc.) are met at the time of the occurrence. Identify elements in the environment that cause a negative reaction from the child, such as crowds or noises, smells, types of touch, types of clothing and so forth. Write down all of these clues and keep a journal of your observations over time. This journal can help you not only meet the child's sensory needs but also share the clues with a professional who is helping you to determine the child's sensory needs.

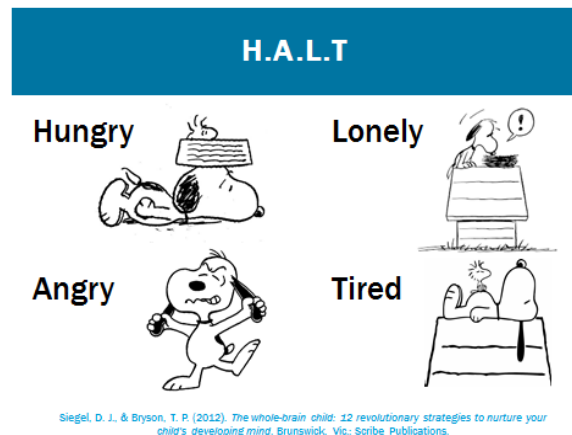
After you have been able to identify some of the child's sensory challenges, be proactive by developing or finding strategies that will help you control the situation and give the child a regulating sensory experience. Examples of proactive strategies include having the child wear a weighted lap pad while traveling in a car, letting the child swing on a playset in your yard before leaving home or buying socks and other clothes for the child that don't have seams or tags. Recognizing patterns and becoming proactive (rather than reactive) can reduce drastically the number of sensory difficulties the child experiences.



It is important for a parent who is fostering or adopting to perform a basic needs check with the child many times throughout each day. You can use the acronym HALT for the check-in.

You might try these strategies as well:

- Develop a **sensory diet** with the help of an occupational therapist. A sensory diet is an individualized, scheduled and strategic activity plan to address the child's sensory needs.
- **Co-regulation** is important in providing sensory interventions for a child. Co-regulation involves using your physical and emotional presence to help the child become calm and attain balance (for example, rocking back and forth while holding a baby to calm the infant). When using co-regulation, be sure you can model the calm behavior that you want the child to exhibit. If you are not calm and regulated yourself (if you are upset, angry or agitated, etc.), then your own lack of balance will have a negative impact on your attempt to use co-regulation to balance the child.
- Identify the child's sensory preferences and adapt to them. For example, if the child prefers strong bear hugs, runs up to you and gives you a big, strong hug, then you need to accept those types of hugs from the child.



Question 10: Which strategies can parents who are fostering or adopting use to meet a child's sensory needs in school?

Children who have sensory processing challenges can experience difficulties in school. Imagine that you're sitting in a classroom. Think about how much sensory input your brain receives in the room from the lighting, the noise level, the room temperature, the feel of your clothes against your skin, the texture of your desk and the smell of the person next to you. The brain of a child with SPD might be able to filter some of these sensory inputs; but because of heightened sensitivity to certain sensory inputs or a lack of responsiveness to others, the lights might be too bright, a clothing label may feel too scratchy, or background noise may be too loud for the child's brain to filter out these distractions. As a result, these inputs dictate the child's behavior in the classroom.

If you are aware the child has sensory processing challenges, share that information with the child's teacher and school administrators. Because not all educators are familiar with sensory processing disorder or sensory challenges, you need to give them basic information about the child's challenges, along with ideas about how to make changes in the classroom that will help the child feel safe and secure. If the child is seeing an occupational therapist, then you can



have the therapist develop strategies that are specific to the child. Otherwise, find out whether the school system has an occupational therapist who could help to provide strategies that will work for the child.

Some examples of strategies to use in the classroom include:

- Change the child's chair so that it's a better fit for the child. Some schools allow students to sit on large balls that let them move around. Alternatively, provide an inflated seat cushion or pillow for the child's chair at school.
- Eliminate or reduce potential trigger noises such as buzzing and flickering, fluorescent lights.
- Allow the child time for sensory breaks such as walking in circles, jumping on a mini-trampoline or sucking on sour candy.
- Allow the child to bring to school an item to use for fidgeting or a chewable item that can help to calm the child if the child becomes triggered by a sensory experience.
- Allow the child to avoid loud assemblies and loud cafeteria rooms. Sometimes children with sensory integration challenges perform better in quieter areas with fewer people around them.
- Have a clear, visual schedule posted that includes plenty of preparation time for transitions.

● ■ Sensory Processing Issues

Sensory Seeking and Sensory Avoiding: What You Need to Know

By Amanda Morin





At a Glance

- There are two ways kids with sensory processing issues respond to sensory input.
- When kids underreact to sensory input, they may seek out more input.
- When kids overreact, they become overwhelmed and may avoid the input.

Our brains are constantly taking in information from our senses. For most people, processing that information isn't a problem. But dealing with that stream of input is a struggle for kids with sensory processing issues.

Kids don't all have the same reactions to situations and stimuli. But their responses tend to fall into one of two categories.

Some kids tend to be "sensory seekers." They underreact to sensory input or need more of it to function. Others are generally "sensory avoiders." They overreact to sensory input and become overwhelmed and hyperactive.

Learn more about the differences between sensory seeking and sensory avoidance.

Types of Sensory Input

When we think of sensory input, we think of having five senses: sight, smell, hearing, taste and touch. These are some common examples of things kids seek and avoid from those senses.

- **Sight:** Visual patterns, certain colors or shapes, moving or spinning objects, and bright objects or light.
- **Smell:** Specific smells. Some kids like to smell everything, while some kids are able to detect—and object to—smells that other people don't notice.
- **Hearing:** Loud or unexpected sounds like fire alarms or blenders, singing, repetitive or specific types of noises (like finger snapping or clapping).
- **Taste:** Specific tastes (like spicy, sour, bitter, or minty) and textures (like crunchy, chewy, or mushy), chewing or sucking on non-food objects (like shirt sleeves or collars).
- **Touch:** Touch from other people, touching and fiddling with objects, tight or soft clothing, and certain textures or surfaces.

But there are two other senses that affect kids with sensory processing issues. One is the ability to sense body movement, position and balance. This is called proprioception. Sensory-seeking kids will try to get more proprioceptive input. They might give people tight hugs or crash into things to feel the physical contact and pressure. Sensory avoiders will try to get away from those sensations.

The other sense has to do with spatial orientation, or knowing where your body is “in space.” In this case, sensory seekers might rock back and forth, spin or swing, hang upside down or jump from heights. Sensory avoiders may be more physically cautious.

Read more about [how sensory processing issues can affect motor skills](#).

Sensory Seeking: What It Is and How It Looks

Most sensory seekers are undersensitive to input (this may be referred to as “hyposensitivity”). They look for *more* sensory stimulation. Kids who sensory seek may look clumsy, be a little too loud or seem to have “behavior issues.”

Sensory input can help stimulate kids to feel less sluggish. It can also soothe an “overloaded system” and help kids feel more organized in their own bodies and in space. A sensory seeker may:

- Stand too close when talking to others and not have a good sense of personal space. (Learn how one mom taught this to her son using the “elbow rule.”)
- Have an unusual tolerance for pain.
- Walk with loud, heavy steps.
- Enjoy jumping, hopping, and bumping and crashing into things and people—sometimes to the point of being unsafe.
- Not know his own strength. (He may rip paper when writing, break toys or hurt others by accident.)
- Prefer “rough play” on the playground.
- Touch people and objects often.
- Seek out or make loud noises.
- Chew on shirt sleeves or collars and other non-food items.

Sensory Avoiding: What It Is and How It Looks

Most sensory avoiders are oversensitive (this may be referred to as “hypersensitivity”). They experience sensory input more intensely than the average person, and they avoid it because it’s overwhelming to them.

Kids who sensory avoid may seem timid. They may be “picky eaters” or be particular about the types of clothes they wear. A sensory avoider may:

- Not liked being hugged or kissed, even by family.
- Be startled and frightened by unexpected sounds and bright lights.
- Hear background noises other people aren’t able to detect.
- Worry about being bumped in line or touched by other kids while playing.
- Refuse to wear scratchy, tight or otherwise “uncomfortable” clothes.
- Be wary and avoidant of swings and other playground equipment that provides vestibular or proprioceptive input.
- Have trouble knowing where his body is in relation to other people or objects.
- Prefer to be in quieter environments and avoid crowds.

It’s Not Always One or the Other

Not all kids are clearly sensory seekers or sensory avoiders. Some kids may show a combination of these reactions. That's because their responses can change based on their level of arousal or how well they're able to self-regulate.

For example, some kids are fine in familiar settings, but might have sensory meltdowns in crowded, unfamiliar places. Or they might seek out more input to help calm themselves down, when they ordinarily don't.

Knowing your child's reactions and triggers can help you find ways to help him. Talk to the teacher about your child's sensory issues. And get tips on managing meltdowns and helping your child cope with tactile, visual, taste and noise sensitivity.

Key Takeaways

- Sensory seekers are undersensitive to sensory input, while sensory avoiders are oversensitive.
- Some kids may show a combination of these reactions.
- Knowing your child's triggers can help you find ways to help your child cope.

About the Author



Amanda Morin worked as a classroom teacher and as an early intervention specialist for 10 years. She is the author of *The Everything Parent's Guide to Special Education*. Two of her children have learning differences.

Reviewed by



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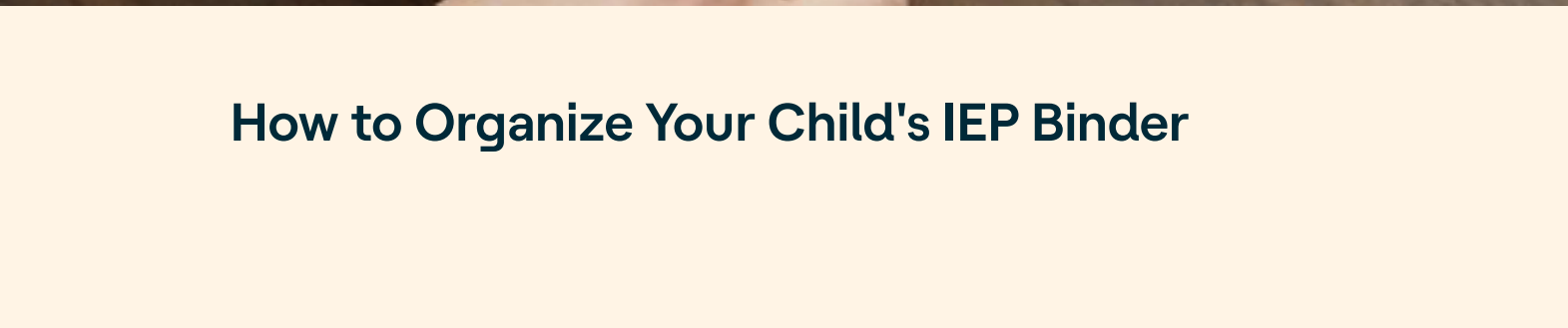


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