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MASSAGE *Message*

Recovering WITH THERAPY

HEALING THE SENSORY INTEGRATION SYSTEM
FOR CHILDREN ON THE AUTISM SPECTRUM

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TREATING AUTISM WITH TOUCH

Addressing challenges,
overcoming obstacles

EFFECTS OF MNRI®

Amazing results in a short time
for Autistic children

AROMATHERAPY FOR ALL

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the treatment of Autism





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Upledger CranioSacral Therapist Tami Goldstein facilitates therapy to Hannah Francis, (age 5). Hannah has recovery from her autism spectrum disorder and her mother Emily Francis says "U-CST was a crucial part of that recovery."

In this photo above, we feature Tami treating Hannah's younger sister.

Ava Francis' (age 4) is neuro typical, but her parents bring her in for CranioSacral therapy to help support her sensory integration system.

Tami Goldstein's insightful article stems from over 14 years experience as a professional CranioSacral and Massage Therapist specializing in autism spectrum disorders and from personal experience on her daughter's journey to recovery from autism. She also shares that expertise through continuing education classes and never ending advocacy. Her passion is evident in the relationships she forms with each individual and their families.

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Touching Autism



TAMI GOLDSTEIN,
WLMT, CST, BCTMB

Autism spectrum disorder is a neurodevelopmental disorder that impairs a child's ability to communicate and interact. Its presentation includes restricted repetitive behaviors, interests, and activities. These issues cause significant impairment in social, occupational, and emotional functioning.

My daughter, Heather, was diagnosed with autism. She was given a bleak prognosis that included a recommendation of institutionalization. Traditional pharmaceutical supports were not working; Heather's neurosurgeon recommended brain surgery. However, it was unlikely that anything would control her daily seizures. Heather's occupational therapist was trained in, and recommended, Upledger CranioSacral Therapy.

I was amazed at the benefits craniosacral therapy, lymphatic massager, and other bodywork provided. Bodywork became and continues to be part of my daughter's multidisciplinary approach to recovery.

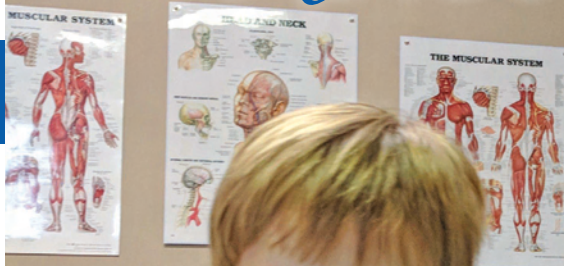
As an international speaker, advocate, author, and educator on autism spectrum disorders, I know how difficult it is to locate and secure supports; waiting lists for support services remain long. I became licensed in massage and certified in Upledger CranioSacral Therapy to help this underserved population.

Massage therapists are trained to recognize the difference between sympathetic and parasympathetic response in soft tissue structures of the body. Given the opportunity to learn about the disability of autism, massage therapists can play invaluable roles in improving the quality of life for individuals with autism.

The benefits of CST that I witnessed inspired me to provide continuing education in bodywork therapy. Years of experience with autism have provided me with insights that guide my work.

Information that may prove helpful:

1. According to a 2016 study at



Tami Goldstein, CranioSacral Therapist facilitates therapy with this young man, age 3 nonverbal, autism spectrum disorder, sensory processing disorder and instability on movement. He received 2 series of sessions facilitated 3 consecutive days in each series. This is the last day of the 2nd series and he is now verbal, more engaged and has greater stability with movement.

Harvard, 96% of autism spectrum disorder patients report altered sensitivity to sensory stimuli; a majority of those cases include tactile sensitivities.

Sensory processing is the ability to take in stimulation, integrate, and filter that information so we can respond comfortably to people and the world around us. Disorder occurs when the body is unable to process, integrate, and respond accordingly. The maladaptive behaviors we see in individuals with autism are their presentation of sensory processing disorders.

2. Learn about the individual's presentation of autism. Identify triggers, identify what calms, and be able to describe a meltdown.

Advance information about an individual allows better preparation for a session. For example, if visual and ocular motor issues have been noted, then overhead lights can be dimmed. To address vestibular system issues, use a weighted lap pad; the weight across the patient's mid-section enables more comfort during the session. These adaptations, as simple

as they sound, offer optimum results from the session.

3. Individuals with autism do not like change. A good approach is to frontload.

Frontloading is advanced notice of change.

Frontloading has included pictures of myself and my office posted on my website, so patients can see me and the environment beforehand.

I frontload prior to beginning a technique. For example, before I facilitate mouth work, the client and I play with the gloves and practice touching the roof of the mouth and/or teeth.

4. Some clients have expressive or receptive communication issues. Some have issues with pragmatics; metaphors, therefore, are not understood. "She's a tough cookie," may cause confusion because for this patient, she's not a cookie, she's a woman. Some individuals are nonverbal.

Choose words carefully. The question, Are you ready to work? allows a child to say, NO. To build rapport, you would have to wait until you received a YES



➤ response before beginning the session.

A better way to phrase that question is, Are we working on the table or in a chair today?

5. Meltdowns are a continuum from shut down to full tantrum. To diffuse a meltdown, remove demands, lower stimulations such as lights and sounds, remove distractions, slow down, and lower your voice. If possible, move the child to a safe area.

If clients are receptive to touch, calm with deep pressure, rhythmic patterns, or a weighted lap pad.

If the child is not receptive, back off AND ALLOW AMPLE TIME FOR THE CHILD TO REGROUP.

Rebounding will be gradual. Immediately following a tantrum, the child is still vulnerable for a meltdown.

6. Sensory integration supports such as fiddles, toys, weighted blankets, vibrational tools, and chew toys can be used during a session. Individuals on the spectrum need sensory input even when receiving bodywork.

Be mindful of smells. Although essential oils may be beneficial for some, their scents linger and may hinder an ensuing session. Be cautious of your soaps, deodorants, or perfumes.

7. For touch modalities: less is more. Patients often have difficulty detoxifying their bodies so very little work can produce significant results. Document reactions to touch. Individuals may look strong but often can't sustain, stand, sit, or lay for long periods of time.

Allow for a variety of work areas; be prepared to work on the floor, in a chair, or under a table. Meet each child where he is "at".

8. Different touch modalities address different concerns for the individual with autism. Traditional massage techniques mimic sensory integration supports such as rocking and joint compressions.

Visceral manipulation is beneficial in addressing inflammatory response in the organs of the body, yet is gentle and noninvasive. Individuals with autism have inflammatory responses, especially in the gastrointestinal track and the brain.

Reiki is an excellent tool that teaches therapists to remain neutral and control energy specific for the individual. Upledger CranioSacral Therapy has impressive

studies on its benefits for autism. Dr. John E. Upledger referenced his single blind study when speaking to Congress on the topic of autism. He observed that when specific corrections were administered through CST, children known to bang their head or chew on their thumbs until deep tissue was visible, spontaneously ceased the behavior.



Tami Goldstein, CranioSacral Therapist works with this young man, age 3 nonverbal, autism spectrum disorder, sensory based motor planning issues and instability with movement receives CST.

In another study, Susan Vaughan Kratz and her co-authors in the *Medical Periodical Journal of Bodywork and Manual Therapies*, 2016, found that not only were there improvements in restriction patterns throughout the body, but parents reported their child's improvement in general behavior, sensory reaction, social skills, cognitive skills, communication skills, emotional ability, and biological improvements.

The interconnections of mind, body, and spirit healing are profound, though I find nothing written that encompasses them fully. Today, I help make these connections for families and individuals, coping with autism, who I meet across this country.

The autistic brain is different from a neurotypical brain. It's larger, grows faster, develops earlier, and matures sooner. The brain controls how the mind works.

What supports the mind? The body.

Healing the autism body started with the work of the late Dr. Bernard Rimland in 1967. He believed autism was a neurobiological developmental disorder, not a mental health disorder. His work at the Autism Research Institute looked at the diet, chemical foundation, and chemical makeup of the child as a strategy for recovery.

This philosophy has become a major focus within the autism community. Healing the chemical foundation of the body ensures that the brain can grow and sustain.

Sensory Integration Therapy from an OT teaches an individual how the body works, how it moves, and what it needs to relax and function.

I have had children begin to speak while I am facilitating bodywork. Aaron, age 7 said, "Nice massage, Tami." The power and energy of touch are often overlooked.

I have learned to appreciate the spirit of each client, even those trapped within themselves. I've learned that communication is not always verbal, but is often clear, just not in predictable ways.

The supports we accessed for our daughter are functional medicine. They allow our loved ones to function successfully.

According to Dr. Stephanie Seneff at MIT Institute, autism prevalence will be 1 in 2 by 2032.

Autism will be everybody's concern.

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