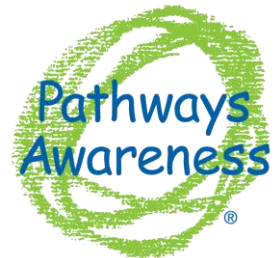


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FOR IMMEDIATE RELEASE
Survey data and graphics available

**NATIONAL SURVEY: PEDIATRIC THERAPISTS REPORT SENSORY ISSUES
COMMONLY MISTAKEN FOR ADHD**

RECOMMENDED TREATMENT IS THERAPY, NOT MEDICATION

Jan. 27, 2011 (CHICAGO) – A new survey from Pathways Awareness of more than 500 pediatric occupational therapists, physical therapists and speech-language pathologists reports that more than two-thirds (68 percent) evaluated or treated children between 3 and 8 years old who had been previously misidentified with learning disabilities or behavioral issues. Of that two-thirds, an overwhelming majority (90 percent) reported they had seen children with deficits processing and integrating sensory information who had been misidentified as having Attention Deficit Disorder (ADD) or Attention-Deficit Hyperactivity Disorder (ADHD).

Members of the American Occupational Therapy Association (AOTA), the American Speech-Language-Hearing Association (ASHA), the Pediatric Section of the American Physical Therapy Association (APTA) and the Neuro-Developmental Treatment Association (NDTA) participated in the survey.

“Knowing that sensory processing and integration deficits may be expressed in ways similar to ADHD, it is understandable that mistakes can occur,” said Angelica Barraza, OTR/L, an advisor to Pathways Awareness and an occupational therapist trained in sensory integration. “It’s critical for parents, teachers and health professionals to consider sensory processing and integration deficits before labeling a child with behavioral issues.”

In the survey, sensory difficulties emerged the top issue therapists saw increasing, with 82 percent of survey respondents reporting a rise in treating children with sensory difficulties. Sensory processing and integration issues, sometimes referred to as dysfunction of sensory integration (DSI) or sensory processing disorder (SPD), become a concern when the inability to discriminate, organize, and interpret the myriad of sensory input hinders participation in everyday activities.

In school-age children, sensory processing and integration issues can translate into having delays with coordination, balance, focus, organization, and fine motor skills. At times, children displaying deficits in these areas may look like they have behavioral issues. Although not as well known as ADD or ADHD, sensory issues affect millions of children: a recent study estimates one in 20 children have sensory difficulties.¹

The survey was conducted by Pathways Awareness, a national not-for-profit that educates parents and medical professionals about the benefits of early intervention for children with delays in sensory, communication, and motor development. Conducted between May 2009 and Nov. 2010 with assistance

from the Neuro-Developmental Treatment Association (NDTA) and the Pediatric Section of the American Physical Therapy Association (APTA), more than 500 occupational, speech and physical therapists who regularly work with pediatric clients and average more than 17 years of experience participated in the survey. Members of the American Occupational Association (AOTA) and the American Speech-Language-Hearing Association (ASHA) also participated in the survey.

Sensory Integration: Hard to Identify, Effectively Treated

Fidgeting, frustration, clumsiness, inability to focus...these are common issues for children when children are in a classroom setting for the first time. When teachers and classroom specialists have concerns about these behaviors, a common course of action is to suggest that the child be evaluated for ADD or ADHD. However, pediatric therapists across the country believe that other possibilities must be investigated, particularly sensory processing and integration issues.

The behaviors of a child with sensory processing and integration differences are extremely varied, which also can make them hard to detect by health professionals who are not familiar with the condition. Some children may be overwhelmed by everyday sensations; others may seek out more. Some may seem aggressive, others extremely withdrawn. An evaluation by a qualified therapist who has received post-graduate training on using a sensory integrative approach, can help parents determine whether their child can benefit from therapy.

Therapy for sensory processing and integrative dysfunction can vary greatly depending on the needs of the child. Sessions are fun for children, incorporating intrinsically motivating activities that provide rich sensory experiences, such as finger painting and wall climbing. Therapy builds skills to help improve a child's ability to organize, modulate and discriminate sensory input. When they are not confused by their senses, children may experience improved behavior, better coordination and lower anxiety. Kids can be simply kids, working and playing alongside friends at school, and participating more fully in life.

“I Have My Son Back:” One Mother’s Story

Jill noticed her son Luke’s behaviors were different from other children as early as two years old, but his behavior became increasingly more prevalent as he reached school-age.

“He was always going, going, going,” said Jill, a mother of two and a Montessori teacher. “As he got older, it became more exhausting, and his behavior got worse.”

Frequent meltdowns and constant activity dominated Luke’s behavior. Certain clothing felt “too hot” and “too itchy.” When Luke was five, a friend was discussing her own child who had sensory dysfunction. “It sounded just like Luke,” Jill said. “I knew that was it.”

Still, friends and even her doctor continued to convince her otherwise when she tried to seek help. Friends told her, “boys will be boys,” and others suggested ADHD or thought she didn’t discipline her son well enough. A second doctor referred Jill and Luke to a psychologist, who was unfamiliar with sensory integration but wanted to evaluate Luke for ADHD and look more closely at his “anger issues.”

Eventually, Jill sought out a sensory integration evaluation on her own at a local pediatric therapy center. The evaluation showed that Luke did have sensory processing and integration difficulties, and he has been in occupational therapy with a sensory integration emphasis for two months. Already, Jill is noticing improvement in her son’s behavior and self esteem.

“I tell him we’re coming to therapy for him to get more comfortable in his body,” said Jill. “I feel like I have my son back.”

What Parents Can Do

Behavior issues can stem from a variety of sources, but if parents want to learn more about sensory processing and integration issues and what behavior looks like, they can visit www.pathwaysawareness.org for more information. To set up an evaluation, parents should find a pediatric therapist with advanced training in sensory integration. A link to resources is available at www.pathwaysawareness.org and parents can also call Pathways’ “parent answered” help line, 1-800-955-CHILD (2445).

About Pathways Awareness

Pathways Awareness is a national 501(c)(3) not-for-profit public foundation celebrating over 20 years of assuring the best for all babies' development. Pathways Awareness is dedicated to raising awareness of early sensory, communication, and motor delays in three key areas: detection, intervention, and prevention. To educate the public, Pathways has created print and online tools that are used by millions of healthcare professionals and families worldwide. Pathways Awareness’ critical infant milestones literature has been recognized and endorsed by the American Academy of Pediatrics and the National Association of Pediatric Nurse Practitioners as the definitive resource concerning early motor delays. Pathways’ free print, Web-based and video materials can be viewed online, in print and in the media. For more information and help, visit www.pathwaysawareness.org or call Pathways’ toll-free parent answered hotline at 1-800-955-CHILD (2445).

About the American Occupational Therapy Association (AOTA)

Founded in 1917, the American Occupational Therapy Association (AOTA) represents the professional interests and concerns of more than 140,000 occupational therapists, assistants and students nationwide. The Association educates the public and advances the profession of occupational therapy by providing resources, setting standards including accreditations and serving as an advocate to improve health care. Based in Bethesda, Md., AOTA’s major programs and activities are directed toward promoting the professional development of its members and assuring consumer access to quality services so patients can maximize their individual potential. For more information, go to www.aota.org.

About the American Physical Therapy Association (APTA)

The American Physical Therapy Association (www.apta.org) is a national organization representing physical therapists, physical therapist assistants, and students nationwide. Its goal is to foster advancements in physical therapist education, practice, and research. Consumers can access “Find a PT” to find a physical therapist in their area, as well as physical therapy news and information at www.apta.org/consumer.

About the American Speech-Language-Hearing Association (ASHA)

ASHA is the national professional, scientific, and credentialing association for more than 140,000 audiologists, speech-language pathologists, and speech, language, and hearing scientists. Audiologists specialize in preventing and assessing hearing and balance disorders as well as providing audiologic treatment including hearing aids. Speech-language pathologists identify, assess, and treat speech and language problems including swallowing disorders. Visit www.asha.org.

About the Neuro-Developmental Treatment Association (NDTA)

The Neuro-Developmental Treatment Association (NDTA™) is an international, non-profit organization of occupational therapists, physical therapists and speech-language pathologists who practice Neuro-Developmental Treatment (NDT), a comprehensive and highly individualized therapy approach in which therapists use ongoing assessments to address motor difficulties in both adults and children who have neurological challenges (e.g. cerebral palsy, stroke, head injury) which impact development. NDTA offers continuing education to the health professionals, educational services to the community, and supports clinical research and client and family advocacy. Visit www.ndta.org for more information.

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