‘AMERICA’S CHOICE’
ALEXIS WINEMAN
TELLS HER STORY

Five Simple, Inexpensive Therapies
the Scientists Say ‘Work’

TEMPLE GRANDIN’S Tips on
Solving Behavior Problems
Five Simple, Inexpensive Therapies the Scientists Say ‘WORK’

Lyn Dunsavage Young & Joanne Lara, MA
Although the science of these
studies began with animals, as do most
scientific studies, its cornerstone is the
fact that “more than 90% of children
with autism have sensory processing
abnormalities.”¹

Many people don’t understand
“sensory processing dysfunction” or
“sensory abnormalities,” but, suffice it to say, it’s really important to your
understanding of why this program
works. In layman’s terms, if you have a
child who hears or sees flickering
light bulbs others don’t hear or see;

“The basic concept behind
the therapy is that, if a child
on the autism spectrum
has sensory overload, one
possible route to ‘normalizing’
the child’s response would be
to gradually introduce small
sensory experiences—always
keeping it novel and making it
more complex by layering the
experiences—so the child can
slowly adapt and eliminate
the sensory overload.”

or has a sense of smell that makes a
food or place totally horrible for him
to be in or around; or he can’t catch a
ball like others because of something
designated as “clumsiness,” or has
problems with jumping or taking steps
(like he’s going to fall); or can’t stand
the taste of certain foods; or can sit for
hours looking at sand passing through
his hands because he sees their
diamond construction and you can’t;
or starts screaming uncontrollably
when he hears certain sounds (like a
train screeching past or the horn of a
fire truck); or he tears off clothes you’ve
just put on him (probably because
the seams or labels are like razors
cutting his body), you have a child with
“sensory processing abnormalities.”

To the scientists, they define this as
“sensory seeking behavior, avoidance of
sensory stimuli, diminished responses
to sensory stimulation, or enhanced
perceptual abilities.”²

Scientists find that individuals
with Autism Spectrum Disorder
(ASD) “appear to have problems
integrating multisensory information
into a single percept.”³ For example, the
ability to combine information from
concurrent auditory and visual senses is
compromised in individuals with ASD.”⁴

As a result of the large number of
children with ASD having sensory
issues, it was logical for scientists
to “raise the possibility that the core
features of ASD may be responses
to abnormal sensory input.”⁵ In
their studies, they found that the
severity of ASD symptoms involving
temperament, personality, language,
and social development are positively
associated with the severity of their
sensory problems.”⁶

These same findings occurred
over a decade ago in the scientific
studies on mice that had been given
ASD symptoms. They found that, “by
increasing sensory stimulation via
environmental enrichment, they
reduced the symptoms of ASD, for
example, motor coordination, anxiety,
and repetitive behaviors, and it
increased and improved learning
and memory, social behavior, and
exploratory behaviors.”⁷

So, this new therapy quite naturally
focused on and began to have names
like “Sensory Enrichment Therapy
(SET)” or “Environmental Enrichment”
or “Sensorimotor Enrichment.”

The basic concept behind the
therapy is that, if a child on the autism

What’s important is that
this newest therapy works
for many children, not only
eliminating many of the
“autistic characteristics” but,
actually, increasing the child’s
understanding (cognitive
abilities) and IQ.

What may be even more important
to parents is that it’s “cost-effective”—
that is, it’s actually so inexpensive that
parents can implement the program
with household items they already
have, such as mirrors, containers,
music players, and aromas.

It doesn’t require hours and hours
of time, which usually translates into
expense for hiring some professional
to come into your house to put the
program into effect. A parent can
do it with their child by dedicating
15–30 minutes a day or, maybe, doing
it twice a day. And, what’s even more
wonderful, the changes in the child
can be seen by the parents and their
professionals in a relatively short time,
typically in a few months.

Does it sound too good to be
true? Of course, it does, but its basic
concepts are not totally foreign, and the
conclusions are based on two peer-
reviewed randomized clinical trials, the
last one just being published last month.

The most important thing about this
new therapy is that scientists have been
studying it in numerous ways for over a
decade and, again and again and again—
in their scientific language—they’ve
found that “children who received
sensorimotor enrichment at home for
six months had significant improvement
in both their cognitive ability and the
severity of their autism symptoms ...
After six months, enriched children
showed statistically significant gains in
the IQ scores, a decline in the atypical
sensory responses, and an improvement
in their receptive language performance,
compared to controls.”¹
The child’s response would be to gradually introduce small sensory experiences—always keeping it novel and making it more complex by layering the experiences—so the child can slowly adapt and eliminate the sensory overload. Through brain research, scientists have been learning what those in the field have experienced for years as anecdotal evidence, which is that the more physical the development in certain areas (like the arts—playing music or painting—or music, dance, and movement therapy), the greater the growth in the links between areas of the brain occurs, which can transform many autistic characteristics.

The treatment that scientists have been testing, therefore, requires simple exercises in short time periods with little cost for supplies. The results have produced what scientists call “statistically significant gains” in various ways, such as less autistic behaviors and greater understanding.

In their most recent study, they found that, after six months of enrichment therapy, 21% of the children who initially had been given an autism classification, using the Autism Diagnostic Observation Schedule (ADOS), improved to the point that, although they remained on the autism spectrum, they no longer met the criteria for classic autism. None of the patients with ASD who were in the control group, receiving standard ASD care alone, improved to that extent.¹

The most critical factor in the therapy, it seems, is that it “layers” sensory experiences; that is, the child experiences and participates in at least two sensory things at a time (which is the reason “enrichment” is part of the therapy’s name), like a mixture of music and textures; cold and hot; color and mirrors; music and directions in movement; or music and multiple fragrances. There also has to be change in the sensory experiences over time, so that “novelty” is intrinsic to the program. The exercises vary daily and weekly.

The creativity, layering of sensory enrichment activities, and novelty aren’t difficult to create in the therapy so the child with ASD can be helped. What is a problem in implementing this relatively simple program (i.e. SET) is a commitment by the parent or caretaker of the child to do it routinely; that is, it has to be done daily!

Unfortunately, it’s a little like our New Year’s resolution we make to lose weight. It’s a fact that most people fail at doing what they know they should and want to do when it comes to New Year’s resolutions. Even in the case in this latest scientific clinical trial on sensory enrichment therapy, slightly more than half of the parents dropped out “often due to time constraints, personal issues, or the initiation of new therapies.”⁸

For the most part, humans seem to need assistance, regular schedules, or cheerleaders to help to change their behaviors. That’s the reason for the success of national diet programs like Jenny Craig or Weightwatchers; spas and exercise facilities like LA Fitness; movement therapy programs like Autism Movement Therapy; rehabilitation programs and a host of other businesses that have been created to help make the things you want to happen. This therapy is no different in that way. The company “Mendability” was formed to create a deliberate and individualized Sensory Enrichment Therapy (SET) program for families at a very low cost (similar to a weight loss program, in that way). They employ a staff of licensed and registered Occupational Therapists to “coach” parents on how to use household equipment creatively and they provide advice on how to modify experiences to meet the needs of their kids. They help us learn how to recognize and do what our kids need and keep us accountable until it becomes a way of life. In that way, it’s just like a diet or exercise program, except it’s for families with a child on the autism spectrum. Most people need help to make that happen.⁹

Said Rich Bohne, CEO of Mendability, “Our results show that, much like the impact that physical exercise can have on helping one’s health, the implementation of sensory based exercises on those with autism will not only help reduce these autistic behaviors and increase understanding, but also help to smooth the sensory experiences that can cause behavioral difficulties.”
2. If you listen to your professionals in the arts, movement, fitness, and sensory areas, they’ve experienced “anecdotal incidences” again and again in their work with autistic children for years.

“Anecdotal incidence” is the medical term for individual occurrences that don’t have a scientific basis because they haven’t been studied scientifically, so they are often dismissed. Anyone with a child on the autism spectrum should be familiar with that. Anecdotes are simply occurrences of change without scientific explanations.

Now, scientific studies have also opened the door supporting the concept of Sensory Enrichment Therapy (SET) in various ways. For example, several have focused on “mirroring,” an exercise practiced in dance/movement therapy (DMT), which is based on the hypothesis that unconscious and automatic imitation of another’s motor processes—referred to as mimicry—creates emotional understanding through muscle feedback to the brain.

In a research study conducted by Kristin Hartshorn et al (2001), thirty-eight children with autism were given movement therapy for 30 minutes in small groups led by a trained movement therapist. After two months of bi-weekly sessions, the children spent less time wandering, more time showing on-task behavior, less time showing negative responses to being touched, and less time resisting the teacher than those in the control group.

A program that is well-known internationally is the sensory integration method of Autism Movement Therapy® (AMT), a structured 45-minute movement and music class approach designed to stimulate the brain, aid sensory processing, and decrease problem behaviors in children with autism spectrum disorders.

“We know that dance—more specifically, the processing of music which is processed in the temporal lobe and movement processed in the cerebellum, when combined—can bring about amazingly fast progress in the development of speech and language while increasing gross motor and audio processing outcomes in individuals with autism,” explains AMT Founder Joanne Lara. “Reflecting a growing interest in the body-brain connection and incorporating the principles of Applied Behavior Analysis, the AMT approach uses music and movement to develop audio, visual, gross motor and spatial awareness skills in children with autism.”

“While we are a product of each and every variable that we process continually in our environment from moment to moment daily, how our brain processes and makes sense of these variables is what determines our outcomes and how we think,” states Lara. “AMT is based on the concept of neuroplasticity, the belief that the brain—opposed to being fixed—can change.

Autism Movement Therapy charges as little as $15 for its AMT classes, DVDs, book, certification workshops, and online courses (www. autismmovmenttherapy.org).

Change brought about through a movement and music program often has a profound effect on the speech and language processing areas of the brain.”

In an early December 2015, yet another finding in Current Biology hit the newsstands in which scientists at Harvard and MIT found a “direct link” between autism and a neurotransmitter—a kind of brain chemical that communicates information from one nerve cell in the brain to another. GABA, the brain chemical, stops cells from acting in response to information they receive from the senses, which, as stated above, is relevant to children on the autism spectrum because they’re overloaded with sensory responses. As the lead scientist Caroline Robinson stated in one article by Julia Lurie, “People with autism are inundated with a deluge of sensory information that can turn everyday environments into distressing situations.”

Interestingly, it isn’t that GABA is missing from the brain; it just doesn’t quite function the way it’s supposed to—either not used or processed properly—which scientists suggest opens the door to the possibility that it could be made to respond to some stimulus, such as drugs or, possibly, therapy, thus blocking the overloaded sensory messages.

The cost of the Mendability program is from $49 to $159 a month, depending upon the degree of involvement that parent needs to implement and keep up the program. For more information, visit www.mendability.com.

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“We have seen tremendous progress in the Wernicke’s area of the brain, located at the posterior end of the temporal lobe that is responsible for the pragmatics of ideas of language, as well as the Broca area, which lives in the double-sided nature of language—its function as a vehicle for ideas and its use in social communication.”

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“We have seen tremendous progress in the Wernicke’s area of the brain, located at the posterior end of the temporal lobe that is responsible for the pragmatics of ideas of language, as well as the Broca area, which lives in
the frontal lobe and controls speech articulation."  

While scientists once believed the brain was a static (fixed or unchangeable) organ, research is changing that position by exploring how—and in which ways—the brain changes throughout life. In *The Brain That Changes Itself*, author Norman Doidge illuminates case histories and research that indicate that the brain is far more malleable than we once thought. His work supports the idea that learning a new skill actually changes the structure and function of the brain—even into old age. We have seen first-hand, literally hundreds of children over two decades restore lost or under-developed skills well into their teens and adulthood.  

Doidge’s research and other scientific studies support the concept of Sensory Enrichment Therapy (SET) in various ways.  

Another program is Ruth Wishengrad’s “Songs To Change Your Tune,” which has music as the backbone, but offers a meaningful tool to build strong self-concept, self-respect, and self-esteem with rhythms and movements associated with them. Her songs are infectious, so their basic concepts build collaboration and interpersonal social skills, which allows the students to express their thoughts and feelings.  

Ruth Wishengrad charges $197 for her CD, DVD, and a membership in her program: www.SongsToChangeYourTune.com.  

Scientists have translated these combined actions through imitation into a term called “mirroring,” an exercise practiced in dance/movement therapy (DMT), which is based on the hypothesis that unconscious and automatic imitation of another’s motor processes—referred to as mimicry—creates emotional understanding through muscle feedback to the brain.  

Lucy McGarry and Frank Russo explain mirroring in this context: mirroring involves imitation by the therapist of movements, emotions, or intentions implied by a clients’ movement and is commonly practiced in order to enhance empathy of the therapist for the client. In their 2011 study, Wan, McGarry and Russo support the thesis that there may be an underlying brain circuitry that is responsible for engaging and activating the mirror neuron system in the brain. While Wan researchers relate music processes to speaking, McGarry accounts for increased empathy awareness and understanding through music and movement and mirroring.  

Mirroring occurs when two people make similar body movements that are coordinated or slightly echoed in time. The therapist may echo the exact movements of a client or may imitate the quality of the movement; for example, if a client is moving with a slumped posture, the therapist may adopt these movement qualities as well. At the finest level, the client may be unaware that imitation is occurring, and at its most obvious level, exact movements are imitated or movement themes are exaggerated. The end result is an enhanced degree of somatic and emotional understanding in the therapist for the client. The client may also be encouraged to engage in mirroring for the purpose of enhancing empathy in the client for others.
3. A third program which is making headlines concentrates on digital art—in this first case, animation. Exceptional Minds in Sherman Oaks, CA. has impact because it not only focuses on training, it also opens vocational opportunities for those interested in animation.

What is it about autism and animation that goes together like peanut butter and jelly? Why do so many of our young adults with autism excel in this art form? The answer is not clear, but there’s a supposition that it may have something to do with the fact that many children with autism persevere on cartoon characters when they are young. It would seem logical that the process of first imagining an animated caricature—a picture of a person or thing in which certain characteristics are exaggerated in order to create a comic effect—is not that far removed for the actual cognitive processing that individuals with autism may experience in their early lives.

Whatever the reason, parents and professionals need to recognize that the type of games and the amount of time a child with autism plays on the electronic devices are important in two ways:

1. If the child is too young (e.g., under 8) and spends too much time playing games—because he enjoys it and he is absorbed by them and he’s not a bother when he’s playing—it could be damaging to his developmental process (see Autism Asperger’s Digest, November 2014–January 2015 issue). The amount of time spent by a young child needs to be highly regulated by his caretakers; but

2. if the child is older and really interested in the animation process itself, it may offer a career opportunity in his future if the parent supports his interests and channels it. Animation and games are a big business, which, seemingly, will continue to grow, so an interest in this area shouldn’t be dismissed as “simply gameplaying.”

Yudi Bennett, Director of Operations at Exceptional Minds likes to tell the story of the time she was showing a journalist around the animation vocational studio for young adults with autism who want careers in visual effects and animation in the movie industry. The journalist turned to her and asked, “So which ones have autism?” The question made her pause for several reasons. All of the students the journalist was referring to had a diagnoses of ASD. In looking around at the 30 young adults in the classrooms, there were no outward signs of autism—no stimming, no flapping—just 30 talented students intensely focused on their computer-based projects.

The success of this program not only lies in the recognition of the talents the students bring to their computers but, also, because Bennett and others associated with the program have fostered employment opportunities in the movie and television industries for the graduates, so they are able to achieve goals and be rewarded for their work.

Exceptional Minds fees range from $140 for private classes to $25,000 per year for full time. Interested parties should call for a free tour and more information. www.exceptionalmindsstudio.org

The second case involves art as therapy, which also is tied to mirroring. In fact, mirroring is a major component of almost all forms of art therapies. It also plays a predominant role in Applied Behavior Analysis (ABA) as well. In Discrete Trial Training (DTT), a component of ABA, the client is asked to “do this” and imitate the therapist doing something like touching his head or stacking three wooden blocks on the table in front of him the very same way that the therapist has stacked his blocks.

Dr. Jane Richardson, Associate Professor of Art Therapy at Lesley University relates, “When I first met this young woman in her 20’s her strengths included her visual ability and love of drawing. Her challenges included times of dysregulation during which she would feel overwhelmed and angry and resistant to interactions with others. Our work in art therapy involved using her strengths and engaging her interest to address challenges and support self-regulation.”

The drawing is her own invention, spontaneously created in a session during which she talked about how both the process of drawing and looking at the finished work made her feel calm. Richardson adds that an art therapy goal is always to support clients in using art making as an intervention form for coping, so it will become accessible to the client when needed and she can move towards greater autonomy. (jrichar8@lesley.edu)
4. The fourth area in which parents can help their children is, simply, get them involved in music and its performance. Whether it’s playing an instrument or singing in a group, a child on the autism spectrum can, literally, be transformed by the performance.

Again, there’s brain science that supports these statements. Wan et al. (2010) proposes that the intervention of art forms such as music making with others (e.g., playing instruments or singing) is a multi-modal activity that has been shown to engage brain regions that largely overlap with the putative human mirror neuron system (MNS) in the brain, which contains neurons that respond to the actions of self and others, or “empathy.” Many children with autism thoroughly enjoy participating in musical activities. Such activities may enhance their ability to focus and interact with others, thereby fostering the development of communication and social skills and offer a promising approach for facilitating expressive language in otherwise nonverbal children with autism.14

In other words, individuals with autism, who show impairments in emotional tuning, social interactions and communication can gain in the areas of communication and social skills because of changes in the brain that music participation facilitates.

“When I started working with Colin, his speech was limited to repeating what others had said,” Cantor and music teacher Steven Puzarne tells us. “His behavior was frequently disruptive and his attention span virtually nil. Nothing I was going to say was going to change that. What was called for was a recalibration of his internal clock leading to more beneficial neural pathways. "Drumming was the only way in. He now speaks in complete sentences, interacts appropriately, is much calmer and self-contained, and is now learning to play guitar.”

Scientists state that interactive music making (using instruments) is useful in facilitating communication and social skills, while singing engages the MNS network that is believed to be deficient in individuals with autism.15

Steve Puzarne has sessions that range from $75–$150 and specializes in Bar Mitzvah preparations. Contact him at Spuzarne@gmail.com.

5. From the perspective of anecdotal evidence in arts, music, and movement professionals have seen a child who doesn’t speak suddenly begin to speak after doing dance or movement exercises in front of a mirror. A child who doesn’t seem to understand instructions begins to follow instructions after practicing yoga in an aroma-scented room. A child who stims and seems not to pay attention begins to participate with less stimming in a classroom when it breaks for music therapy and exercise.

A program in the arts that repeatedly can make claim to anecdotal transformations is founder Elaine Hall’s theatre program, The Miracle Project—a groundbreaking, fully inclusive musical theater, film, and expressive arts program for children, teens, and young adults with autism and other disabilities, based in Los Angeles.

Elaine tells us about her 17-year-old student Spencer.

“When Spencer began with The Miracle Project, she was withdrawn, anxious and terrified of being in front...
of even a group of her peers. The staff
and volunteers at The Miracle Project
intervened and after one season of
music, theatre and movement, Spencer
sang her first solo at the end of the year
performance. Over the years, Spencer
has grown in confidence, She now has
many friends, and, as she puts it, ‘one
day, opera just came out of my throat.’

“Spencer is now a semi-professional
opera singer. She has graced the stages
of the Pantages Theater alongside Jack
Black and Stephen Stills; performed
at Temple Grandin and Friends at the
Club Nokia; performed in China; and
has had a guest starring role in the TV
show Parenthood.”

The Miracle Project hosts
theatre workshops for $350. (www.
themiracleproject.org)
A total immersion in the various
arts is not culturally bound.

Chunhong Wang—the Founder
and Director of God’s Gifted Garden,
a holistic program in its approach
for treatment of autistic children and
their families in Beijing, China—uses
a Chinese medicine-based theory
incorporated with dance, music and art
as her primary treatment and calls this
innovative method “Dimensional Arts
Therapy.” Because traditional Chinese
art lends itself to development and
change through education and therapy,
Chunhong has been successful with
many clients with autism. She tells of

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9. Mendability is an advertiser in this magazine, but they are cited in this article because they are the only program that has assumed the counseling and educational outreach for Sensory Enrichment Therapy (SET) tied to the scientific studies to which we are aware.


Lyn Dunsavage Young is a journalist and was the founder/publisher of the *Dallas Downtown News*, a newspaper that won numerous Katie Awards, one for the most outstanding weekly in Texas; recipient of the WICI Award for the Most Outstanding Journalist in Texas (of three) and recipient of the Sigma Delta Chi/Press Club’s Outstanding Journalism Career Award; and co-author or primary editor of six books. She presently works for Future Horizons as their media coordinator, among other responsibilities. Her email is lyn@fhautism.com.

Joanne Lara, MA, founder of Autism Movement Therapy, author of *Autism Movement Therapy Method: Waking up the Brain!* was the autism expert for the Fox show *Touch*, and is core adjunct faculty at National University in Los Angeles. Lara produced the documentary *Generation A: Portraits of Autism & the Arts*. For AMT Certification, licensing and on-line courses, visit www.autismmovementtherapy.org.