

Sensory integration (SI) therapy

Many children and adults with autism have challenges in processing sensory information such as movement, touch, smell, sight and sound. Sensory integration (SI) therapy identifies such disruptions and uses a variety of techniques that improve how the brain interprets and integrates this information. Occupational therapy often includes sensory integration. Other times it is delivered as a stand-alone therapy.

Certified occupational and physical therapists provide sensory integration therapy. The therapist begins with an individual evaluation to determine a person's sensitivities. From this information, he or she plans an individualized program that matches sensory stimulation with physical movement to improve how the brain processes and organizes incoming information. As such, the therapy often includes equipment such as swings, trampolines and slides.

Sensory integration therapy can allow a child or adult with sensory integration difficulties to become more "available" for learning and social interactions. Family members and teachers often find that its techniques can help calm an affected child or adult, reinforce positive behavior and help with transitions between activities.

Physical therapy (PT)

Many children and adults with autism have challenges with motor skills such as sitting, walking, running and jumping. Physical therapy (PT) focuses on problems with movement that cause real-life limitations. In particular, physical therapy can improve poor muscle tone, balance and coordination.

Certified physical therapists deliver physical therapy beginning with an evaluation of a person's physical abilities and developmental level. They then design programs of activities that target areas of challenge. Typically therapy sessions run a half hour to an hour and include assisted movement, various forms of exercise and the use of orthopedic equipment. The needs of the child or adult receiving services should determine the frequency of these sessions.

Social skills

Individuals with autism have a great deal of difficulty with social interactions. In recent years, social skills training, in both one-on-one and peer group settings, has become a very common treatment for facing this particular challenge. Social skills taught during training sessions range from simple skills like eye contact to more difficult skills like inviting a peer for a playdate. Studies have shown that this type of intervention program can significantly improve social competence and social skill development. Though social skills training is not an official or certified form of therapy, professionals like social workers, speech therapists and psychologists often focus largely on improving social skills when treating both children and adults with autism. In addition, parents, family members and other caregivers can be taught effective ways to help improve the social skills of their loved ones with autism both inside and outside the home on a regular basis.

Picture Exchange Communication System (PECS)

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is a learning system that allows children with little or no verbal ability to communicate using pictures. PECS can be used at home, in the classroom or in a variety of other settings. A therapist, teacher or parent helps the child to build a vocabulary and to articulate desires, observations or feelings by using pictures consistently.