Therapy is the process of assisting an individual with the concept of change. It increases the options or choices available to the child or adult in a given area. Children with sensorimotor disabilities have a limited repertoire of movement choices. Those choices are expanded through therapy, and the child is introduced to the functional advantages of different movement options. Therapy does not guarantee that the child’s choice will be the one proposed by the handling of the therapist. In order for specific concepts and techniques to be considered and accepted, the child must be engaged as an active participant in treatment.

A therapy program that acknowledges and builds upon an understanding of change, communication, and learning will be much more successful than one that does not. The following concepts contribute to a therapy program that works well for both the child and therapist. These principles impact on the learning of the therapist as well as the child. In an interactive therapy session the therapist and child are simultaneously teachers and learners.

Communication underlies all treatment.

- All children communicate, and they communicate at every moment. When children’s messages are received, understood, and respected, their level of trust deepens. Trust is built on a base of authenticity and honesty. The child knows that the therapist’s communication is honest. When therapists say one thing and do another, trust does not develop. A child who trusts a therapist is more willing to risk, and learns more easily.

- Physical handling by the therapist is a powerful system of communication. A therapist’s hands learn to “read” the child’s message, and move intuitively to provide the support, stability, and movement that is needed.

- Communication takes many forms. A child can say “yes”, “no” or “maybe” through alterations in muscle tone, through changes in body rhythms, facial expression, crying or vocalizing, or through moving with or against the therapist. A child’s learning style or sensory preferences are communicated by movement toward or away from specific activities or interests. A child who knows that the therapist listens, increases the frequency or consistency of expression. Active listening provides empathy, encouragement, and a feeling of acceptance. When children feel respected and understood, they are more willing to challenge the unknown. With a greater willingness to let go of the familiar and explore change, the child discovers more options for function.
Children are their own best experts.

- Children have an inner, intuitive knowledge of their readiness for what a therapist or parent might introduce. When the adult moves with children and is in harmony with children’s knowledge of themselves, they learn more rapidly.

- Observing a child’s emotional and physical reaction to an activity is the best feedback of its appropriateness at that moment. We can observe a child’s interests, activities that delight, and sensory areas that are pleasing or threatening. From these the therapist can choose appropriate activities that fit a knowledge of the child’s developmental readiness. When a child is disinterested or actively opposes an activity, it is a strong cue that the adult needs to make changes. The activity may be inappropriate for the child, or may be presented in a way that is threatening, uncomfortable, or unfamiliar. Therapy that follows a child’s lead and is built on the inner expertise of the child is more successful than therapy built on the agenda of the therapist.

Change that is gradual and slow is less threatening and more acceptable than change that is rapid.

- Every child has an inner sensory feedback system that constantly compares what is familiar and “normal” with what is unfamiliar and “strange”. When change occurs in small steps that are related to what is already known and accepted, the child moves more easily and more comfortably in a new direction. The therapist can expand a child’s repertoire through subtle variations of patterns that are already familiar.

- Learning occurs more rapidly in an atmosphere of playfulness and fun.

- Play is the young child’s access to learning. Children can be motivated by eliciting enjoyment and interest in movement, sensory exploration, oral-motor play, and sound play. Joyful learning contributes to discovery and desire. Working for toleration of handling or oral-motor exploration or any specific desire of the therapist omits this concept. Toleration implies that the child puts up with an imposed activity. As a result, children become reluctant learners without a real sense of inner desire and commitment.

Learning occurs more rapidly when therapy builds upon interests and abilities rather than focuses on disabilities and deficits.

- Children learn more easily in the areas that interest them. They learn more rapidly when they feel capable and competent. When therapists focus on the children’s deficits, they communicate the child’s limitations and a perception of inability. The child learns to depend upon the therapist to fix what “goes wrong”, and is deprived of an inner joy in accomplishment and participation. Through effective therapy the child is encouraged to be a full participant in his change. It must engage the child as a participant and co-creator. Therapy becomes a dialogue between the therapist and child in which each is a contributor.

Learning is easier and faster in a non-judgmental atmosphere.

- When children are judged in their performance, they quickly learn to judge themselves, thus, shifting the emphasis from learning to self-praise or self-condemnation. Therapy that labels movement, feeding patterns, or voice quality as “good” or “bad” teaches children non-acceptance of themselves. In contrast, a specific movement might be explored as interfering with or assisting a functional activity desired by the child. For example, a child can discover and choose a new relaxed or differentiated arm movement because it makes it easier to turn pages in a book. The more familiar, tense movement pattern may be discarded, not because it is a “bad” way, but because it doesn’t work as well in obtaining a desired goal.

Awareness increases self-knowledge, and enhances the ability to carry over a new concept or movement into daily life.

- When therapists help children focus their awareness on sensations accompanying a movement, they become more able to repeat that movement pattern independently. Knowledge and learning occur through contrasts. Children understand flexion through its contrast with extension. As awareness of movement and sensation increases, children are more able to move toward what they wish. They are less dependent upon the guidance of another person.

Children learn to adapt to their anatomical structure and physiological abilities to function.

- Therapists can observe functional changes that the child has discovered and attempt to understand how a specific movement pattern or adaptation supports current function. In the process of change some children may temporarily need adaptations such as neck hyperextension to assist breathing or a specific head position to protect the airway during swallowing. With this understanding, a therapist can explore treatment options that contribute to even greater functional abilities. If these are introduced slowly, the child may discover a better or easier way.