THE SENSORY, ATTACHMENT & TRAUMA TANGLE: MAKING SENSE OF THE INTERPLAY

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A Sensory Experience
SENSORY PROCESSING & THE BRAIN

- Somatic sensory cortex area
- Gustatory (taste) area
- Language area
- Visual area
- Auditory area
- Speech/language area
THE 7 SENSORY SYSTEMS

Visual
Olfactory
Pro-pioception
Gustatory
Tactile
Vestibular
Auditory
“Sensory Integration is the ability to organize sensory information for use.”

–Jean Ayres, 1972
SIGNS OF HEALTHY SENSORY INTEGRATION

• Appropriate attention

• Self-regulation skills

• Positive self-esteem and self-confidence

• Appropriate skills for learning and playing

• Play that is varied and creative
Normal sensory and motor development are connected and dependent on each other and develop both through the internal processes of the individual and the external processes of the caregiver.
CLASSIC SIGNS OF SPD: THERE ARE NONE
SENSORY PROCESSING DISORDER: INEFFICIENT ORGANIZATION AND USE OF SENSORY INFORMATION RESULTING IN FUNCTIONAL LIMITATION
This animation gives the viewer a glimpse into sensory overload, and how often our sensory experiences intertwine in everyday life.
SENSORY PROCESSING DISORDER (SPD)

Sensory Modulation Disorder (SMD)
   - SOR
   - SUR
   - SS

Sensory-Based Motor Disorder (SBMD)
   - Dyspraxia
   - Postural Disorders

Sensory Discrimination Disorder (SDD)
   - Visual
   - Auditory
   - Tactile
   - Vestibular
   - Proprioception
   - Taste/Smell

SOR = sensory overresponsivity.
SUR = sensory underresponsivity.
SS = sensory seeking/craving.

Figure 1. A proposed new nosology for sensory processing disorder.

ATTACHMENT AS A SENSORY SATURATED PROCESS
ATTACHMENT... is the bond between the parent and the child. It creates for the child an idea or a model for how he/she can experience and relate to others.
ATTACHMENT PLAYS A VITAL ROLE...

• as it is a basic human need
• creates a safe haven
• establishes trust
• in the development of the brain
• in self-regulation
• in creating core beliefs
• in developing morality
• in creating resilience
The reciprocal relationship relies on the baby’s ability to communicate needs, as well as the parents ability to accurately read their baby’s signals and respond in a timely and sensitive way.
Virtually all children create a strong attachment by about 12 months of age, this attachment just varies in quality and can vary from caregiver to caregiver.
If a parent is reliably emotionally available and sensitively responsive, infants will develop positive expectations and confidence in the parent which results in a Secure Attachment pattern.
AVOIDANT/DISMISSIVE ATTACHMENT PATTERN

- Insecure Attachment
- Secure Attachment
- Ambivalent/Preoccupied Attachment
- Avoidant/Dismissive Attachment
AMBIVALENT/PREOCCUPIED ATTACHMENT PATTERN

Insecure Attachment

Avoidant/Dismissive Attachment

Ambivalent/Preoccupied Attachment

Secure Attachment
DISORGANIZED ATTACHMENT PATTERN

- Insecure Attachment
- Secure Attachment
- Ambivalent/Preoccupied Attachment
- Avoidant/Dismissive Attachment

Diagram showing the spectrum of attachment patterns with the disorganized attachment pattern highlighted.
A parent will naturally pass on what he/she has been given unless there is an intentional shift towards an earned secure attachment.
TRAUMA
The Three Brains

NEW BRAIN
MIDDLE BRAIN
REPTILIAN BRAIN
WINDOW OF TOLERANCE

- Hyperarrousual
- Hypoarrousual
- Dissociation
Hyperarroused may look like chronic hypervigilance, emotional tantrums, anxiety, preoccupation with a relationship, rejection sensitivity, over responses to perceived threats.
Hypoarrousal may look like flat affect, numbness, disconnected feelings, passive-aggressiveness.
DISSOCIATION MAY LOOK LIKE...

• I’m in a fog
• I’m in a dream
• I’m disconnected from my body
• I’m zoned out/numbed out
• I’m floating
• I’m a robot
• I’m split apart
• There is stuff I can’t remember
NEGATIVE MEMORIES HOLD MORE WEIGHT
THE TRIAD

Trauma

Attachment

Sensory
THE CREATIVE ADULT IS THE CHILD WHO SURVIVED.
Social support provides buffering that reduces stress hormones and prevents fear learning.
“The experience of our own bodies becomes the model for our connection, understanding, and empathy in relationship with others.”

– Louis Cozolino
WHAT IS YOUR CHILD’S SENSORY DIET NEEDS
IN GENERAL...

• Movement generally alerts

• Deep pressure/ heavy work (proprioception) is universally organizing

• Oral outlets are calming
THE WORK OF SENSORY INTEGRATION IS FOR A TRAINED OCCUPATIONAL THERAPIST BUT THE WORK OF **COREGULATION**, USING SENSORY BASED TREATMENT, IS ESSENTIAL FOR PSYCHOOTHERAPISTS AND PARENTS.
REFERRALS FOR OCCUPATIONAL THERAPY HELP IMPROVE A CHILD’S SKILLS FOR THE JOB OF LIVING. SO IF A CHILD HAS A HARD TIME WITH THEIR OCCUPATION (SELF-CARE, PLAY, EDUCATION, COMMUNITY INTEGRATION) PROVIDE/REQUEST A REFERRAL
SETTING UP A HOME TO BE SENSORY SENSITIVE
SETTING UP AN OFFICE TO WORK ON A SENSORY LEVEL
ATTUNEMENT...

is the process of being aware of your own inner experience while being able to notice and connect with the inner experience of the person in front of you.
ATTUNEMENT DEFICIT

You can’t create attachment cognitively. It is created somatically and interpersonally within a felt sense of safety over time.
MODEL FOR YOUR CHILDREN
FIND A TRAUMA TREATMENT MODEL THAT WORKS FOR YOU AND HEAL YOUR PAST WOUNDS TO CREATE A BETTER FUTURE
WORKING WITH THE SCHOOL & OTHER PLACES OF CONNECTION FOR THE CHILD
engage & be curious
REFERENCES


Hughes, D., Koomar; J Safe Place DVD: Parenting Strategies for Facilitating Attachment and Sensory Regulation.

Huntington, A. Sensory Integration: Developmental Foundations for Interaction and Play. Advanced Child Development Course: Family and Play Therapy Center


Kennedy, J., Lane, S. J. (2014). The Role of Tactile Sensation in the Neurodevelopment of Affective and Social Function. The American Occupational Therapy Association, Inc. 37 (1)


Helpful Websites:

http://asensorylife.com/index.html

http://www.sensory-processing-disorder.com

http://www.otawatertown.com/?topic=Root

http://drgabormate.com/topic/parenting-childhood-development/

http://theinspiredtreehouse.com

http://www.lifeskills4kids.com.au

Booklet with usable tools for parents:

LEARNING OBJECTIVES

1. attendee will be able to list and describe the 7 senses and the 3 prongs of sensory processing

2. attendee will be able to describe attachment as a sensory process

3. attendee will be able to describe the triad approach of treatment

4. attendee will be able to state at least 2 practical skills/exercises for the clinical or the parent
QUESTIONNAIRE FOR PARENTS:
HTTP://SPDFOUNDATION.NET/ABOUT-SENSORY-PROCESSING-DISORDER/KIDSKORNER/

ASSESSMENT TOOLS FOR PSYCHOTHERAPISTS:
1. SENSORY PROCESSING MEASURE BY DIANNE PARHAM AND COLLEAGUES
2. SENSORY PROFILE BY WINNIE DUNN AND HER TEAM