

ADHD AND SENSORY PROCESSING

When a client comes in with the following behaviors, what is your first thought?

- Always on the go
- Difficulty sitting still
- Inattention
- Impulsivity
- Difficulty following directions
- Poor sequencing of routine tasks

If you said ADHD, that is a pretty common response. However, if you put on your “sensory lens,” an alternative condition can also come to the forefront.

Sensory Processing Differences

The very same behaviors that were listed above can also be the **result of the body craving, or under registering, to input through their vestibular system**. A deeper dive of the patient’s sensory profile may also uncover challenges with auditory processing or auditory filtering, proprioceptive processing, or even how they respond to touch.

So how do I know the difference?

When working with a client with these types of behaviors, **using a sensory integrative approach** is our first line of defense. If through using sensory strategies, we see improvement in the behaviors (i.e. ability to attend to task, less impulsive behaviors, able to follow directions and sequences) then we continue to use that approach through direct intervention, and home and school programs to provide the best outcome.

If we see that sensory integrative techniques are not helping to improve the behaviors, **then we can be more confident that the patient may present with ADHD**. Although, our work does not end there. Often these children also have difficulty with executive function and would benefit from direct occupational therapy services to improve organization, task completion, working memory, planning and controlling impulses.