Massage for Infants and Children on the Autism Spectrum
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With
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It is estimated that 1 in 110 children in the US are considered to have an Autism Spectrum Disorder (ASD) which includes autism, Asperger's syndrome, and pervasive developmental disorder - not otherwise specified (PDD-NOS). This means that most people know someone whose family is affected by ASD and most Certified Educators of Infant Massage (CEIMs) will work with a baby or child who will be diagnosed with ASD.

The Diagnostic and Statistical Manual of Mental Disorders IV describes the criterion for ASD to include: differences in thinking, communication, social relatedness, sensory processing, symbolic play, and restricted, repetitive patterns of behavior and interests. Therapists also note that confusion and anxiety affect children and their parents. Sleep disturbances are also prevalent. Children with autism tend to have multiple disabilities such as ADHD, learning disabilities, anxiety, seizure disorder, and speech differences which complicate diagnosis and treatment.

Most children are not diagnosed with ASD until age 2 and many not until elementary school. However, The Science Daily (http://www.sciencedaily.com/ Jan. 26, 2012) reported that research conducted at the Centre for Brain and Cognitive Development at the University of London, “shows that in their first year of life, babies who will go on to develop autism already show different brain responses when someone looks at them or away.” In addition, “The human brain shows characteristic patterns of activity in response to eye contact with another person, and that response is a critical foundation for face-to-face social interactions. Older children diagnosed with autism show unusual patterns of eye contact and of brain responses to social interactions that involve eye contact.”

While it was at one time thought that children with ASD did not want to be touched, it is actually a matter of finding the right kind of touch or sensory-motor experience that is calming or regulating for the individual child. Each child and each parent's sensory system, touch history, and social-emotional makeup is unique. Some children on the spectrum may seek out touch while others may be more sensitive or avoidant. But, with patience and practice in reading the child's cues and adapting the touch, a satisfying touch/tactile interaction can be experienced.

As CEIMs, we have the opportunity to help parents explore what works best for their child and best enhances their relationship with their child with ASD. As we know, infant and pediatric massage offers a multi-sensory approach. Massage provides the opportunity for eye to eye contact, skin to skin contact, exchange of smell, communication, turn taking, and relaxation. These all promote bonding and attachment and are critical for the child on the Autism Spectrum.
Research has shown benefits of infant/pediatric massage with children with autism in the areas of increased eye contact, less stereotypic behavior, more on task behavior, increased social relatedness and improved sleep. (Escalona, et al. 2001, and Field et al. 1997)

Each infant and child is unique and so we will present 3 different approaches to massage, based on our personal experiences.

Mary Fuhr, a pediatric Occupational Therapist writes:
With preschoolers and older children, we have found that a firm, but gentle pressure/touch is often preferred over stroking. Temple Grandin (a world renowned animal scientist and person with ASD) has described her need for deep pressure which ultimately led to the development of her “squeeze machine” to help achieve a calm state.

Prior to beginning massage, parents let their children know that this is “calm body time.” They also explain to their child, that he or she can tell their parent to “stop; go harder or softer; faster or slower.” Communication and building trust are essential components of the massage experience.

The type of touch we have found to most consistently be regulating for our clients with ASD is a cross between the gentle hold technique Vimala Schneider McClure shared early on in her work, and Thai yoga massage. We have found that a firm rhythmic pressure/touch and release has been very well accepted by children on the autism spectrum. In addition, we will often encourage parents to roll a small, soft, weighted (dependent on the size of the child) ball over their child's legs, back and arms. This is somewhat similar to the Indian technique of rolling a ball of dough over a baby’s body. Another strategy to help with calming is to have the parent wrap the child snugly in a favorite blanket and then apply the pressure touch through the blanket. Using puppets is often helpful for children who are especially sensitive to skin to skin contact. Puppets can add an additional element of play and creativity.

We have found that combining this pressure/touch with children's relaxation stories and music is very beneficial. Favorites include, "A Boy and a Bear,” "A Boy and a Turtle," and "Angry Octopus" by Lori Lite (www.stressfreekids.com). Parents and children can practice deep breathing together in “Boy and a Bear,” while sharing positive touch. “Boy and a Turtle” introduces progressive relaxation and visualization. Parents can give pressure/touch to each body part, synchronizing their movements to the body part being mentioned in the story. For example, in the story, the boy and the turtle first dip their feet in the water. Parents can massage or give pressure/touch to their child's feet. Next the boy and turtle dip their legs in the pond. Parents provide the touch to their child's legs, and so on. In the book, each body part becomes a color of the rainbow after it is dipped in the pond. This engages the child’s imagination while the visualization also helps produce relaxation.

When listening to and reading the story about the “Angry Octopus,” parents help their children learn about squeeze/release techniques as the octopus learns to let go of his
anger. Parents can again provide a pressure/touch to their child’s body following the story. With practice and their parents’ guidance and support, the child learns to be able to use touch techniques, music, deep breathing, visualization, and other strategies for their own self-regulation.

Jackie Hattori, a Certified Occupational Therapy Assistant and Licensed Massage Practitioner adds:
“Being a massage therapist and the mother of a child with ASD, I have a unique perspective on massage and autism. There is a saying that children with ASD are like snowflakes, no two are alike. This is especially true when we look at how children on the spectrum react to touch. My son was a very easy baby. It wasn’t until he was around 3 that I realized he might be on the spectrum. Through my journey to find his diagnosis, I realized that I had been soothing his sensory system unknowingly. I gave him massages after his baths using soft touch and lots of reciprocal eye contact to encourage bonding. I also carried him in a carrier most of the time to meet the needs of his vestibular system, but truly the most helpful thing looking back was tapotement. Tapotement is the rhythmic, soft tapping or percussion of your hands. When my son would get off kilter or need to calm down, this technique helped immensely. Massage is not a cure for sensory issues but it is an important tool that needs to be further studied.”

Carrie Sheppard, a Licensed Mental Health Counselor, and parent of a college-age child with ASD reports:
“I have many examples where touch in general has transformed a parent-child bond, empowered a parent to solve a regulation or soothing-related problem, or improved a sleep problem.” Carrie discussed how using massage would calm her son quickly when he was younger and having a melt-down. She used a gentle, but firm, squeezing motion massage at his joints. For example, she would start at the shoulders, and then move to both elbows, then both wrists, etc., all the way down his body. This was a highly effective technique to help her child become more regulated.

Parents with children with ASD can greatly benefit from the pediatric massage experience and the calming time together. A child with ASD may have behavior that varies widely and can be unpredictable, causing stress and anxiety for parents. They may feel like they are walking on eggshells, never knowing when one will break. Research by Tiffany Field (1994) has shown that the massage giver reaps multiple benefits of relaxation from providing the massage. Parents we have worked with confirm this.

As CEIMs, one of the greatest gifts we can offer parents is to listen without judgment. Many parents report that their healthcare providers or school personnel don't listen or don't understand the full magnitude of their child's condition and behavior. Similarly, through massage, parents focus on taking time to listen to and “read” their child’s communication cues. They then modify the experience based on how their child responds to their touch. The importance of helping parents and children with ASD feel relaxed, connected, and engaged in a relationship through touch cannot be underestimated. It is life-changing.


*Pediatric Massage for the Child with Special Needs* by Kathy Fleming Drehobl and Mary Gengler Fuhr has been updated and is now available as an ebook though iTunes, Barnes and Noble, smashwords, etc. More information can be found at: [www.pediatricmassage.com](http://www.pediatricmassage.com) under the infant and pediatric massage tab.