



**Topic: Sensory Integration and sensory-based interventions**

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## Context

Occupational therapists use a range of approaches to assist people of all ages who are experiencing sensory issues. These can include Ayres Sensory Integration® and sensory-based interventions.

Ayres Sensory Integration® (ASI) aims to change neurophysiological processing of sensation and is intended to be carried out in a clinic setting using specific equipment. Sensory-based interventions (SBIs) such as use of weighted vests or bouncing on a therapy ball typically occur in the individual's natural environment and aim to have an effect on self-regulation, attention or behavioural organisation (Watling and Hauer 2015).

The term 'Sensory Processing Disorder' is not recognised as an independent diagnosis in the Diagnostic and Statistical Manual of Mental Disorders 5 (American Psychiatric Association 2013) and should be avoided. Sensory differences are, however, listed as symptoms of other disorders including autism.

There are ongoing studies seeking to expand the evidence base and examine the effectiveness of Ayres Sensory Integration® and sensory-based interventions, but it is important to recognise that the current evidence base is limited and inconclusive. Occupational therapists should actively seek out, critically consider and effectively implement existing and new research evidence for any intervention as it becomes available, including Ayres Sensory Integration® and sensory-based interventions.

The RCOT Evidence Spotlight on *Sensory integration and sensory-based interventions – children and young people* summarises some of the evidence regarding Ayres Sensory Integration® and sensory-based interventions and is accompanied by CPD activities. The Evidence Spotlight does not claim to be a systematic evaluation or endorsement of the evidence but is designed as a starting point to encourage active engagement with and critical consideration of a broad range of research in this area.

## RCOT View

- Occupational therapists should maintain their occupational focus. Sensory issues must be considered in the context of the person's occupational engagement and performance within relevant environments.
- Ayres Sensory Integration® and sensory-based interventions (SBIs) are concepts/intervention modalities that occupational therapists may consider incorporating into their practice but should be used as part of a wider approach to address a person's occupational needs.



- Currently, the evidence for Ayres Sensory Integration® and sensory-based interventions is limited and inconclusive. Occupational therapists should understand the difference between the following types of intervention:
  - sensory techniques aimed at remediation of dysfunction and underlying nervous system issues; and
  - sensory interventions that aim to facilitate occupational performance by adapting tasks or the environment or improving the person's capacity for self-regulation.
- Occupational therapists must be clear about their rationale and the evidence base for using or recommending these interventions. They should consider how the intervention would promote the person's occupational performance and engagement, along with its efficacy and the cost of delivering the intervention to the service, the person and their family.
- Information about the evidence base for intervention(s) should be shared with the person and/or where appropriate their family/carer, so that they can make informed decisions about whether they feel it is an appropriate intervention for them.
- Person-centred goals/outcomes must be established prior to intervention. These should clearly relate to occupational engagement, performance and/or participation.
- Interventions must be regularly reviewed for effectiveness and adapted as appropriate.
- Audits of the effectiveness of interventions, including Ayres Sensory Integration® and sensory-based interventions should be systematically conducted to inform local evidence.
- Occupational therapists are skilled professionals who are able to assess and assist people with sensory issues. Some occupational therapists may choose to undertake additional training in sensory interventions. The Health and Care Professions Council (HCPC, the regulator of occupational therapists in the UK) requires occupational therapists to 'practise safely and effectively within their scope of practice' and 'draw on appropriate knowledge and skills to inform practice' (HCPC 2013) but it does not specify that a particular type or level of qualification in sensory interventions, for example Ayres Sensory Integration® is expected of occupational therapists.

#### References:

American Psychiatric Association (2013) *Diagnostic and Statistical Manual of Mental Disorders*. 5<sup>th</sup> ed. Washington, DC: American Psychiatric Association Publishing.

Health and Care Professions Council (2013) *The standards of proficiency for occupational therapists*. London: HCPC. Available at: <https://www.hcpc-uk.org/standards/standards-of-proficiency/occupational-therapists>

Watling R, Hauer S (2015) Effectiveness of Ayres Sensory Integration® and sensory-based interventions for people with autism spectrum disorder: a systematic review. *American Journal of Occupational Therapy*, 69(5), 1–12.

Evidence Spotlight - Sensory Integration and sensory-based interventions – children & young people - <https://www.rcot.co.uk/practice-resources/library-resources/evidence-spotlights>

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