

Beyond the label – diagnosis redefined

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*"It's out of this world.
So life changing.
He's a different child
to the one that came.
He's so relaxed,
so different."*

post-treatment response of
mother of 4 year old B.C.
January 2006



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Many parents that come to our Centre bring volumes of reports with them detailing the diagnosis of their child by health and educational authorities and professionals. An official diagnosis of any deficiency in a child's development may be difficult to accept for the parents or carers, but often is the only way forward to obtain additional support from doctors or schools. The diagnosis often will be a 'label', such as Dyslexia, ADHD, Asperger's Syndrome or Autism.

These all-encompassing catch-all diagnoses can never adequately describe the actual condition of the child. There is also a fair amount of wooliness about these diagnoses. Educational authorities are often reluctant to accept a diagnosis since it will cost them money, while health professionals can be too keen to find complex problems where there are simple explanations. For many parents it can be a blow to come home with such a diagnosis, thinking their child has suddenly been 're-classified' as being disabled. It is rare that practical ways forward are suggested in these diagnostic reports, so the parents are often left on their own to find ways to help their child.

At our Centre we do not diagnose such conditions at all, but we do test and observe the child's or adult's actual behaviour and sensory responses. We look in great detail at the hearing, vision and developmental maturity of the person and suggest ways in which specific areas can be helped or developed further. From personal experience we know that changes in the way the senses receive and process external stimuli, often lead to significant improvements in ability and behaviour. The acquisition of speech, for instance, is closely linked to the ability to hear sound without distortion and at the correct level. Temporary, partial deafness caused by ear infections or glue ear will impede the learning of language for that period of time. Conversely, we also see many clients with hypersensitivity to sounds, which often leads to similar effects as partial deafness since the person will start to ignore sounds and 'tune out' in order to cope.

Language is learned by repeated listening, and writing by repeated copying of words. In a similar fashion hearing, vision and physical responses can be altered by repeated stimulation. Based on our detailed sensory assessment, we can offer personalised treatments that can improve how the senses function and through this 'back door' change behaviour and ability. Thus we bypass the official diagnosis and tackle measurable and observable elements of the sensory systems in order to effect change beyond the label.

The Pauline Allen Column



2005 was a memorable year for The Sound Learning Centre in which we were able to help even more children and adults with a wide range of learning and developmental difficulties. Each client is unique and requires an approach that is specific to their needs and strengths. Although this puts high demands on my staff and me, it is invariably rewarded with positive changes in the life of the client, often faster than expected and at times in unexpected ways.

Tears of happiness are not uncommon at our Centre, often from adult clients or parents, sometimes from children, and quite often from the staff too. When a child starts to speak their first words, often after years of unsuccessful visits to doctors and hospitals, to child psychologists and speech and language therapists, it's impossible not to be touched deeply by the fundamental changes that can be evoked in a child's life.

We feel deeply humbled by the dedication and love of the parents who often have to give their all to ensure that their child can develop and grow to become a fully functioning adult later in life.

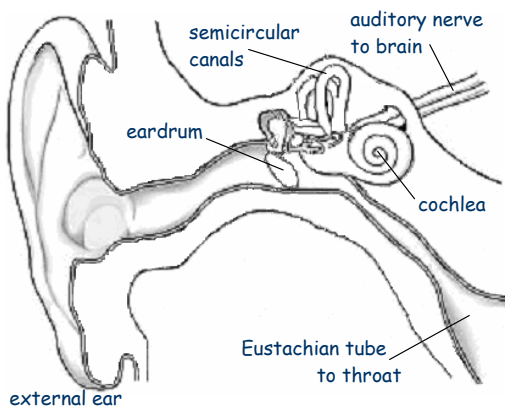
We cannot promise miracles and always encourage clients to research and question any solutions offered, including our own. Proper information and knowledge is the key to obtain lasting results. I hope this newsletter helps you in your quest for a brighter future.

Pauline Allen

The hidden sense: The Vestibular System

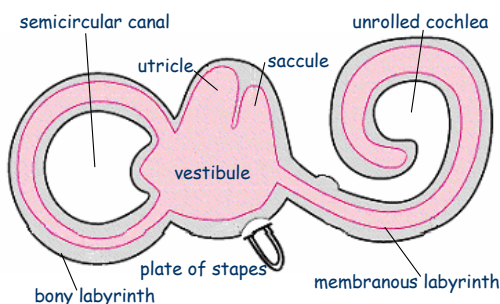
There are five generally accepted senses that we become aware of at an early age: hearing, sight, touch, smell and taste. There are, however, other equally important sensory systems that are essential for normal functioning. Through our work we have found that the vestibular system (often known as our balance mechanism) can be critical to proper development from birth onwards.

The vestibular and auditory senses are both part of the same organ - the inner ear. The receptors for both are located in a convoluted chamber, the bony labyrinth, within which a delicate continuous membrane is suspended, forming a second chamber, the membranous labyrinth. This entire fluid-filled structure is called the inner ear.



The inner ear is connected to the air-filled middle ear by a plate, the plate of the stapes, which vibrates in response to vibrations of the eardrum, setting the fluid of the inner ear moving back and forth.

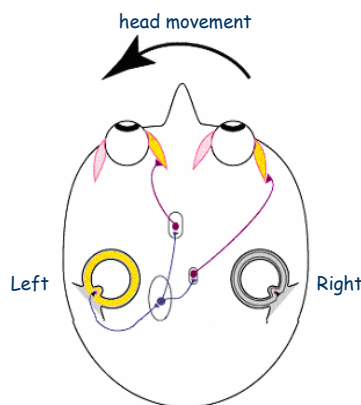
All of the inner ear organs branch off from a large central area within the inner ear, the vestibule - on one side are the hearing transducers (cochlea), on the other the vestibular semicircular canals, while two other organs, the utricle and saccule, measure horizontal and vertical acceleration.



The purpose of the vestibular system is to check the position and motion of our head in space. There are two components, one detecting rotation through the three semicircular canals, the other detecting motion along a line through the utricle and saccule organs.

We must remember that all these parts, the hearing and vestibular systems, are all located inside the same membrane, in the same fluid, using very similar ways to detect motion through the movement of hair cells. No wonder that auditory input directly interacts with the vestibular system.

An important role of the vestibular system is to keep our eyes still in space while our head moves. The vestibular system exerts direct control over the eyes through three pairs of muscles. The direction of these eye muscles is exactly in line with the direction of the three semicircular canals, so that in general a single canal controls a single pair of eye muscles.



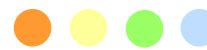
Directly or indirectly, the vestibular system influences nearly everything we do. It is the unifying system in our brain that modifies and coordinates information received from other systems and has a great impact on our behaviour.

Under-sensitivity of the vestibular system often results in 'clumsiness', excessive stumbling and falling over and bumping into things, but also in the need to move all the time. These children can be very good at football or ballet, but find it very hard to stand still, be quiet or concentrate. It can also influence their ability to read and write.

Over-sensitivity of the vestibular system will result in an over-cautious approach to any movement, avoidance of PE lessons and sports, travel sickness, etc. Life will often be very stressful for these children.

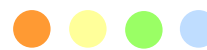
In our work we find that many children with Dyslexia and specific learning difficulties display a difficulty in coordinated movement of the eyes related to a vestibular dysfunction. This leads to reading and writing problems as the eyes will tend to jump rather than smoothly track across a page.

The close interrelationship between the vestibular system and the ears and eyes is the reason why it is possible to retrain this system by interacting with it through the auditory and visual senses, using sound and light.



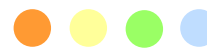
"I feel more relaxed, things aren't bothering me so much, or make me angry, upset or overwhelmed anymore"

44 year old K.T.
November 2005



"I love you mummy, come and read me a story"

6 year old P.B.
December 2005



Did you know:

- Infants learn 90% of their knowledge through listening. For good speech and language acquisition balanced hearing is essential.
- There are 10 times more children with mild to moderate hearing loss today than there were 10 years ago.
- Glue ear is the second most frequent childhood illness and can cause hearing loss of 30 dB. This is an educationally significant amount of loss.
- The life span of a taste bud is just 10 days.
- Even a person with 20/20 eyesight can have visual problems which will impact on the ability to understand the meaning of reading materials.

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Harry's journey

Typical conditions we see at the Centre:

- Dyslexia
- Dyspraxia
- ADD and ADHD
- Asperger's Syndrome
- Autistic Spectrum Disorders
- Central Auditory Processing Disorder
- Sensitive hearing
- Light sensitivity
- Developmental delay
- Speech and language difficulties
- Poor social skills
- Communication difficulties
- Slow processing
- Emotional issues
- Sensory integration difficulties



"It did help a lot. My right ear feels completely clear. It felt like there was a big blockage and the blockage has been cleared"

8 year old B.T.
August 2005



"I am more happy and I can hear much better"

8 year old E.C.
November 2005



Helen Wood, Tom Sutcliffe and Harry Phillips all featured in the BBC programme about our Centre (see back page). Harry came to us with a diagnosis of Asperger's Syndrome. His mother Carrie said: "I can't Hoover when he's in the house, he just finds the noise unbearable, he will clasp his hands to his ears, and he certainly has a pained expression, it's not just an annoyance, it's something that is actually causing him a pain" and Harry himself said: "I just like my autism to be helped as much as I can, like my eyes and ears, but the side thing that I want is my anger, 'cause I think I'm just too much of a stressy person because one minute I'm this really nice person, but when people start really getting into my temper, I can't control it".

Just a few days into his combined AIT and LWS treatment, Harry's coordination and balance dramatically improved and he did not fall over anymore. He actually started Hoovering the house himself and was able to go to shopping in a busy supermarket without getting all stressed out. Harry's social life has also taken off since treatment and he now regularly asks his mother to drop him off at friends.

Harry's verdict: "I'm so happy. It's like somebody turned a light on and made me happy".

More about AIT

Auditory Integration Training, or AIT, is one of the main interventions used at our Centre and has been very effective in initiating positive change for a number of conditions, such as sensitive hearing, speech and language difficulties, developmental delays, Dyslexia and Autistic Spectrum Disorders.

The treatment consists of 20 sessions of half-an-hour each, listening to specially altered music through a pair of high quality headphones. As the sessions need to be separated by at least 3 hours, the treatment is normally given twice a day for ten days, either on consecutive days or over two working weeks.

Where clients are able to complete a Pure Tone Audiometric Test, an audiogram will be taken at the initial assessment stage, at an interim point and after completion of the treatment. The results are used to adjust the music to the particular hearing profile of the client through the use of special frequency dependent filters. It also serves as a generally accepted method of confirming any changes in hearing ability. Although these tests are useful from a medical and scientific point of view, the real measure of success lies in the often significant changes in ability and behaviour that can result from an improved hearing profile.

Sometimes the changes in hearing ability brought about by AIT will have an almost instant effect, while occasionally the changes may take up to six months to affect behaviour and developmental improvements.

Although a separate treatment, Lightwave Stimulation (LWS) is often provided at the same time as AIT and this two pronged approach has been extremely effective for the great majority of clients.

SLC Courses

At our Centre we work on a daily basis with children and adults with learning and developmental difficulties and from practical experience we know that many of these difficulties can be traced back to how the five senses and the vestibular system are working, how the automatic responses (the reflexes) have developed and how the brain processes sensory input. We are now offering two one-day courses that provide essential information and practical activities to help our children develop to their full potential. Both courses are regularly run in London and on request can be offered in other locations.

SenseAbility

The SenseAbility course has been specially designed to provide parents and carers with the latest findings in these fields, simple methods of evaluation and practical activities for use at home with children aged three to early teens. You will receive a comprehensive course guide covering background information, developmental progress evaluation and practical activities for an effective home support programme for your child. This course will also be of interest to health and educational professionals.

EASIE

The EASIE programme has been designed to introduce an early intervention at school or at home for all children aged between three and seven. It helps to develop balance and co-ordination, memory, concentration and organisation and prepares a child for learning.

The EASIE programme comprises six sets of simple exercises, pre-recorded rhymes and suggested music. The whole programme can be completed over a six week period, although some children will benefit from longer exposure to the exercises.

A comprehensive manual, a CD and complete lesson plans conforming to National Curriculum requirements are included.

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SLC in the Media

The Sound Learning Centre regularly features in the media, from the local newspapers to the national press and prime time television.

In Spring last year a small article in a local newspaper was read by the producer of the BBC Inside Out current affairs news programme. This led to a major feature that was broadcast in September on BBC ONE prime time television.

It is important to note that the BBC chose to cover the work we do entirely independently of us. By the time they contacted us, they had already thoroughly researched our work and made the editorial decision that our work was of such importance that it should be shown on prime-time television. The BBC furthermore insisted on choosing which clients to film and follow through treatment. The story was thus an independently selected testimony of the results that can be achieved with combined sound and light therapy.

As a direct result of the BBC coverage the Mayor of Enfield, Councillor Bill Price, visited the Centre at our October Open House Event, met many parents and children, and was very impressed by the work that we do.



The Mayor is pictured here with 11 year old Andrew Scott from Glasgow who was at the Centre that day for AIT and LWS treatment.

Forthcoming Events

Some of the most valued events in the Centre's calendar are the regular Open House events, where interested clients, parents, health and educational professionals can visit the Centre and get down-to-earth information on the background to many conditions, the way we assess these and how they can be treated. The events normally start with a half-hour talk by Pauline Allen, the Principal of the Centre, followed by a video presentation. This tends to spark off a lively question and answer session, where specific concerns can be addressed. At the end refreshments are served and there is then also time for informal one-to-one discussions. Overall the events take about an hour-and-a-half, or a bit longer if you want to discuss individual issues afterwards. There is absolutely no commitment to pursue any of the options offered by the Centre and no charge is made for the Open House events. Please do let us know if you're coming, though, so we can cater for the right number of visitors. All Open House events are held at the Centre itself at 12 The Rise, London N13 5LE.

Open House Event Dates:

Tuesday 7 February 2006 - 7.30pm
Monday 6 March 2006 - 7.30pm
Tuesday 4 April 2006 - 7.30pm
Tuesday 9 May 2006 - 7.30pm

SenseAbility Course Dates:

Thursday 2 February 2006 - 9.30am 4.30pm
Thursday 27 April 2006 - 9.30am 4.30pm

EASIE Course Date:

Wednesday 24 May 2006 - 9.30am 4.30pm



*"I'm hearing better
and I'm seeing better"*

*"I can see better
and now can read
without my glasses,
before it was blurry"*

*"This test is
even clearer,
I can see more colours"*

44 year old I.S.
December 2005



Treatments offered:

- Auditory Integration Training (AIT)
- Lightwave Stimulation (LWS)
- Neuro-developmental Programme (NDD)
- Self-Voice Programme (SV)
- Multi-Sensory Teaching

Training courses:

- SenseAbility sensory development course for parents
- EASIE developmental exercise programme for school or at home

Information:

- Extensive information on our website
- Free regular Open House events
- Talks and Conference presentations

Who visits us ?

To give you some idea of who comes to the Centre, we have made a quick roundup of last year's (2005) clients:

Male:	69 %	Aged 2:	3 %
Female:	31 %	Aged 3:	5 %
		Aged 4:	9 %
London:	40 %	Aged 5:	9 %
S.E.	33 %	Aged 6:	11 %
England:	12 %	Aged 7:	12 %
Scotland:	2 %	Aged 8:	7 %
Wales:	1 %	Aged 9:	7 %
N.Ireland:	2 %	Aged 10-12:	14 %
Abroad:	10 %	Aged 13-17:	10 %
		Aged 18-70:	13 %

Support our Research

Research in this field is of great importance and will support people with learning and sensory difficulties throughout the world. We gather long term data on our treatments from past clients and will publish statistical results in future issues of this Newsletter.

More Information

A large number of our clients come to us through recommendation and we are most grateful for the continued support offered to us by past clients.

If you know somebody who could possibly benefit from the services we provide, we will be only too happy to send further copies of this Newsletter and other literature - we're only a telephone call away !

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