



Research Brief

A summary of a published research article

Sensory Defensiveness in Persons with Developmental Disabilities

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This study describes sensory defensive behaviors in a sample of children and adults with developmental disabilities.

Sensory defensiveness is a tendency to overreact or respond adversely toward specific sensory stimuli that are non-threatening. People with sensory defensiveness overreact to, or avoid, certain types of touch, sounds, lights, smells, tastes, or movements (e.g., sensory stimuli). These behaviors are more evident in special populations, as in people with developmental disabilities.

The participants in this study were 158 adults and 88 children (total = 246) with various developmental disabilities such as autism and mental retardation. These individuals were reported to demonstrate unusual behaviors in reaction to sensory stimuli. Staff members (e.g., teachers, caregivers in group homes) that worked with the participants were asked to fill out a questionnaire about various behaviors. The six behaviors that were studied included:

1. avoids or becomes bothered by certain clothes
2. rubs, scratches, or pulls away if touched
3. avoids or spits out food or certain textures
4. bothered by tooth-brushing or face-washing

5. upset by noise or activity

6. oversensitive to other specific sounds, lights, smells, or textures (general hypersensitivity)

Results showed that sensory-defensive behaviors were evident in people with developmental disabilities; however, the behaviors were generally less reported in these school and residential settings than perhaps in studies using parent report methods. Two of the behaviors, upset by noise (#5) and general hypersensitivity (#6), were more common in children than in adults. This suggests that behaviors may decrease with increasing developmental maturity. Based on the results, the researchers suggest that there are two subtypes of sensory-defensiveness: tactile defensiveness (behaviors #1-4) and auditory/general hypersensitivity (behaviors # 5, 6). This can serve as a guide for appropriate assessment and intervention. A complete assessment should be performed to determine individual behaviors. This information should then be used to individualize intervention programs.

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