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The History, Development, and Purpose of the Sensory Integration Global Network

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The History, Development, and Purpose of the Sensory Integration Global Network

The Sensory Integration Global Network (SIGN) is a Web based resource developed by a loosely structured group of international volunteers dedicated to protecting the integrity and promoting the work of Ayres Sensory Integration® (ASI). SIGN provides an international resource to educate the public and professionals about A. Jean Ayres and sensory integration theory and practice to help them to discriminate between ASI and other interventions, especially those that use similar descriptors of improving sensory integration and sensory processing.

This article aims to increase awareness of the existence of SIGN within the readership of the American Occupational Therapy Association's (AOTA’s) Sensory Integration Special Interest Section. The persons working with SIGN hope that by informing the public about the trademark and exposing both the public and professionals to the underlying principles incorporated within the trademarked ASI approach, consumers will be able to make educated choices about the types of interventions they access. Additionally, the network hopes to assist practitioners by clarifying the terminology used when describing sensory integration practice.

The History of SIGN

At the 2003 AOTA Annual Conference & Expo, occupational therapy practitioners with expertise in sensory integration converged with common concerns about the proliferation of interventions using the words sensory integration, in either their name or their promotional materials that are inconsistent with principles proposed by A. Jean Ayres (1972). The use of the term sensory integration related to intervention strategies, both within and outside of occupational therapy, yields a concerning number of references to sensory integration interventions that use methods void of key occupational therapy principles, such as child-directed play or eliciting an adaptive response to promote engagement in occupation (Glennon & Smith Roley, 2007; Smith Roley & Glennon, 2006). Part of the controversy stemmed from the many publications and intervention programs at the time, which did not truly reflect the principles of Ayres’s work, but nonetheless had been mistakenly associated with sensory integration (Parham et al., 2007). The Baker/ Ayres Trust, therefore, trademarked the term Ayres Sensory Integration as a mechanism of protecting the integrity of this specific definition and practice of sensory integration (Smith Roley, Mailloux, Miller-Kuhaneck, & Glennon, 2007).

A second concern raised during these discussions included the growing number of parents seeking occupational therapy sensory-based services through their informal parent networks and Internet searches, only to be confused by the multitude of approaches claiming to be sensory integration.
Practitioners involved in these discussions believed that parents should have accurate information available to assist in understanding sensory integration as developed by Ayres, including how it should be applied within the profession of occupational therapy and how it differs from some of the other promoted interventions.

Third, several practitioners from countries outside of the United States expressed concerns about non-occupational therapy professions claiming sensory integration as a psychoeducational tool and actively lobbying to limit occupational therapy's involvement in the assessment and intervention of children with sensory integration deficits. For example, representatives from an Austrian sensory integration organization described the situation of sensory integration in the German-speaking countries: Educators and teachers sell their sensory-based approaches as sensory integration, and a growing number of course programs are offered to train preschool teachers and teachers as "SI therapists." Also noted was a concern regarding the proliferation of literature written by parents, psychologists, and teachers that explains "sensory integration" without reinforcing the essential link between sensory integration theory and occupational therapy practice perspectives.

Finally, occupational therapy practitioners from the United States and abroad expressed a need for easily accessed references that provide a comprehensive, yet succinct summary of the research supporting ASI theory and practice. Practitioners requested a place to obtain information that they could share with their colleagues to support recommendations of sensory integration as a frame of reference for treatment.

After the initial meetings, flurries of coast-to-coast and international e-mails ensued. Over the next few years, meetings were convened twice annually at the AOTA Annual Conference & Expo and at other conferences, featuring content related to sensory integration. The interest in the SIGN project grew among practitioners in the United States and from various countries around the world. The discussions often included University of Southern California/Western Psychological Services course instructors, international occupational therapy practitioners with expertise in sensory integration, and representatives from corporations involved in sensory integration-related products. Information from all these discussions was shared with the family of A. Jean Ayres, who oversee her legacy and estate. This group of practitioners, scholars, and researchers created the eventual concept of SIGN, volunteering their time to provide a reputable source of information about ASI for the international community. The group's commitment is to continue to provide relevant and accurate information through the easily accessible SIGN Web site in order to promote ASI.

**SIGN Operations**
The International Committee

The SIGN International Committee that formed in 2004 intends to (1) alert the global community to SIGN; (2) promote ASI internationally; (3) provide the international community with a better understanding of ASI; (4) remove the barrier of physical distance through the use of a Web-based network; (5) connect and support occupational therapy practitioners globally who practice within the realm of ASI; (6) encourage all practitioners to monitor their own practice, ensuring that their intervention is true to the fidelity measures of ASI; and (7) collaborate with international community members who would be interested in volunteering their time to translate the information on the SIGN Web site into a variety of languages.

The Web Site

SIGN has developed a Web-based resource (www.siglobalnetwork.org) dedicated to protecting the integrity and promoting the body of work of sensory integration as originally designed by Ayres. Still in its infancy, it is maintained by SIGN volunteers and currently provides information about Ayres, sensory integration theory, and the trademark; resources for professionals; summaries of relevant research; and, soon, parent resources and a place for global connections. Volunteers create the site's content, which is approved by majority e-mail "vote" of the SIGN committee members. The Web site allows no advertising, and SIGN will not link to any other organizations or promote or sponsor particular facilities or corporations.

Conclusion

Only when practitioners and consumers are provided with accurate, consistent, and reliable information regarding occupational therapy's concept of sensory integration as Ayres originally described it can educated decisions be made. Through the World Wide Web, information that once may have been obscured, taken years to discover, or remained simply unavailable in remote areas of the world is now at the fingertips of anyone with a computer. Thus, opportunities for information sharing extend beyond what has ever been experienced in the past. These opportunities allow SIGN to provide a link to practitioners, researchers, and scholars, assisting in research and promoting the growth of Ayres's theory and recognition of her work worldwide for the benefit of all clients. This link is particularly important as sensory-based deficits associated with a variety of pediatric diagnoses are increasing and consumers need to find reputable services for their families. For ongoing updates about the development of SIGN, visit the Web site. To become involved with a SIGN committee, contact one of the authors of this article.
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