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Asperger's and Gaze Control

The most common lack that I have found - in all cases of autism - but especially in children labeled with Asperger's - is lack of gaze control.

By [Svea Gold](#)

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With the planned revision of the DSM IV there is a huge controversy right now as to whether to retain the label of Asperger's and not just to call the condition "part of the autism spectrum." No matter what the label, your child is still your little professor and that means that he is very smart. One of the first things we who work with neurodevelopmental therapy are taught that if we notice is a huge difference in the area in which a child shows competence, and those areas in which he is lacking, that child's brain is good and we can bring up the areas in which he is not functioning well.

So if you want to find out what you can do, have a look at the whole child. Don't hide behind the Asperger's label as a reason not to make life easier for him. You will not take away his intelligence, you will free it.

All labels on the autism spectrum come with lists of "comorbidity." That is a frightening sounding name, but all it means is that in addition to whatever label the child has been given, there are other symptoms as well. There may be balance problems, there may be speech problems, sleep problems, digestion difficulties and often there are allergy problems as well. Where does one start?

What ever these "comorbidities" are, chances are that they arise out of the same areas of the brain in which for one reason or another some connections are missing. In short, since nothing in the brain works without some feedback from other areas in the neural network, we must have a look at what is keeping the child from succeeding.

What is not connecting, what is not going in, and how can we restore or recreate some developmental stage that was missed? Are there some structural injuries in the spine - especially the top three vertebrae? There might even be some rigidity in the cranial structure.

The most common lack that I have found - in all cases of autism - but especially in children labeled with Asperger's - is lack of gaze control. Gaze is a function controlled in the brainstem. Gaze control is what allows a baseball player to run across a field and though the ball he is trying to catch is always moving

and the position of his own body is in constant flux, the ball stays in his field of vision at every moment.

It is not for nothing that autistic vision has been described as "fractured." The child essentially sees the world as through field glasses in a bumpy car. Symptoms of the child's withdrawal then are largely an attempt to avoid this uncomfortable way in which the child experiences the world.

Why is that different from the way most of us see our surroundings. In the olivary complexes in the brainstem there are nerves that receive input from the body, from the vestibular system and from the visual system. In the olivary complexes all these nerves interact. If there is some disconnect from either of these systems, the child loses control of many functions. While we have to have a look at the whole child, this particular connection is rather easy to evaluate by checking the headrighting reflex of a child - or for that matter of an adult. If that reflex does not work with eyes open, we are looking at a problem in the connections to the visual system. If it does not work with the eyes closed, chances are it is because of the vestibular connection to either the eyes or the information from the body.

For the newborn baby these connections are not yet in place. During the first few weeks the infant "stares at sound". When he listens to someone's voice, his eyes seem to look into space. He can either see you or hear you, not both. Through the experience of being moved around and touched, and generally learning to control his body against this strange force of gravity, the connections between these three systems are finally made.

There are many reasons why this interaction may not fully function. It could be caused by prenatal influences, by birth trauma, or simply by lack of proper stimulation during the first few months.

Daunting as all this may seem, by simply replicating the entire developmental progression, starting with movements made in utero, we can usually help the child catch up on what was missed in those very early weeks of life so that later development can follow in the ideal fashion.

Helping the child achieve ideal development does not take away his intelligence, it liberates it.

To understand more, I suggest you look at the article ["I can look at you now!"](#) on the [Free Articles page on this fernridgepress.com website](#).

Svea Gold

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But a problem is not a problem if you can fix it - whether we are raising our children or helping those of the global village. This book deals with connections, not just single answers. Whether we are exploring behavior problems, learning disabilities, attention problems, delinquency or drug use, rarely does just one remedy apply. Neither do all remedies apply to every child. Even if only one of the many approaches suggested in this book helps only one child in a hundred, and that happens to be your child, or a child in your acquaintance, this may be the most important book you ever read.

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