



CASE STUDY Athletic and Academic Improvements after HANDLE® Screening with Boys High School Track Team

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These case studies, each submitted by a Certified HANDLE® Practitioner or Screener, demonstrate outcomes achieved through implementation of an individualized HANDLE program. The acronym stands for the Holistic Approach to NeuroDevelopment and Learning Efficiency. The HANDLE paradigm for understanding behaviors and their root causes is thoroughly explained in *The Fabric of Autism: Weaving the Threads into a Cogent Theory*, by Judith Bluestone, the creator of HANDLE and the founder of The HANDLE Institute. For intimate insights into client and family experiences of HANDLE, see *The Churkendoose Anthology*, with commentary by Judith Bluestone.

For each of the clients in this case study, the screener began with a screening assessment, the findings of which led to a identification of areas of neurodevelopmental weakness, which in turn formed the basis for a program of activities complex in their neuro-scientific premises and very simple to implement. Each client participates in eight to ten activities regularly; the screener, in writing up the case study, names some of those activities in brief without the full details and explicit information each client receives in why and how to implement the program. Go to www.handle.org for more information.

Background

This case study took place between January and April, 2005 at the public high school in Pataskala, Ohio. (Pseudonyms have been used to protect the identity of the team members.) A standard HANDLE screening procedure was used (i.e., 45 minute assessment process, followed by 45 minute presentation of findings and review of activities, with one follow up visit), with the following changes:

- The intake information was adapted, adding questions relating to each boy's track events, personal record, and goals.
- Questions normally asked in the course of a screening were asked as part of the intake, which was done face to face with each boy rather than having them fill it out in advance (since chances of that happening were slim to none). It was a great way to initiate discussion and break the ice.
- Due to time limitations, each boy was screened on one day and his program was presented to him the next day, with a follow-up in a week or so.

- There were continued follow-up sessions (on average about 3 follow-up sessions per student, depending on what each boy wanted and needed) as the season went on.

Procedure

Coach was screened first so he could see what I was going to do with his athletes. He chose those boys he thought would benefit the most, but, as it turned out, a number of boys self-selected to be screened. I began in January at the beginning of the indoor track season and continued through April, about six weeks into outdoor track.

Most of the boys screened were given the following HANDLE activities in their program: Crazy Straw, Blow Pipes, Face Tapping, and Skull Tapping. Some of the other activities assigned in their programs included: Cool Pack, Hoop Mazes, Seated Clapping Game, Bead Transfer, Hug and Tug, Rope Turning, Sunrise Sunset, Eyes Closed Activity, and Ear Muffs.

Probably the most challenging aspect of using HANDLE with athletes is their mindset of "more is

better.” Gentle Enhancement® (the idea of monitoring the body to do an activity only up to the threshold of stress—and stopping the activity at that point) is anathema to them. I would quote Don Greene: “Performance equals potential minus interference” in order to remind them not to “interfere” in this neurodevelopmental growth process.

I adapted Seated Clapping Game, since no self-respecting teenage boy is going to rhythmically clap hands with a partner seated across from them as described in the activity. I had them use a mirror and/or the wall instead. No matter what I asked them to do, the boys all were excited and motivated and tried everything. HANDLE provides an in depth look at YOU very appealing and I was asked more than once how I could know so much about them—was it magic?

Individual Interactions

The first young man screened was Gerard, a shot putter. He must have gone out and told the others what we had done because two more appeared and said they wanted what Gerard got. This was only after screening—I had not given Gerard his program yet, so he had not received any of the interesting therapy devices we use (i.e., toys). But Kevin and James wanted to know what I had done with Gerard. I explained that I had looked to see where he was using his energy to figure out how he could use it more efficiently so he'd have more energy for throwing. They were enthused and went back and begged Coach to allow them to be screened. He hadn't planned on having me work with them because they tended to be a handful, but decided to let them be screened. (See below.)

Despite knowing nothing about the technical aspects of shot put, I was able, after screening Gerard, to describe to Coach what I thought was hampering his progress. I explained that in Gerard one sense processed rhythmically more slowly than others so his spatial-temporal orientation was compromised. Coach was amazed, since I had singled out the very issues Coach was working on with him. So we addressed these with Gerard's program, which he followed faithfully, and began noticing greater ease when he threw.

Kevin did his program and was entirely sold on it—and not because of the impact it had on track so much as the unexpected impact he believed it had in the classroom: i.e., improved focus and listening. Kevin eventually told me that his parents had taken

him from pillar to post to address his ADHD, all to no avail, and this was the first thing that not only worked for him but that made sense to him as well. When I showed him the Rope Turning activity, Kevin yelled, “I FEEL it!!!”

In the process of screening, I found out that Alex had been blacking out and had told no one! I told Coach, who called the boy's parents and got him to a doctor—where he was diagnosed with hypoglycemia. This boy was really sold on HANDLE as a result, did his program faithfully, and was voted Most Improved Player for the season.

Keith's mother called Coach and told him that whatever we were doing to keep it up; that her son was gladly taking cod liver oil and crawling through hoops, and seemed to be much more cheerful!

The senior boys all reported that Face Tapping and Skull Tapping were invaluable during boring classes! Chris was able to give up cigars (!) and was quite fond of his crazy straw. He was also quite dedicated to his program because he wanted to get an athletic scholarship but had to meet some academic criteria for his chosen college, and he told me that since doing his HANDLE program, taking cold liver oil, drinking water—that not only was high jump easier but so were his classes. [P.S. He got the scholarship!]

Tony felt so much better with his crazy straw and water that he took the straw to work at the drive thru window of KFC, where he filled a pop cup with water and sipped away.

During one follow-up I asked Jonah what changes he noticed and he said none. In the course of our discussion, however, he told me that for the first time ever he did a seven-step for pole vault. This was HUGE since this person did not like to have both feet off the floor at the same time! He had actually needed several other boys to hold onto him in order to lie on a weight bench to lift! Yet he wanted to be a pole vaulter—and now he was.

All kinds of discrete improvements were reported: better focus, less tired, less clumsiness, improved form, improved diet, gave up pop, took vitamins, improved breathing.... I would be walking through the halls and boys would stop me just to tell me that they were taking cod liver oil!

Summary

Of the boys that were screened between January and April 2005, all improved in their track performance and all but one reported academic improvements. In general, Coach was very pleased with the results of these screenings. Unfortunately, I needed to cut short the work with this group of young people due to unexpected family duties in my life.

For more information Diane Boyer resides in Pataskala, Ohio, and can be reached at elianordvorak@yahoo.com.

The HANDLE Institute presents these case studies to demonstrate the successes of the HANDLE approach and pique the interest of researchers and funders in engaging in clinical studies to further examine the efficacy of these interventions. For more information about The HANDLE Institute, go to www.handle.org or email us at support@handle.org. You can download case studies from the website or email us to obtain pdf files.



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