Rood Frame of Reference

The Rood Frame of Reference was created by Margret Rood and engages clients in treatment within their natural contexts. It states that, with repetition and guided therapy, optimal functional engagement can occur. This FOR is a bottoms-up approach that improves muscle tone through the application of sensory stimulation on specific dermatome/myotome sensory receptors with either inhibitory or facilitatory techniques to achieve motor control.



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Bottom-Up Approach
Bottoms-Up
The Rood Frame of Reference is considered a bottom-up approach because it prioritizes addressing the underlying deficits and root cause of a problem before evaluating the client's desired occupational roles. This approach focuses on what can be acquired or restored to enable engagement in meaningful activities. Therapists using this approach evaluate the client's specific deficits and use various sensory and motor stimuli to activate specific muscles and movement patterns to facilitate desired movements. By improving motor control and functional abilities, the Rood approach enables the client to engage in meaningful occupations or roles they desire. Therefore, the Rood approach is considered bottom-up because it begins with restoring or acquiring the foundational skills necessary for the client to engage in meaningful occupations.

Population

All Populations
All Pops
The Rood Frame of Reference (FOR) is used for all populations because it can be applied to a wide range of neurological and developmental conditions. The approach is based on principles of motor learning and sensory integration, which are applicable to individuals of all ages and abilities.

CNS Disorders
CNS-Brain Disordered
The Rood Frame of Reference is commonly used for individuals with central nervous system (CNS) disorders because it is designed to address deficits in motor skills and movement patterns that are commonly observed in these populations. CNS disorders, such as stroke, traumatic brain injury, cerebral palsy, and multiple sclerosis, can cause various motor impairments, including muscle weakness, spasticity, and abnormal movement patterns.

Principles

Normalize Muscle Tone
Muscle-man Normalizing Tone
The Rood Frame of Reference is an effective therapeutic approach for neurological patients with difficulties controlling motor movements. The primary goal of this approach is not to obtain one specific movement but to train overall motor function, which will allow clients to complete functional tasks more easily by normalizing muscle tone.

Repetition
Reps
Repetition is important in Rood FOR to reinforce new motor patterns and improve overall motor control. It helps establish new neural pathways and improves muscle memory, allowing for more efficient movement. Through repetition, clients can improve their motor control and achieve their desired goals. It also allows for gradual progression through the stages of motor control and reinforces specific motor patterns to improve muscle tone.

Ontogenetic Developmental Sequences
Onto-genes Developing in Sequence
Ontogenetic Developmental Sequences is a principle of Rood FOR that uses early childhood motor patterns to improve motor function and promote occupational engagement later in life. By observing these patterns and using them in therapy, occupational therapists can improve muscle tone, motor

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control, and overall function, leading to greater independence in daily activities. The eight ontogenetic developmental patterns are a part of this principle and are utilized to facilitate or inhibit motor responses based on the client's individual needs.

Controlled Sensory Stimulation

Controller Sensory-satellites Stimulated

Controlled Sensory Stimulation is a principle of the Rood Frame of Reference that involves providing specific types and amounts of sensory input to activate or inhibit motor responses, depending on the client's individual needs. This principle involves using techniques such as tapping, brushing, and deep pressure to normalize muscle tone, improve motor control, and promote functional activities. By carefully controlling sensory input, occupational therapists can provide a more comprehensive and individualized approach to therapy, which can improve the effectiveness of other therapeutic techniques and interventions, ultimately helping clients to achieve their goals and improve their quality of life.

Muscle Responses

Muscle-man Responding

Muscle responses are a principle of the Rood Frame of Reference based on the idea that muscle tone and muscle activity can be influenced by various types of sensory input. This principle involves using sensory input, such as proprioceptive input and resistance to elicit specific muscle responses, with the goal of normalizing muscle tone and improving motor control. Therapists using the Rood FOR can use various techniques to elicit muscle responses, such as tapping or vibration, and can use the resulting changes in muscle tone to promote functional activities and occupational engagement. By focusing on muscle responses and the impact of sensory input on muscle tone and activity, therapists using the Rood FOR can provide a highly individualized and effective approach to therapy for clients with neurological and motor control difficulties.

Techniques

Facilitatory Technique

Facility

The Rood FOR includes several facilitatory techniques to improve the tone of flaccid muscles, which are listed as follows: tactile stimulation (fast brushing, light stroking), thermal facilitation (icing), quick light stretch, tapping, pressure (of the muscle belly), heavy joint compression (used by manual compressions or weight-bearing positions), pressure on bony prominences, and olfactory and gustatory stimulus. These techniques are designed to provide specific types and amounts of sensory input to activate or inhibit motor responses, ultimately helping to normalize muscle tone and improve motor control for clients with neurological and motor control difficulties.

Tactile Stimulation

Tac-tiles Stimulating

Tactile stimulation is a facilitatory technique used in the Rood Frame of Reference that involves providing fast brushing or light stroking sensations to the skin to activate or inhibit muscle responses. This technique is used to normalize muscle tone and improve motor control for clients with neurological and motor control difficulties.

Thermal Facilitation (Icing)

Ice

Thermal facilitation, specifically icing, is a facilitatory technique used in the Rood Frame of Reference that involves the application of cold temperatures to the skin to stimulate and activate muscle responses. This technique is used to improve muscle tone and motor control for clients with neurological and motor control difficulties.

Inhibitory Technique

Inhibiting-chains

Inhibitory techniques are a group of techniques used in the Rood Frame of Reference that involve the use of sensory input to decrease or inhibit muscle tone and abnormal movement patterns. These techniques are used to help clients achieve better control and coordination of movement. Examples of inhibitory techniques in the Rood FOR include prolonged stretching, slow stroking, and sustained pressure to muscle bellies.

Light Joint Compression

Light Joint Vice

Light joint compression is a therapeutic technique used in occupational therapy based on the Rood Frame of Reference. It involves applying gentle pressure to a joint to reduce or inhibit muscle tone and promote relaxation. Light joint compression can be used as an inhibitory technique to decrease abnormal tone in clients with hypertonia or spasticity.

Slow Stroking

Snail Stroking

Slow stroking is an inhibitory technique based on the Rood Frame of Reference. It involves applying slow, rhythmic strokes with light pressure over the muscle belly to decrease muscle tone and promote relaxation. Slow stroking is typically used with clients who have increased muscle tone, such as those with spasticity or hypertonia. The slow and gentle pressure helps to calm the nervous system and promote a sense of relaxation in the muscle.

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