OT Strategies for Life



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OBJECTIVES FOR TODAY

- Define OT for children
- Define how OT can help with everyday life
- Define self-regulation and sensory processing difficulties.
- Elucidate how to enhance communication with other providers
- Enhance one's understanding of the interplay between Mental Health and Occupational Therapy.

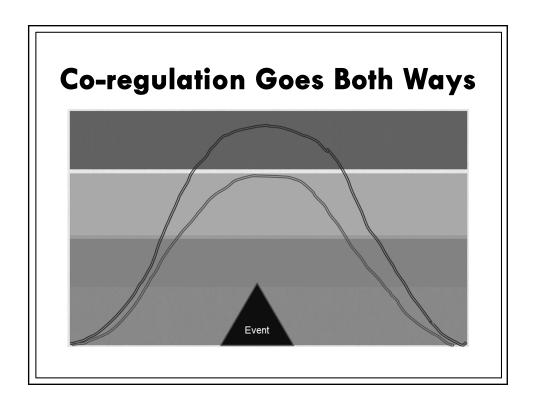
How can OT help families?

- •OT can help parents with their child's behavior and routines, i.e.:
 - •Self regulation or co-regulation
 - Activities of Daily Living (ADLS)
 - Play
 - Development
 - Attention and focus

Self-Regulation & Sensory Processing

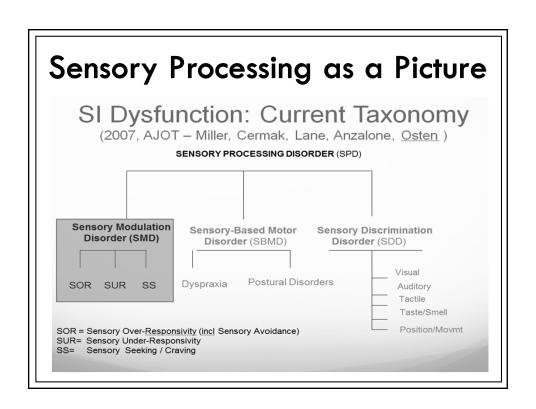
- **Definition of Self-Regulation** (Shanker, 2012) demonstrate ability to achieve positive outcomes:
 - Manage arousal states, emotions, behavior, attention
 - Pay attention to learn
 - Cooperate for play
 - Deal with moment-to-moment stresses without melting down
 - · Achieve primary cornerstone of early childhood development
 - Behave in socially acceptable manner
- Important components
 - Better predictor of school readiness than IQ.
 - Affected by external and internal influences.
 - Takes practice!





Factors Affecting Regulation

- Emotions
- Stress
- Interpersonal Factors
- Physiological Factors
- Environmental Factors



What could complicate self-regulation?

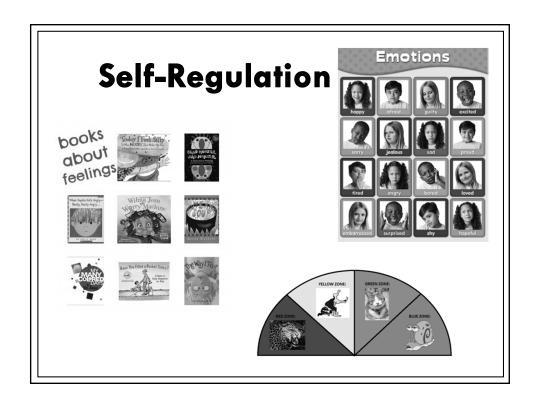
- Developmental delay (e.g., autism, other)
- Temperament and goodness-of-fit
- Mental health concerns of caregiver
- Prenatal exposure

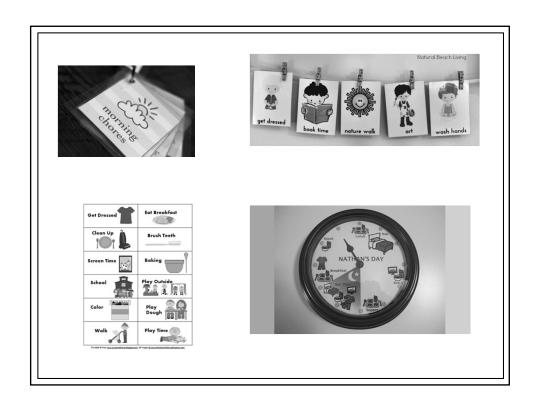
What are the areas affected?

- Sleeping
- Feeding/Eating
- Potty training
- Bathing
- Dressing
- Taking child on errands
- Going to family gatherings, to church, etc.
- Developmental skills (fine/gross motor, perceptual, etc.)

How Might We See This Impact?

- It may contribute to caregiver frustration
- It may contribute to poor attachment
- It may lead to disruption in behavior (e.g., major tantrums)
- It may impede the achievement of developmental milestones along prescribed timelines

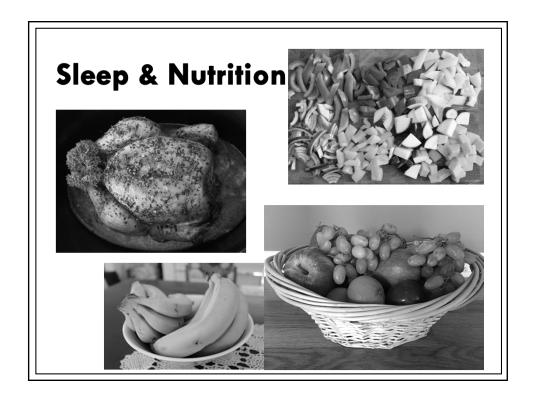


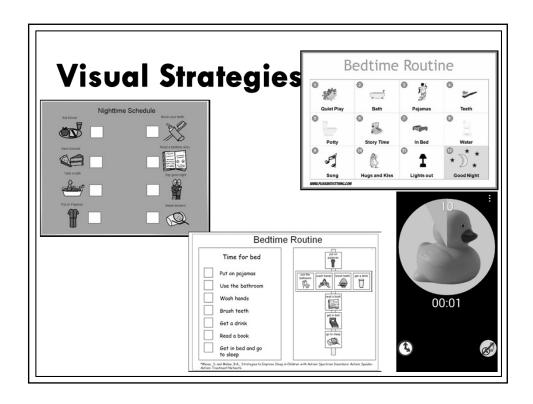




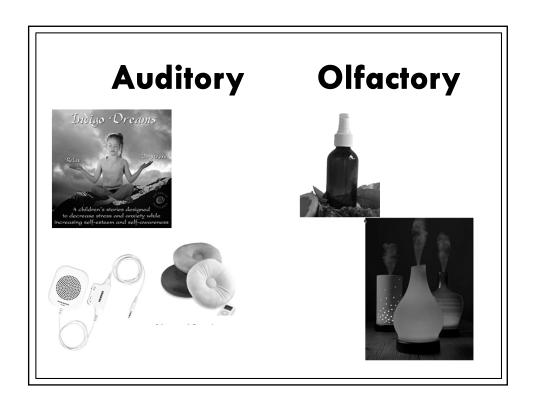
Suggested Sleep Amounts

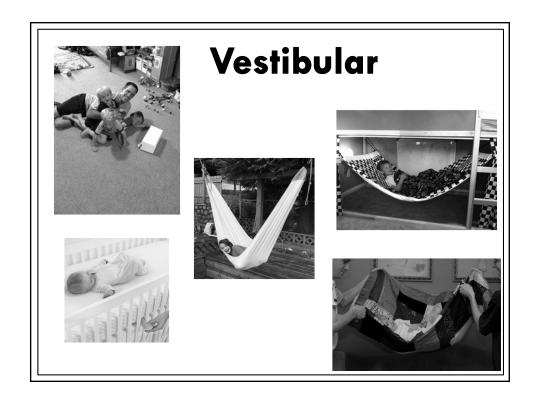
AGE	SLEEP REQUIRED (hrs)
Newborns (up to 2 months)	12 - 18 hrs
Infants (2 months - 1 year)	14 - 15 hrs
Toddlers (1 - 3 years)	12 - 15 hrs
Preschoolers (3 - 5 years)	11 - 13 hrs
School age (5 - 12 years)	9 - 11 hrs
Teenage (12 - 18 years)	8.5 - 9.5 hrs
Adults	7 - 9 hrs

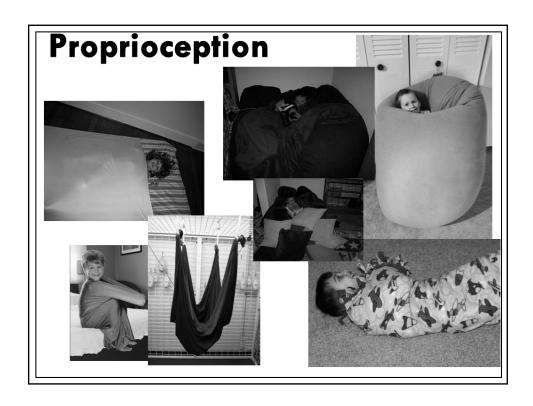














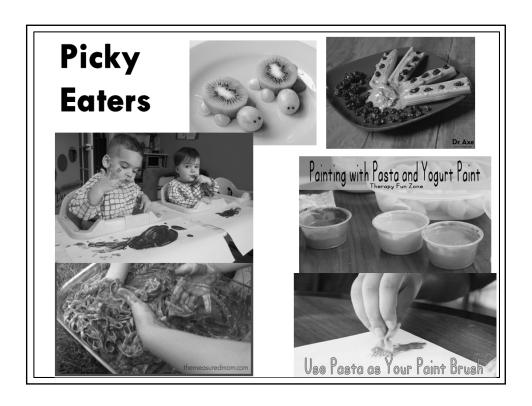
Mealtime Mashups

- Up and down from the table
- Picky eaters

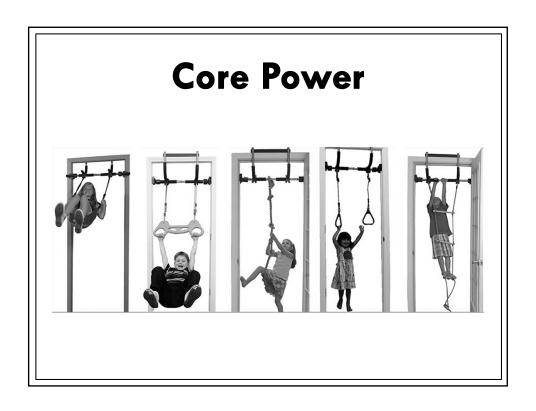


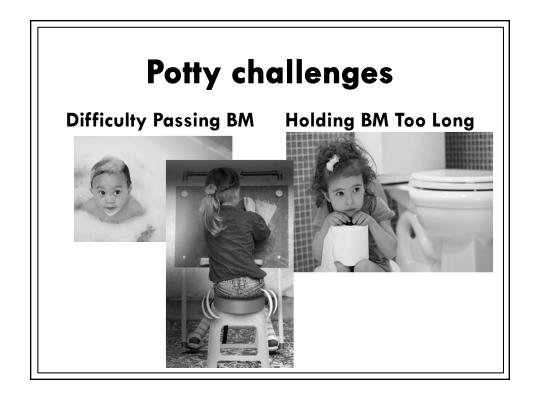












Potty Challenges

Anxiety about using home bathroom

Refusal to use public restrooms







Potty Challenges

Fecal Smearing

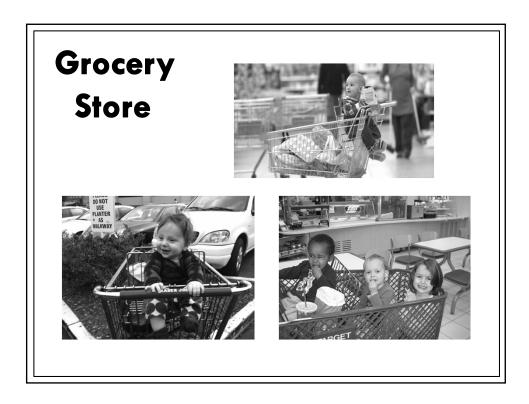












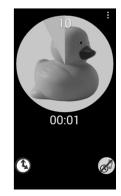


Doctors Visits

(& other waiting rooms)









Considerations: OT & Mental Health (or other disciplines)

- What is your level of knowledge, experience, comfort working with SPD?
- What are the practice guidelines of your profession?
- When should you seek extra help?
- When are sensory strategies helpful vs. counterproductive?
- What colleagues can work with you collaboratively around care?

Assessment Resources (see handouts)

- Infant/Toddler Sensory Symptom Checklist (https://www.spdstar.org/basic/symptoms-checklist)
- Preschool Sensory Symptom Checklist (https://www.spdstar.org/basic/symptoms-checklist)

What's in my sensory backpack?













Head Inversions







Which Tools To Use?

Tools requiring extra training

- Therapeutic Listening
- Integrated Listening
- The Listening program
- Interactive metronome
- Wilbarger Protocol

Tools anyone can use

- Weighted items
- Tactile Tools
- Oral tools
- Olfactory tools
- Visual tools
- Intensive vestibular programs Movement tools



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