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Did You Know that Sensory Integration Intervention Benefits Adults as well as Children?

By Anne Trecker, MS, OTR/L

Although our clinic is predominately filled with children, OTA-Watertown also services a growing number of adults and adolescents. These older clients seek our services because their day-to-day functioning has been impeded by difficulties with sensory integration. They are concerned about things like holding onto a job, maintaining relationships, and driving without being involved in accidents. Many of our adult clients have experienced sensory integration difficulties since childhood but have been labeled as having behavior, social-emotional or psychological problems. Low self-esteem and frustration resulting from social and job-related failures can lead to anxiety, depression, substance abuse, and social withdrawal. Labeling their difficulties as sensory integration dysfunction is very important step in the intervention process for older clients.

Elaine, a 30-year old museum curator, who was highly sensitive to noise and was easily distracted at work. She had developed the habit of staying in her office late into the night in order to work on projects when there were few auditory distractions. Elaine was clumsy, often felt off balance and had a hard time learning motor tasks. She was not able to eat and talk at the same time, making lunch meetings and gallery openings a disaster. Although she could accomplish most parts of her job effectively, the energy she exerted on monitoring her motor difficulties resulted in fatigue and frustration. Elaine was being treated for depression when she was referred for an OT evaluation.

continued inside



Photo: Stanley Rowin

Greetings from our Executive Director, Jane Koomar

OTA-Watertown is very pleased to announce the development of our new web page at www.otawatertown.com. We will be updating it frequently and would appreciate any suggestions that you have for making the web page more useful. Currently you will find information on Mary Kavar and Carl Hillier's well received course, *From Eyesight to Insight: Visual/Vestibular Assessment and Treatment* on January 24 and 25, 2003. Several of our therapists, who have previously attended this course, are employing these techniques with excellent results. We are also pleased to be the on-site coordinators for the WPS/USC SI certification course series that will begin in the Boston area in February 2003. We appreciate the opportunity to assist in bringing more expertise in the area of sensory integration to therapists in our area.

One of our focuses this year is to increase pre-school teachers' knowledge of sensory integration so that children can enter kindergarten with more readiness skills. We have staff who are willing to provide in-service training at preschools and other facilities in the area. Please call Xinia Sinacola at 617-923-4410, ext. 103, for more information.

We wish to thank you for all of your continued referrals and support of our services. We hope that you and your family have a joyous holiday season.

Adults *continued from front*

Sensory Processing Difficulties Seen in Adults

Like our younger clients, adults and adolescents come from a variety of backgrounds and have a variety of issues, which are related to difficulties with sensory processing. Some of our adult clients are functioning well in many ways. They may have careers, family and friends, but due to sensory integration difficulties some aspects of their lives are extremely challenging. Sensory defensiveness or over-sensitivity to sensations (touch, sound, visual information or movement) is common in these individuals and can result in problems with focusing on tasks, participating in everyday activities in busy environments, maintaining work and social relationships, or experiencing physical contact with others.

■ Sarah, a 28 year old day care provider, was extremely sensory defensive. She found it very hard to concentrate at work due to the many auditory and visual distractions. Unexpected touch and sound put her on edge, and, after she yelled at someone in a movie theatre for opening a candy box, her friends were embarrassed to go out with her. In addition, intimate relationships were very difficult. Sarah was referred to OTA-Watertown by her psychologist who felt that sensory defensiveness might be underlying her social difficulties.

Adult and adolescent clients with diagnosis on the autism spectrum often suffer from extreme sensory defensiveness, which can lead to equally extreme anxiety. These individuals are often unable to verbalize their feelings and often resort to aggressive or self-injurious behavior in response to bothersome sensory input. These older clients are often referred by guardians or advocates because their behavior has reached a critical point and is not manageable by other means. Often, these individuals are in danger of having to leave their homes or a work situation for a more restrictive environment.

■ Extreme tactile defensiveness brought Sam, a 16 year-old young man with autism, to OTA-Watertown. He would only touch objects with the tips of his fingers and he protected his hands by keeping them under his shirt. He was in such a high state of arousal that he was regularly hitting himself in the forehead.

Dyspraxia, or problems with motor planning, is also common in adult clients who often have a history of significant difficulty with motor skills. These individuals may be clumsy or accident prone, leading to embarrassment in social situations and concerns for personal safety. Visual-spatial awareness is often a problem as are organizational abilities. These difficulties can negatively impact everyday skills such as dressing, driving, shopping, cooking meals, and

housekeeping. It may be difficult for these individuals to master work related tasks and to plan and organize their daily lives. Frequently, adults with dyspraxia avoid sports and other leisure activities that involve movement, resulting in less opportunity to improve skills to receive the benefits of exercise.

■ At age 45 David learned to ride a bicycle after 1 1/2 years of occupational therapy. He had had frequent minor car accidents, primarily because when he turned his head, the world blurred. It was determined that he was not able to integrate visual and vestibular (movement) information, and therapy enabled him to maintain a stable visual field when his head moved. David's new skills increased his confidence in driving, turning around in his car, parking, and merging into a lane of traffic. Best of all, he was able to exercise regularly using the bike path near his house.

What Kind of Intervention Works for Adults

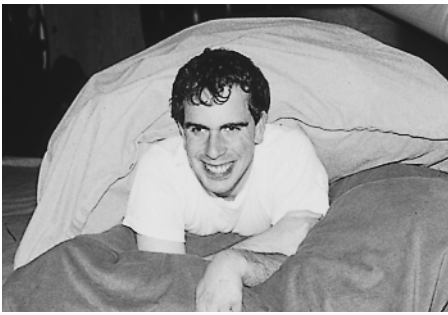
"Can sensory integration treatment benefit children over the age of nine?" is a frequently asked question from parents, teachers and health care professionals. From information garnered from years of experience working with older client's, the answer is unequivocally, yes! We have seen adults with sensory integration dysfunction experience decreases in sensory defensiveness, increases in motor abilities, and improvements in the quality of their lives.

Intervention programs for adults and adolescents can consist of a range of services from a single consultation to regular, ongoing therapy. Regardless of the frequency, developing a sensory diet and recommending accommodations for the home or work place are key components. Education of family members, work colleagues, and close friends is also important in order to ensure a supportive network that extends beyond therapy sessions.

■ When George, an adult with autism, started therapy at age 32 he had to be restrained regularly due to aggressive behavior. An occupational therapy evaluation showed that he was sensitive to noise and fearful of movement. This condition had led to aggressive reactions when George encountered unexpected noise or when he was asked to move in ways he found threatening. Explaining the underlying causes of George's maladaptive behavior to his caregivers was instrumental in providing George with ongoing support. In addition to providing organizing input during treatment sessions, George's occupational therapist taught him calming



Dr. Jane Koomar stands with Dr. Margaret Bauman, Director of the LADDERS Program, after receiving the Margaret Bauman, MD award for excellence in serving the autistic community as the Outstanding Therapist Provider.



strategies that he could use at home. After several years of regular treatment, George's outbursts decreased significantly and he rarely needed to be restrained. As George gained more control over his behavior, he was able to take more control over his life. He now lives in his own home and is on the Massachusetts Advisory Board for the Department of Mental Health.

For many adults treatment consisting of clinical consultation, home programming and environmental accommodations is the most beneficial.

D Sarah, the woman discussed earlier, received six consults from an OT. Her therapist helped her to establish a home program consisting of the Wilbarger Deep Pressure Protocol and other "heavy work" activities that provided deep pressure and strong input to her muscles and joints. As Sarah came to understand her issues, she was able to structure her environment to help decrease her defensiveness. This program was successful and Sarah became less anxious, something her friends and colleagues noticed. She also began to feel more open to the possibility of intimate relationships.

An ideal approach for other adults is weekly sensory integration based occupational therapy sessions, including weekly activities that provide sensory input and work on specific motor skills. A clinical environment with a wide variety of therapeutic equipment allows older clients to get the intensity of input that they may need. The emotional and physical safety of such a setting affords the opportunity to try new things and take risks that would be impossible in the "real" world.

D Deborah was very sensitive to movement and had significant balance problems. She was not able to climb a ladder, was afraid to walk on ice and hated flying. At age 50, she received several months of weekly OT and made significant improvements. Her treatment

combined work in the clinic using controlled movement on suspended equipment with heavy work activities at home. During a treatment session, Deborah jumped for the first time. She also learned to climb a ladder and came to feel more comfortable in the world.

For other adult clients a consultative approach that includes discussion and problem solving is the best model of intervention.

D Dan had a great deal of difficulty with motor planning although he had excellent verbal skills. He came to OTA-Watertown to get help with the many everyday tasks that are essential to maintaining a home. His OT helped him devise strategies for using a can opener, operating the stove, and wrapping presents. Together they broke the tasks into simple steps and made lists that Dan posted in his house. Similarly, Josh, a high school student who excelled academically but who couldn't tie his tie or cut a bagel, created a notebook of directions for daily tasks. Both of these young men developed increased self-confidence as daily routines became less stressful.

Adjuncts to occupational therapy treatment can also be very helpful for this client population. The Interactive Metronome, a computer based program that has been shown to improve coordination, rhythmicity of movement and attention has worked well for many adults. Other clients have benefited from cranio/sacral therapy, a soft, non-invasive massage technique and Therapeutic Listening, use of specially engineered CD's designed to improve auditory processing and reduce defensiveness.

D Peter, a young man with autism, was able to make significant gains in motor planning through a program that included sensory integration based OT, Interactive Metronome, cranio/sacral therapy and Therapeutic Listening. He has progressed from not being sure how to roll from his back to his stomach to having a daily paper route and working successfully in a sheltered workshop.

The families of OTA-Watertown adult and adolescent clients have witnessed excellent gains through a variety of treatment techniques. These gains have allowed older clients to lead more productive lives.

How Does an Adult or Adolescent Know if He or She has Sensory Integration Dysfunction?

If you or an adult acquaintance answers yes to several of the following questions a sensory integration based occupational therapy evaluation may be beneficial.

1. Difficulties with balance, becomes disoriented and/or fearful on elevators or escalators.
2. Fatigues easily; tends to lean on arms or slump at desk.
3. Accident-prone, clumsy or awkward in daily activities.
4. Dislikes crowds or accidental jostling in public situations (standing in line at the movie theater or shopping in store aisles).
5. Low tolerance for approach from behind or unexpected touch.
6. Difficulty in maintaining intimate relationships, difficulty with physical closeness.
7. Disorganized in work or home activities.
8. Difficulty following several step instructions for motor tasks.
9. Difficulty with driving, parking, shifting gears or entering freeways.
10. Poor self-esteem, lack of confidence.
11. Difficulty focusing attention or over-focused and unable to shift to next task.



Occupational Therapy Associates-
Watertown, P.C.

OCCUPATIONAL THERAPY GAMES & ACTIVITY LIST 2002-2003

compiled by Stacey E. Szklut, MS, OTR/L Clinical Director

Children learn through play. The toys and games listed below can help your child develop skills in planning and sequencing, eye-hand coordination, visual perception and writing, while having fun. These suggestions include sensory-based activities to facilitate body awareness, as well as games to encourage the development of specific skills. Approximate ages or skill levels have been given to help guide your choices. Many items can be purchased at major toy stores. Catalogue items are followed by the resource name. Ask your occupational therapist for help in deciding which games or toys best meet your child's needs.

Resources

Other resources for choosing toys can be found in the Toys R Us Toy Guide and web site (www.kidtips.com). In addition the November issue of *Family Fun* lists a variety of wonderful toy favorites chosen by a large group of children. The December issue of *Parent Magazine* frequently has a section on the best and worst toys of the year.

OTA-Watertown has an active file box of catalogues available for parent use. These catalogues include items suggested here as well as a range of therapeutic materials from fiddle toys to weighted vests to larger equipment. Please ask for this box at the front desk.

Back to Basics Toys (800) 356-5360 www.basictoy.com

Discovery Toys (only available through a Discovery Toys representative), such as Nica Hamlin
(877) 875-9471 nika@discoverytoyslink.com

Hearthsong (800) 325-2502 www.hearthsong.com

Highlights (800) 422-6202 www.highlightscatalog.com

Integrations (800) 622-0638 www.integrationscatalog.com

Leaps and Bounds (800) 477-2189
www.leapsandboundscatalog.com

Therapro (800) 257-5376 www.theraproducts.com

Games to Develop Eye-Hand Coordination, Planning & Visual Spatial Skills:

Younger Ages (3-7 years)

Bob the Builder
Brick Laying Game
Clue Junior
Charades for Kids
Don't Break the Ice
Fascination 3
Dimensional Mazes
(Back to Basics)
Fishin' Around
Fleas on Fletcher
Gator Golf
Go Fish
Hands Down
Heads Up
Hidden Picture Game
(Highlights)
Honey Bee Tree
(Back to Basics)
Hungry Hungry
Hippos
I Spy Memory Game
(Learning Express Store)
Leaping Frogs Game
(Highlights)
Magnet Express Maze
(Back to Basics)
Mastermind Junior
Mr. Mouth/ Hungry
Hound
Mr. Potato Head
Game
Operation Brain
Surgery
Oreo Matching
Middles
Poppa's Pizza Pile-up
(Back to Basics)
Poppers the Elephant
Silly Faces (Therapro)
Toppling Hoppers
(Hearthsong)

Older Kids (8 and up)

Barrel of Monkeys
Batik (Back to Basics)
Battleship
Bop It/Top It
Clue
Connect Four
Cool Moves
(Discovery Toys)
Cranium Cadoo
Guess Who
Hot Shot Basketball
Jenga
Kerplunk
Labyrinth
(Discovery Toys)
Mancala
Mastermind
Mousetrap
Operation
Perfection
Rummikub
Rush Hour
(Discovery Toys)
Simon
Topple
Twister

Activities for Fine Motor Development and Writing:

Younger Ages: (Pre-Writing Skills)

Art Kits
(crayons, paints, etc.)
Bead Mazes
(Back to Basics)
Cash Registers
Clay Playing Box
(Back to Basics,
Leaps & Bounds)
Colorforms (Deluxe
Set @ Back to Basics)
Crunch Art (Highlights,
Learning Express Store)
Dressing Dolls
Elmer's 3-D
Washable Paint Pens
Dot Art
(Learning Express Store)
Felt Story Boards
Duplos/Legos
Lights Alive
Magnetic Sketch
Board (Learning
Express Store)
Make a Plate
(Hearthstone)
Marble Run
(Leaps & Bounds)
Marbleworks
(Discovery Toys)
Playdoh/Silly Putty
Playful Patterns
(Discovery Toys)
Safari Gears
(Discovery Toys)
Sand Art
Scratch Magic
(Learning Express Store)
Squiggle Writer Pen
Stencils & Pencils
(Hearthsong)
Tickle Bee Game
(Hearthsong)
Tote-n-Tiles
(Discovery Toys)

Older Kids: (Drawing & Writing Skills)

Color-in-Tattoos
Draw Thumb Things
(Learning Express Store)
Ed Emberly's Funprint
Drawing Book
Etch-a-Sketch
Fun Pads and
Maze Books
Imaginarium Arts
& Crafts
Lincoln Logs
Lite Brite
Magna Doodle
Maze Mania
(Highlights)
Gearation
Refrigerator Magnets
(Learning Express Store)
Origami (Highlights)
Pictionary Junior/
Pictionary
Roller Typing
(Discovery Toys)
Spirograph
Super Bandabout
(Hearthsong)
Tinker Toys
(Learning Express Store)
Window Art
(Learning Express)

For Sensory Motor Development and Coordination

Provides Organizing Sensory Input:

Air Pogo (Integrations)
Body Sox (Integrations)
Garden Tool Set
(Back to Basics)
Give it a Whirl
(Discovery Toys)
Good Catch
Nubby Ball
(Discovery Toys)
Jumpin' Joy
(Leaps & Bounds)
Jumpolene (Back to
Basics, Leaps & Bounds)
Magic Kubes by Playhut
Marvel the Mustang
Riding Horse
(Back to Basics)
Mini Trampoline
(Back to Basics,
Leaps & Bounds)
Play Tents
(Back to Basics,
Hearthsong)
Punching Bag
(Leaps & Bounds)
Rocking Horse
(Leaps & Bounds)
Rocking Rody Rider
(Integrations)
Sensa Ball Pit
(Integrations)
Sockem Boppin' Knock
Down Man
Spring Horse
(Back to Basics)
Spring Swing
(Back to Basics)
Swing Disc (Highlights)
Tracker Treader
(Back to Basics)
Treadmill- Kid Size
(Back to Basics,
Leaps & Bounds)
Twizler (Highlights)
Tweeter Twirl
(Highlights)
Twirly Whirl Tree Swing
(Learning Express Store)
Whirley Bounce
(Leaps & Bounds)
Whistles and Kazoos
Zipline
(Back to Basics, Highlights)

More Skilled Coordination Needed:

Balance Board
(Back to Basics)
EZ Balance Stilts
(Hearthsong)
Hippity Hop/Hop 66/
Hop-a-Roo
(various stores
& catalogues)
Hopscotch Pad
(Leaps & Bounds)
Jump Ropes
Krazy Kar
(Back to Basics)
Moon Shoes
(Back to Basics, Highlights)
Pedal-Go Fun Wheels
(Hearthsong)
Pogo-Roo
(Leaps & Bounds)
Pogo Stick
(Back to Basics)
Roller Racer/ Flying
Turtle (Back to Basics,
Highlights)
Round Scooter
(Hearthsong)
Sit & Spin
Skip & Go
(Learning Express Store)
Sleds & Snow Tubes
Slip & Slide
Tether Tennis
(Back to Basics,
Hearthsong)
Whirley Wheel
(Back to Basics)

Please call us at: 617 923 4410 for more information.

UPCOMING COURSES and LECTURES

COURSES

January 24 & 25, 2003

**The Spiral Foundation Presents:
From Eyesight to Insight:
Visual/Vestibular
Assessment and Treatment**

Mary Kavar, MS, OTR
Carl Hillier, OD, FCOVD

August 11 -15, 2003

Sensory Integration Intensive
Stacey Szkut, MS, OTR/L and OTA-
Watertown staff

Call Melissa Hunsicker at
617-923-4410, ext. 102 for information

WPS/USC

SENSORY INTEGRATION CERTIFICATION COURSES

February 12-16, 2003

**Course I-The Sensory Integration
Perspective**

April 10-14, 2003

**Course II- Specialized Techniques
for Measuring Sensory Integration**

July 17-21, 2003

**Course III- From Interpretation to
Intervention**

September 18-22, 2003

**Course IV- Sensory Integration
Intervention**

Call Melissa Prejean at WPS
(800) 648-8857 ext.155 or e-mail her at
mprejean@wpspublish.com for
information.

EVENING LECTURES ON SENSORY INTEGRATION

January 29, 2003

Kristen Mawhinney, OTR/L

February 12, 2003

Elizabeth Webber, OTR/L

March 13, 2003

Amanda Marek, MS, OTR/L

April 8, 2003

Julie Robinson, OTR/L

May 14, 2003

Amy Delaney, MS, OTR/L

SPECIAL EVENING LECTURES

January 15, 2003

**Introduction to
Interactive Metronome**

Teresa May-Benson, Ms,OTR/L

February 26, 2003

**The Power of Music:
Therapeutic Listening**

Stacey Szkut, MS, OTR/L

March 26, 2003

**Using Behavioral
Approaches at Home**

Dorothy Sang, MSW and
Marsha Raredon, OTR/L

April 30, 2003

**What is
Cranio/Sacral Therapy?**

Peg Ingolia, MS, OTR/L

May 12, 2003

**Yikes Bikes:Teaching
Bike Riding to All Children**

Chuck Clark, COTA/L

Call Charita Thurston at
617-923-4410 for information

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