

# Talk the Talk

Molly V. Strzelecki

Elvis once sang about wanting “a little less conversation, a little more action, please.” No offense to The King, but sometimes a little more conversation is *exactly* what people need.

“Life is just too busy for people these days,” says Beth Daniels, MSOT, OTR/L. “There is hardly any time for true family togetherness.”

Seeing this lack of quality time within her own family and friends sparked an idea in Daniels to create Around the Table Games, which produces her conversation-starter games Family Talk and Grandparent Talk. Each game comes with a set of questions families can use to start chatter, learning and bonding as the answers come. Questions are varied for the different versions of the game, but all were created with the intent of sparking conversation. For Grandparent Talk, Daniels had a particularly easy time coming up with the questions, because only a couple Christmases before, her own family had passed around a notebook to write down questions for their great-grandmother, and then videotaped her answering them.

“For Grandparent Talk, I watched the video, wrote down the questions, and then came up with an additional 50 or so questions,” Daniels says. “A lot of the motivation for creating this was based on the blessings I had within my own family of being able to have multigenerational conversations throughout life, but it was also knowing what I’ve learned from my clients, about life and keeping the important things in perspective.”

As a former instructor in the Occupational Therapy Department at Washington University in St. Louis, Daniels notes she relied on her occupational therapy experience to help design the questions for the game.

“It was knowing the importance of engaging people in something purposeful,” Daniels says. “In this case, it’s purposeful conversation, which can lead to people feeling more a part of their family.” This feeling, she explains, is the biggest piece of the puzzle. “Everybody in life wants to feel connected, so when you strike up a conversation, even if it’s about something silly, you find commonalities between people.”

Taking the big idea for the game and getting it down on paper was surprisingly easy for Daniels.

“All of my occupational therapy practitioner friends can tell you I’ve been an idea person forever,” she explains, “but I never moved forward on any of them. But this one, one night, just started oozing out of me. I sat at the computer and started writing. It evolved from there: writing questions, doing some research, and looking at other products and games on the market.”

Although the Talk games were primarily invented with the purpose of increasing conversation time within families, they also can be very beneficial for use in occupational therapy practice, Daniels says.

“When you engage someone in conversation, it’s a lot easier to get them to participate in more mundane tasks,” she explains. “For example, if you’re working on endurance tasks, something that people are going to get bored with or tired of doing, you need something to keep their minds off of it. [Using the Talk questions] as starters, we’re making these conversations more purposeful.

“It’s also great for reminiscent therapy,” Daniels continues, “and we’ve had a lot of therapists say they like to use it in groups for children who are learning social and conversation

skills.” Daniels also notes that the Talk games have been helpful in therapy groups for people with Parkinson’s disease who are working on strengthening their voices.

Just as the idea for the Talk games flowed easily, so, too, did the production and distribution of the product.

“It’s been through the power of networking that people have been at the right place at the right time for me,” Daniels says. “I’ve been a huge advocate of networking my entire life, and when I taught at Washington University, that’s what I would preach to the students. Now, working on this project, I’ve been able to call on people I’ve met to fill voids in the production or help with the growth of the product.”

Family Talk games are distributed in various Walgreens, Borders, and boutique shops in the St. Louis area. Daniels says that getting her product in the stores boiled down to simply asking store managers how she could get them to carry it.

“The product has such universal appeal, because everybody needs to spend more time with their family,” Daniels notes. Store managers in her area, she says, were eager to stock it.

Although getting the games into regional stores initially was easy for Daniels, growing and expanding distribution channels is a little more challenging. While she moves forward on getting the game into therapy catalogs and more, she hopes to also develop more versions of the Talk game, like Teen Talk or Couples Talk. And as the games continue to evolve, Daniels hopes that production will, too. She and Shirley Behr, PhD, OTR/L, FAOTA, a faculty member at Washington University, “are in the beginning stages of seeing how we can match the production needs of

my products with the needs of the aging population who lack productive activities during their day.”

“Of all the jobs I’ve ever had, this has been the most rewarding ride I’ve ever been on,” Daniels continues. “My recommendation to people is that if you have an

idea, whether you think you have the time or you don’t, you can still make it happen, it just might be a slower process. Just take that first step, and things will start rolling. If you’re passionate about it, just run with it.”

And to think, it can all start with just a little talking.

To order your own copy of *Family Talk or Grandparent Talk*, visit [www.aroundthetablegames.com](http://www.aroundthetablegames.com), or call 314-374-4878. ■

Molly V. Strzelecki is the associate editor of *OT Practice*.

## PRACTICE PERKS

### Guidance for Positive Outcomes for Students Receiving OT Services in the Schools

Barbara E. Chandler  
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**Q:** I have just started practicing in the schools. How can I use the *Occupational Therapy Practice Framework: Domain and Process (Framework)*<sup>1</sup> to achieve a positive outcome for a student, related to the occupations of school?

**A:** Occupational therapy practitioners practicing in schools work under many laws, primarily the Individuals with Disabilities Education Act (IDEA),<sup>2</sup> but also No Child Left Behind,<sup>3</sup> state education and special education laws, state licensure laws, and others. Most occupational therapy interventions are provided as a related service to specially designed instruction as defined on the student’s individualized education program (IEP), which is developed and implemented by a team of personnel after an evaluation process. The IEP is analogous to an interven-

tion plan, although it does not have that level of specificity. It does, however, as required by IDEA, have student goals (both academic and behavioral). The purpose of services under IDEA is to provide a student with a disability “an equal educational opportunity” to participate in the general education curriculum. Occupational therapy’s overarching outcome is “engagement in occupation to support participation” (p. 618).<sup>1</sup> Although worded slightly differently, these outcomes are congruous.

Because desired outcomes are related to the expected level of performance (participation in the general education curriculum) and are stated as incremental goals early in the intervention process, it is important to keep the desired student outcomes in mind throughout intervention.

The Framework suggests considering the types (general categories) of outcomes when working with clients (students) in their context (school). To illustrate, Shawn is a student with Asperger’s syndrome. One IEP goal is: “By the second semester, Shawn will participate daily in regular physical education class.” The outcome categories, focus, interventions, and outcomes are highly interactive

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and may be addressed and occur within the same time frame (see below).

Outcome: The student is able to participate in the occupations of school, specifically PE class. ■

### References

1. American Occupational Therapy Association. (2002). Occupational therapy practice framework: Domain and process. *American Journal of Occupational Therapy*, 56, 609–639.
2. Individuals with Disabilities Improvement Act of 2004. Pub. L. 108-446.
3. No Child Left Behind Act of 2001. Pub. L. 107-110.

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Outcome Category	(Focus of) IEP Goal	Intervention	Outcome
Occupational Performance	Participate in regular physical education (PE) class in high school	Increase ability to recognize sequence in tasks and sequence tasks	Participate in group game in PE
Student Satisfaction	Move from adaptive PE to regular PE class	Written reflection of playing in group game	Sees self as part of the “group”
Role Competence	Less restrictive role	Assist Shawn in identifying actions he must do to move to regular class	Participation in regular education curriculum
Adaptation	Appropriate affect in group situations	Simulate various situations and assist Shawn in developing different responses	Able to change own actions in response to events (basketball thrown to him—passes on or shoots)
Health/Wellness	Develop healthy habits for life	Role play of group activity with fading of supports	Increased physical activity
Prevention	Increase social interactions	Role play social situations with increased number of persons	Able to interact with group of peers (not socially isolated)
Quality of Life	Able to converse with others, especially peers	Foster increased frequency of appropriate responses in groups	Looks forward to going to PE (doesn’t resist activity)