



# Your Therapy Source News

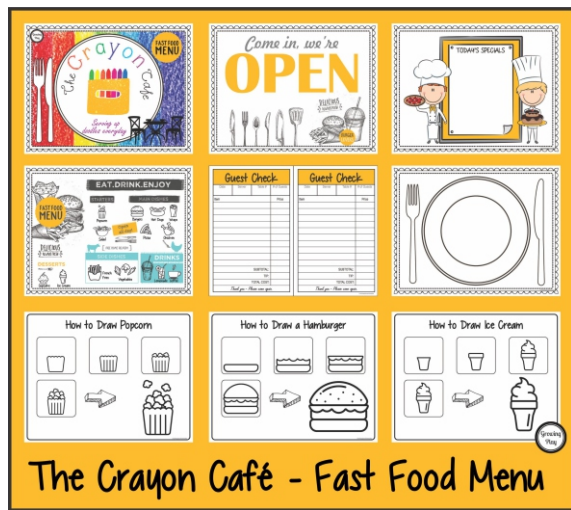
**Digital magazine for pediatric  
occupational and physical therapists.**

**[www.YourTherapySource.com](http://www.YourTherapySource.com)**



**March 2016  
Issue 81**

# New and Sale Products



## The Crayon Café - Fast Food Menu

By: Your Therapy Source Inc

Summary: The Crayon Cafe - Fast Food Menu is a creative way to open up your very own doodle cafe. This digital download includes three blank place mats, fast food menu, guest check, open sign, today's special board and 12 how to draw pages for all the items on the menu.

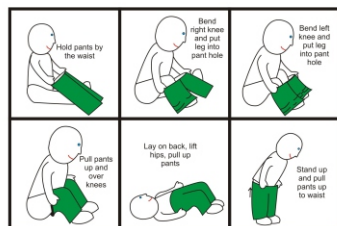
Price: \$5.00

Sale Price: \$1.99 until 3/31/16

**FIND OUT MORE AT**  
<http://yourtherapysource.com/gpcrayoncafe.html>

## **Dressing Skills**

Step By Step Visual  
Directions to Teach  
Children How To Dress



Your Therapy Source Inc

## Dressing Skills

By: Your Therapy Source Inc

Summary: Step By Step Visual Directions to Teach Children How to Dress

Price: \$4.99

Sale Price: \$2.99 until 3/31/16

**FIND OUT MORE AT**  
<http://yourtherapysource.com/dressing.html>

# Using Mobile Technology to Calm Children?

## Using Mobile Technology to Calm Children?



*JAMA Pediatrics* has published research on a survey given to English or Spanish speaking parents of 144 healthy children ages 15-36 months. The survey questions inquired about the likelihood of allowing smartphone or tablet use by children during different situations, such as calming them down, keeping them quiet, while eating, in public, to get chores done, or at bedtime. Additional survey questions evaluated parental perceived control about their child's development, social relationships, and behavior. The results indicated the following:

1. children with social-emotional difficulties had a higher prevalence of being given mobile technology as a calming tool when they were upset and to keep peace and quiet in the house
2. there were no differences in the use of mobile technology during other situations such as eating, being in public, doing chores, or at bedtime.
3. associations were stronger among parents with low vs high perceived control for calming down and for keeping peace and quiet in the house.

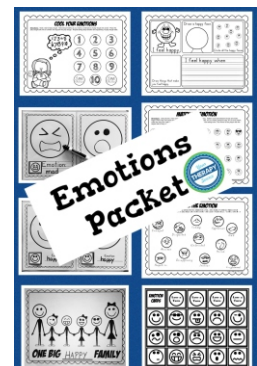
The researchers recommended longitudinal studies to understand the transactional relationship between the use of digital technology and the developmental trajectories of children.

As therapists, we can perhaps educate parents on various tools to help young children to calm down that do not include technology. Not only will this provide parents with different strategies it may help young children to develop improved self regulation skills.

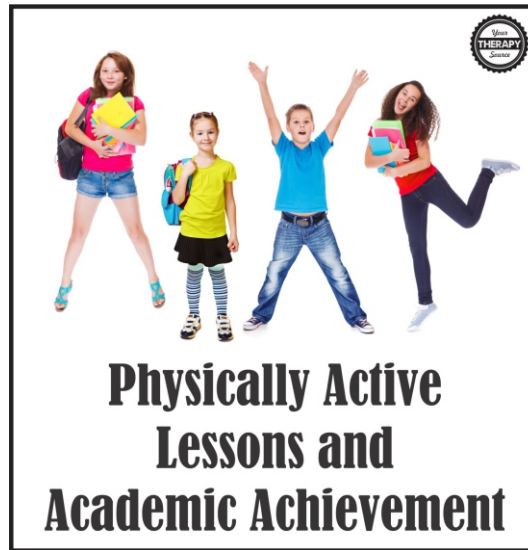
Reference: Jenny S. Radesky, MD et al. Use of Mobile Technology to Calm Upset Children Associations With Social-Emotional Development. *JAMA Pediatrics*. Published online February 29, 2016. doi:10.1001/jamapediatrics.2015.4260.

**Emotions Packet:** Practice fine motor skills, visual motor skills and more with 5 activities and 10 worksheets that explore emotions.

FIND OUT MORE at <http://www.yourtherapysource.com/emotions.html>



# Physically Active Lessons and Academic Achievement



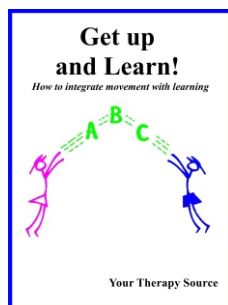
*Pediatrics* published research on the effects of a physically active academic intervention on the academic achievement of children. The 499 second and third graders who participated were randomly assigned to the intervention group (physically active lessons for 2 years, 22 weeks per year, 3 times a week) or the control group (regular classroom lessons). Each student was evaluated for academic achievement before the study and after each year. The assessments included 2 mathematics tests (speed and general math skills) and 2 language tests (reading and spelling).

The results indicated the following:

1. children in the intervention group had significantly greater gains in mathematics speed test, general mathematics, and spelling scores.
2. no changes were seen in reading scores.

The authors concluded that “physically active lessons significantly improved mathematics and spelling performance of elementary school children and are therefore a promising new way of teaching.”

Reference: Marijke J. Mullender-Wijnsma, Esther Hartman, Johannes W. de Greeff, Simone Doolaard, Roel J. Bosker, Chris Visscher. Physically Active Math and Language Lessons Improve Academic Achievement: A Cluster Randomized Controlled Trial. *Pediatrics*, Mar 2016



**Get Up and Learn – How to Integrate Movement with Learning**: electronic book that includes over 35 activities to help combine movement with learning. Find out more information here

<http://www.yourtherapysource.com/getuplearn.html>

# Flat Feet and Joint Problems in Children



*Gait & Posture* published research on whether flexible flat feet (FF) results in the development of musculoskeletal symptoms at joints proximal to the ankle. Using an observational study, data was collected on 95 children between the ages of 8-15 including foot posture using the arch height index (AHI), frequency of knee and hip/back pain and three dimensional gait analysis.

The results indicated the following:

1. reduced arch height was associated with increased odds of knee symptoms and hip/back symptoms.
2. a flat foot posture was also significantly associated with a reduction in the second peak of the vertical ground reaction force which in turn affected late stance hip and knee moments.
3. a reduced AHI was also associated with increased pelvic retraction and increased knee valgus in midstance.
4. no kinematic and kinetic parameter associated with a flat foot posture related to increased proximal joint symptoms in the FF group.

The researchers concluded that children with a flatter foot posture are more likely to have pain or discomfort at the knee, hip and back; however, the reasons for this are unclear.

Read more about flat feet over at the DinoPT blog: <http://blog.dinopt.com/flat-feet-you-say/>

Reference: Kothari et al. Are flexible flat feet associated with proximal joint problems in children? *Gait & Posture*. In press February 2016. DOI: <http://dx.doi.org/10.1016/j.gaitpost.2016.02.008>

Need activities to strengthen and stretch the muscles in children? Check out all these **[yoga activities for children](http://yourtherapysource.com/yoga.html)** at <http://yourtherapysource.com/yoga.html>

# 5 Tips for Students Who Fidget



If you walk into any classroom, you will most likely observe students who fidget. Perhaps they rock back and forth in the chair, bounce their knees up and down or wiggle in their seats. Frequently, students fidget to stay in an alert state to be ready to learn. Here are 5 tips to help students who fidget:

- Just let the student fidget! – Some research indicates that higher rates of activity level result in significantly better working memory. If the student is not bothering anyone and it is not impeding their function or educational abilities just let the student fidget. Maybe provide the student with a stability ball or disc cushion.
- Move the student's seat – If a student continues to fidget and perhaps is distracting others, can you move his/her seat to a location where it will be less obtrusive. Perhaps in the back of the classroom so the student can stand.
- Provide an object to fidget with the student's hands or feet. – Maybe the student can rub a small rock to keep his/her fingers busy. Allow the student to doodle – doodling while writing has been shown to improve memory recall. Tie some theraband around the legs of the desk or chair and the student can fidget his/her feet against the band.
- Let the student chew gum, drink through a straw or crunch on a snack. – This may help with focus, attention span and even math skills.
- Help students get the wiggles out! – Provide frequent movement breaks throughout the day. Research indicates that kids learn better and stay on task after breaks.

Need simple ideas that are easy to implement? Check out all these **brain break ideas** at <http://www.yourtherapysource.com/brainbreaks.html>.



# Comparing Motor Impairments Autism versus ADHD

The *Journal of Autism and Developmental Disorders* published research to examine the evidence regarding motor impairment specificity in autism spectrum disorder (ASD) and attention deficit/hyperactivity disorder (ADHD). It is difficult to determine if there is evidence for specificity of motor impairment within different clinical groups. For example, are certain motor impairments associated with specific diagnoses? Previous research indicates the following:

- Seventy nine percent of children with ASD demonstrated movement impairments in comparison to only 36 % of children with ADHD.
- Children with Asperger's syndrome have been shown to demonstrate greater impairments in throwing and catching.
- Children with developmental coordination disorder (DCD) demonstrate greater impairments in balance and dexterity.
- Children with ASD showed deficits in: catching a ball, balance, manual dexterity and visual motor feedback.
- Children with ADHD have a more general impairment in basic motor abilities.
- Children with ASD exhibit great motor impairment than children with ADHD.

This recent study compared motor impairments in 200 children, ages 8-13 years old (56 with ASD, 63 with ADHD and 61 typical developing-TD). Each child was evaluated with the Movement Assessment Battery for Children: Second Edition (MABC-2). The following results were recorded:

- all three MABC subscale scores (Manual Dexterity, Aiming and Catching, and Balance) were significantly negatively associated with having a developmental disability.
- when comparing children with ADHD and children with ASD, the Aiming and Catching and Balance subscale scores were significantly associated with having ASD as the primary diagnosis.
- children in the ASD group demonstrated greater overall motor impairment compared to children with ADHD.
- deficits in tasks involving visual feedback and static balance are most aligned with having an ASD.
- performance on manual dexterity tasks appeared more strongly related to ADHD.

The researchers concluded that “impairments in motor skills requiring the coupling of visual and temporal feedback to guide and adjust movement appear specifically deficient in ASD.”

Reference: Ament K, Mejia A, Buhlman R, Erklin S, Caffo B, Mostofsky S, Wodka E. Evidence for specificity of motor impairments in catching and balance in children with autism. *J Autism Dev Disord*. 2015 Mar;45(3):742-51. doi: 10.1007/s10803-014-2229-0.

Need help **teaching children how to throw, catch and kick?**

FIND OUT MORE AT

<http://yourtherapysource.com/teachcatchthrowkick.html>



# Will My Child with Cerebral Palsy Walk?



If you are a pediatric physical therapist who works with young children you have most likely been asked by parents “will my child with cerebral palsy walk?” Many times the response is based on evaluation results, clinical experience and research. Here is some recent research from *Physical Therapy* to consider when you are asked this question.

The recent study included 80 children with cerebral palsy (GMFCS levels II and III) ages 2-6 years. Postural control, reciprocal lower limb movement, functional strength, motivation and family support were all measured 7 months to one year prior to attainment of walking.

The results indicated the following:

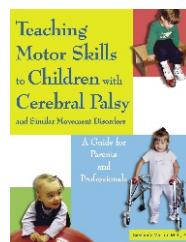
- a measure of functional strength and dynamic postural control in a sit-to-stand activity was the only significant predictor of taking  $\geq 3$  steps independently.
- the positive likelihood ratio for predicting a “walker” was 3.26, and the negative likelihood ratio was 0.74.
- the model correctly identified a walker or “nonwalker” 75% of the time.

The researchers concluded that the ability to transfer from sitting to standing and from standing to sitting predicted independent walking in young children with CP. Additional studies were recommended to establish indicators of when children with CP are ready for independent walking.

Reference: Denise M. Begnoche, Lisa A. Chiarello, Robert J. Palisano, Edward J. Gracely, Sarah Westcott McCoy, and Margo N. Orlin. Predictors of Independent Walking in Young Children With Cerebral Palsy. *PHYS THER* February 2016 96:183-192; published ahead of print June 18, 2015, doi:10.2522/ptj.20140315

## **Teaching Motor Skills to Children with Cerebral Palsy and Similar Movement Disorders – A Guide for Parents and Professionals.**

Find out more  
<http://yourtherapysource.com/CPmotorskills.html>





# Effective Frequency for Motor Skill Groups

As pediatric therapists, we often recommend how many sessions of therapy to provide. Here is a small but relevant study regarding the effectiveness of two group programs on visual-motor integration, motor proficiency, gross-motor skills, and parental perception of motor difficulties in children with developmental coordination disorder (DCD). Children with DCD were divided into two frequency groups who either received 10 one hour sessions – once/week for 10 weeks (6 children with DCD ages 7-12) or 24 one hour sessions – twice/week for 12 weeks (8 children with DCD ages 7-12). All of the children were evaluated before and after each program with the MABC-2, DCD-Q, BOT-2, Beery-VMI-6, and the TGMD-2 assessments. The motor skill groups focused on activities that required collaboration while performing skills that utilized upper-body coordination, balance, and fine-motor abilities.



The results indicated the following:

the 24-session (60 minute sessions 2x/week for 12 weeks) intervention program revealed significant improvements in the Manual Coordination and Total Score of the BOT-2, and parents reported significantly higher scores for all categories of the DCD-Q. no significant changes were observed after the 10-session once/week intervention program. The researchers concluded that 24 one-hour sessions- twice a week for 12 weeks group intervention program can be an effective intervention method for improvement of motor skills in children with DCD.

Reference: Caçola PM, Ibane M, Romero M, Chuang J. The Effectiveness of a Group Motor Skill Intervention Program in Children with Developmental Coordination Disorder: Program Frequency Matters.. The Internet Journal of Allied Health Sciences and Practice. 2016 Jan 01;14(1), Article 4.

**25  
Instant  
Sensory  
Motor Group  
Activities:**  
for School Based Occupational  
and Physical Therapists

Your Therapy Source

Get **25 instant sensory motor activity ideas** for your group occupational or physical therapy sessions. The ideas require absolutely NO equipment, just a little imagination and fun. These activities allow you to get your group therapy sessions off to an immediate, productive start taking full advantage of your students' desire to move. FIND OUT MORE at <http://yourtherapysource.com/instant.html>

# Unique “Treasure” Boxes to Practice Fine Motor Skills



Check out these 6 unique “treasure” boxes to encourage fine motor skill development.

Read about it here

<http://yourtherapysource.com/blog1/2016/02/24/unique-treasure-chests-to-practice-fine-motor-skills/>

# Gross Motor Skills and Toilet Training

## Gross Motor Skills and Toilet Training



During 2016, I will be participating in a series written by occupational and physical therapy bloggers on developing 12 functional skills for children. Each month we will discuss the development of one functional skill in children addressing the many components of that skill. The functional skill in February was toilet training.

Read the post here

<http://yourtherapysource.com/blog1/2016/02/21/3642/>

# Coordination, Visual Tracking, Timing and More!



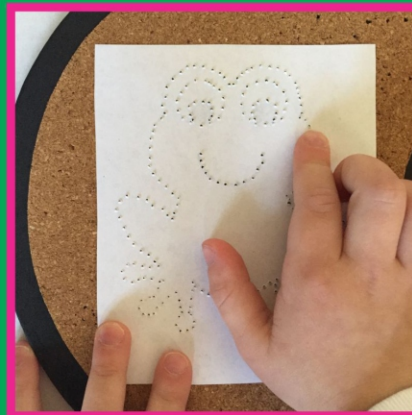
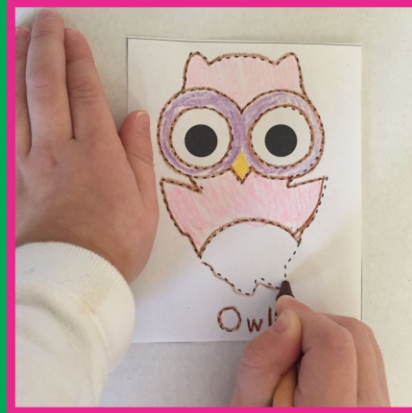
This fun activity encourages bilateral coordination, timing, eye hand coordination, visual tracking skills and upper extremity muscle strengthening. The key to this activity is teaching the child to hit each balloon or ball with the right hand and left in a rhythmic, controlled pattern.

View the video here

<http://yourtherapysource.com/blog1/2016/02/22/coordination-visual-tracking-timing-and-more/>

# Tracing or Picture Poke Cards

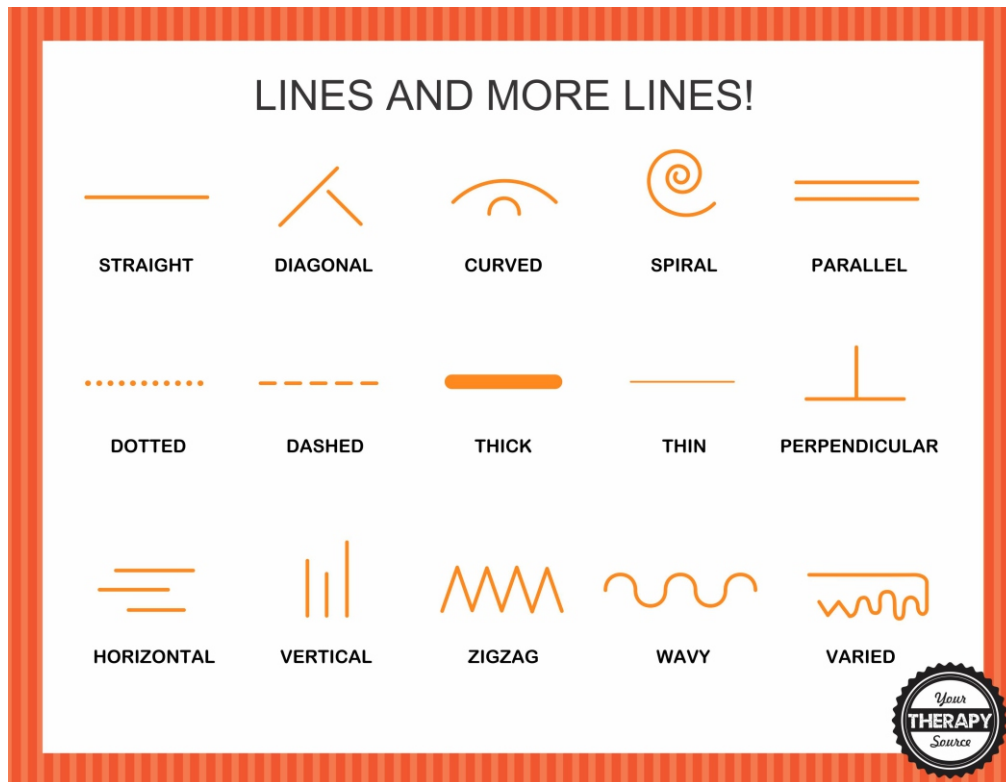
## FREE Tracing or Picture Poke Cards



Check out these adorable tracing or picture poke cards to practice visual motor skills and finger strengthening. You can download over at YourTherapySource or here <http://yourtherapysource.com/freetracepoke.html>

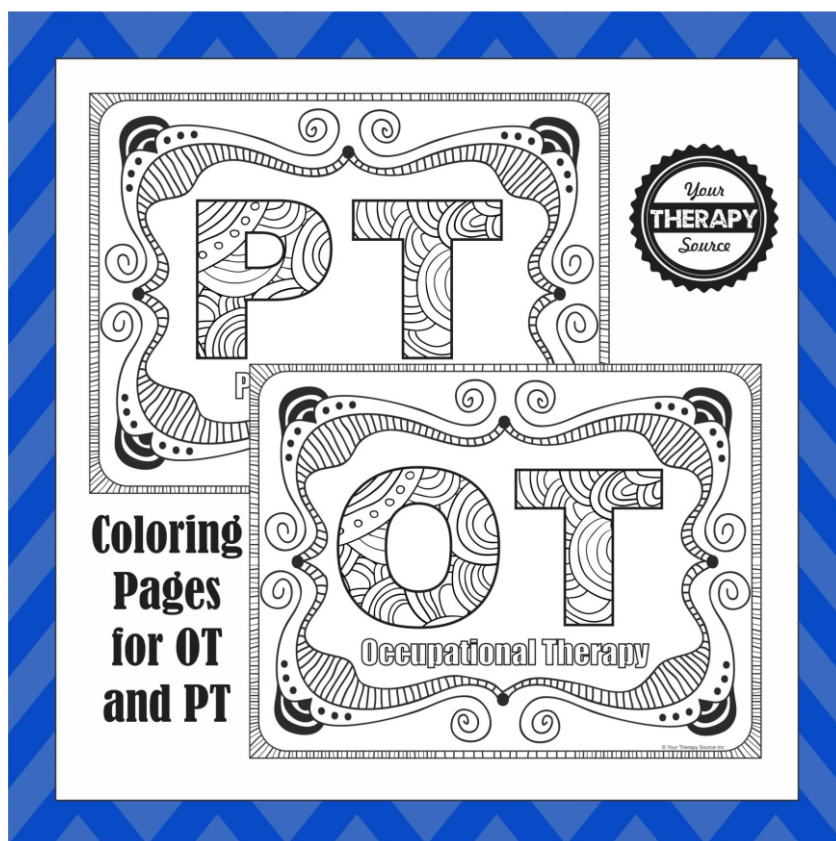


# Drawing Lines



Here is a freebie to provide some visual cues for students to draw different lines. You can download it at YourTherapySource or <http://yourtherapysource.com/freedrawlines.html>

# OT, PT and SLP Coloring Pages



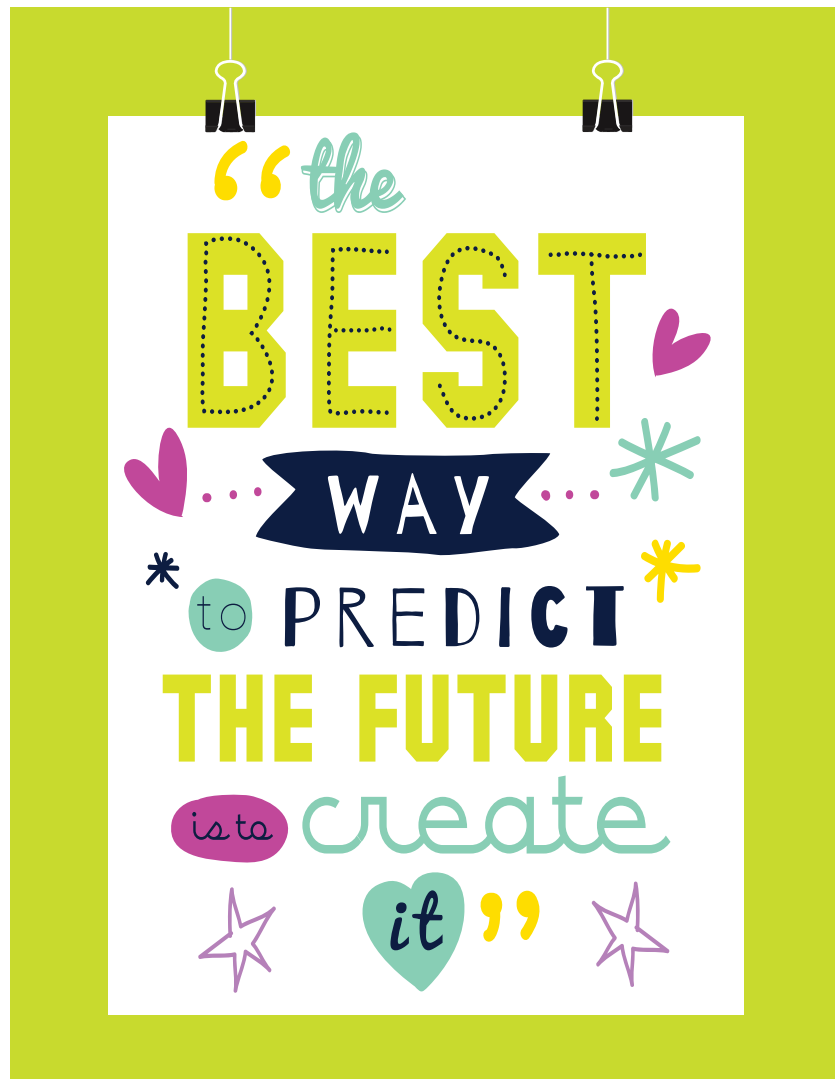
With intricate coloring sheets being super popular right now, I thought I would create a few for occupational and physical therapy. Simple but cute! Here are three things to do with your coloring sheets:

- Color and decorate the therapy room.
- Have a coloring contest and award a small prize to the winner. Tell everyone not to write their names on the front and let the students be the judges.
- Make a puzzle. Color in the picture and glue it onto lightweight cardboard (ie cereal box). Cut it apart and ask the children to put it back together again.

After receiving a request on Facebook, I created an SLP coloring page too! You can download the OT, SLP and PT coloring pages at Your Therapy Source here <http://yourtherapysource.com/freeotptcoloringpages.html>

Want more coloring pages? Check out these Animal Coloring Pages <http://www.growingplay.com/coloringanimal>. Download the free penguin page.

# Motivational Poster



Part of our job as pediatric therapists, teachers and parents is to encourage children to succeed. Whether it be a small accomplishment, a big dream or a lofty goal children need our support and help through motivating words. This is especially true during therapy sessions when children are faced with many challenges. You can print this motivational poster "The Best Way To Predict the Future is to Create It" here  
<http://yourtherapysource.com/postersmotivationalfreebie.html>.

Check out the complete download of Motivational Posters and Cards here  
<http://yourtherapysource.com/postersmotivational.html>.

# Your Therapy Source Inc.

[www.YourTherapySource.com](http://www.YourTherapySource.com)



**Visit  
[www.YourTherapySource.com](http://www.YourTherapySource.com)**

**for a full list of our products including:**

- **documentation forms**
- **sensory motor activity ideas**
- **sensory processing resources**
- **visual perceptual activities**
- **music downloads**

**We ship digital items worldwide for FREE!**

**Visit our website for FREE hand-outs, articles, free newsletter, recent pediatric research and more!**

**[www.YourTherapySource.com](http://www.YourTherapySource.com)**