The Interoception Curriculum & Interoception Activity Cards

Adaptations for Telehealth



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Tip 1: Prepare for the lesson. Prior to delivering the lesson, read through the activities, especially the Focus Area Experiments and consider the materials that will be needed. A few ideas:

- 1. *If there is a caregiver available:* ask the caregiver to gather the materials prior to the start of the tele-session. Most are household items (e.g., lotion, small ball to squeeze, ice cubes, containers of warm/cool water, etc.).
- 2. If there is NOT a caregiver available: Chose the Focus Area Experiments that can be done without materials. You can also adapt the experiments that do require materials by thinking of a different way to evoke a similar sensation in the body part of focus (e.g., rather than squeezing a stress ball, squeeze the edge of the learner's chair or table; rather than holding a hand warmer, rub the hands back and forth for 10 seconds).
- 3. Unique materials: There are a few Focus Area Experiments that require unique materials or something that many people don't have around the house (e.g., hand warmers or PopRocks). For these experiments, think of a different way to evoke a similar sensation in the body part of focus (e.g., rather than holding hand warmers, hold a warm mug of tea; rather than eating PopRocks, sip sparkling/fizzy water). If it is not possible to find a replacement, simply skip that experiment.
- 4. *Use the Interoception Activity Cards as a supplement.* If you are stuck for ideas on material-free Focus Area Experiments, refer to the Interoception Activity Cards which provide 170 additional Focus Area Experiments.



Tip 2: Involve the caregiver, if possible: If there is a caregiver willing and able to participate in the session, they can serve as your 'hands' on the other side of the screen and assist you in keeping the learners engaged in the activities. Plus, by involving the caregiver you will be transferring the skills needed to practice building Interoceptive Awareness (IA) outside of the session. However, if there is not a caregiver available, there are ideas listed below on how to proceed.

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Tip 3: Consider how to incorporate visual supports during the lesson. Visual supports are an important part of the curriculum. A few ideas:

- 1. *If there is a caregiver available:* ask the caregiver to print the Descriptor Menu and Focus Area Experiment worksheet prior to the session.
- 2. *Project the visuals on your screen using a screen sharing option.* Consider how you will project the visuals on the screen during the session (especially the Descriptor Menu!!).

Visual Support Example 1: Below is an example of how you can project the Focus Area Experiments and Descriptor Menu side by side in a Microsoft Word document. Before the session, insert text boxes in the response areas to make it easy to record the learner's answers as you move through the lesson. The learner can see their answers as the therapist types them on the screen.



Visual Support Example 2: Below is an example of how to project a Descriptor Menu on a Microsoft PowerPoint slide. This version can be useful for many learners, including for learners that do not speak to communicate. They can point to the response projected on one of the corners of the screen and using the camera, the therapist can see which corner of the screen the learner points to.



Descriptor Menu for Lesson 1, reduced to 4 choices for an early learner. Learner may point to the response and using the camera, the therapist can see which corner the learner pointed to.

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Visual Support Example 3: Below is an example of how to project Focus Area Experiments on a Microsoft PowerPoint slide. This version is interactive and fun. The first slide contains the desired number of experiments, pre-selected by the therapist. The learner chooses the experiment they wish to do first by pointing or saying the number aloud. The therapist clicks on the learner's selection and the slide links to another that reveals the activity side of the card. Once the activity on the card is completed, the therapist clicks on the home icon in the bottom right corner of the slide which is linked back to the first slide. Note: This PPT format can be used for completing Interoception Activity Cards as well.

To make this interactive activity: Insert a graphic for the number of cards wished to be included. Right/double click on each card graphic and link it to a slide containing the activity side of the card by using the insert-action-slide # option. On each slide containing the activity side of the card, insert a link to the home slide by using the insert-shape-home icon and hyperlinking it to the home slide. For details on how to create a non-linear PowerPoint see here: https://www.pitt.edu/~poole/Office2010Tutorials/2010Lesson10.pdf







Slide containing an activity side of a card. Once the activity is completed, the therapist clicks on home icon in the bottom right corner which links back to the first slide.

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Visual Support Example 4: Below is an example of how to project a Body Check Chart on a Microsoft PowerPoint slide. Create the slide using the Blank Body Outline provided in Lesson 1, and screen shots of the Descriptor Menus included in each lesson. Before the session, insert text boxes near each body part to make it easy to record the learner's answers as you move through a Body Check. As the therapist guides the learner in doing a Body Check, refer the learner to the Descriptor Menus as needed and type the learner's response in each text box.



A Body Check Chart created on a Microsoft PowerPoint Slide so that it can be projected during a telesession via screen-sharing and completed with the learner.

Tip 4: Increase predictability. At the start of the tele-session, present a visual schedule, providing an overview of the lesson steps. This will help to increase predictability, especially given how new this situation may be for a lot of learners. Also, the schedule will allow the learner to have a clear end of the session. Although the learner may be having fun, it is still a lot of work for many learners to follow instructions, interact socially, regulate attention, etc. Knowing how long their persistence is required can often decrease anxiety. At the end of the tele-session briefly preview the plan for next time so the learner knows what to expect. (e.g., 'next week we will do fun activities to learn more about how your nose can feel.')



Example of a schedule made on a PowerPoint slide so that it can be projected during a tele-session via screen sharing. Notice how the schedule is vague enough that it will be applicable to each tele-session, making the process even more predictable. Note: this schedule was made for a learner that loved vacuum cleaners.

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Tip 5: Consider methods of positive practice in between your tele-session. To improve IA, practice noticing and connecting body signals during daily activity is essential. In collaboration with the caregiver if possible, decide on the best method of positive practice. Be sure to find a match for where the learner (and caregiver) are at right now. Putting too much of an expectation can go against the goal of enhanced regulation. For more on this see Tip 6 below. A few practice ideas:

Practice idea 1: IA on the Fly. Provide the caregiver with a copy of the IA on the Fly that corresponds with the lesson completed during the tele-session. Talking the interoception talk during existing routines can be highly beneficial and relatively easy to accomplish.

Practice idea 2: Focus Area Experiments. Encourage the caregiver to find naturally occurring Focus Area Experiments in which to use IA on the Fly Prompts (see the bottom of the IA on the Fly form for ideas and/or refer to the Interoception-Activity List which can be downloaded for free here: <u>https://www.kelly-mahler.com/resources/printables/</u>.) For an added bonus, the caregiver may redo the Focus Area Experiments completed during the tele-session giving the learner extra practice.

Practice idea 3: Body Checks. If more practice is desired, encourage the learner to complete Body Checks with their caregiver 1-2 times per day. The Body Check Chart may need to be adapted in order for it to be accessible during this time (e.g., a laminated chart may not be realistic). A Body Check Chart can be created and completed on paper or on a wipe-off board. Always be sure that the learner has access to the Descriptor Menus when completing a Body Check.



Example of a Body Check Chart made on a wipe-off board. Notice the Descriptor Menus are provided next to the board for easy access. When completing a Body Check, the learner (or learner's caregiver) writes the descriptor word that matches the way each body part feels directly on the board.

Tip 6: Regulation, self-care and realistic expectations is a must. During this difficult time, it is important to be mindful of regulation needs, including our own! Many learners, caregivers and therapists are dysregulated and we might need to focus on putting co-regulation supports into place in order to help the learner (and caregiver) be available for learning. If needed, set very small tele-session goals and celebrate each milestone. If a learner completes even 5 minutes of a tele-session, that might be a major accomplishment for where that learner (or caregiver) is currently functioning. Most of all have fun and enjoy the connection that the Interoception Curriculum can bring during a tele-session.

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