

**Lauren Clouser:**

Welcome to the LDA podcast, a series by the Learning Disabilities Association of America. Our podcast is dedicated to exploring topics of interest to educators, individuals with learning disabilities, parents, and professionals to work towards our goal of creating a more equitable world. Hi, everyone. Welcome to the LDA podcast. I'm here today with Sydney Krueger, a pediatric occupational therapist for an outpatient clinic in Texas. So Sydney, thank you so much for being here with us.

**Sydney Krueger:**

Hi. Thank you so much for having me.

**Lauren Clouser:**

So we're so excited to talk about all of the great things that an occupational therapist can do and how that can help somebody with learning disabilities, ADHD, mental health issues. But to start off, Sydney, would you be able to tell us a little bit about your background and your experience?

**Sydney Krueger:**

Sure. I am a recent graduate. I graduated in 2023 with my master's of occupational therapy, from the University of Saint Augustine, the Austin, Texas campus. I am now working, like you said, Lauren, in the pediatric occupational therapy clinic setting. I do have experience in acute care and home health with ECI, school, and a little bit of hippotherapy.

**Lauren Clouser:**

That's great. So to start us off too, if somebody listening doesn't know, what is an occupational therapist?

**Sydney Krueger:**

Yes. So I looked up the definition of American Occupational Therapy Association, and it says occupational therapy intervention uses everyday life activities, your occupations, to promote health, well-being, and your ability to participate in the important activities in your life. So this is actually kind of a hard question because OT, we do so much, and it looks different with each setting that you're in. But we take a holistic approach to increasing independence with all tasks, whether that be like, dressing, bathing, toileting. In pediatric cases, it's fine motor, visual motor, those kinds of things. So it's a very broad job, which is why I love it.

**Lauren Clouser:**

Yeah. Definitely. Well, and to expand on that broadness too, what are the different types of diagnoses that an occupational therapist can work with? I know there's a wide range.

**Sydney Krueger:**

Yes. Anything and everything. In pediatrics, specifically, we do a lot of autism. I think 90% of our caseload is normally kids on the spectrum. Lots of ADHD clients, fine motor deficits. We do spinal cord injuries and traumatic brain injuries, any sensory processing, a lot of executive

functioning, Down syndrome, dyslexia, dyspraxia, any cognitive difficulties, feeding. The list just goes on and on.

**Lauren Clouser:**

Well, that's great. And, you know, it really sounds like you just get a wide variety of work each day, which sounds great.

**Sydney Krueger:**

Yeah. We do. You never know what you're gonna get every day.

**Lauren Clouser:**

So what can a day in the life of an OT look like? I know it can vary widely. I'm sure.

**Sydney Krueger:**

Yes. For sure. It does. I'll talk about where I'm at now currently in the outpatient setting. So this is like appointment type based. So kids will come in, they'll have the same appointment at the same time, same day every week. And in my case, they're seen anywhere from 30 minutes to an hour sessions. And so typically we see anywhere from like 8 to 16 patients a day depending on how many clients you have scheduled, which is kinda crazy, but we do work long hours too.

And like I said, every patient you see is different. The sessions themselves kind of depends on what a kid can tolerate, and what their specific needs are. So sometimes, I'll go from, like, a very behavioral kid all the way to like an easy kind of fine motor kid, all the way to a feeding session. So each one kind of varies. But you just see these kids, you know, until they graduate or until we decide to stop with services. So like I said, every day is different, and that's what I love about my career.

**Lauren Clouser:**

Absolutely. Well, and it sounds like a really tailored approach too for the people that you're helping.

**Sydney Krueger:**

Yes. Yeah.

**Lauren Clouser:**

So what are some of the practices and strategies that you use a lot, in your day to day?

**Sydney Krueger:**

Mhmm. A lot. Like I said, it just kind of depends on the kid and what their specific needs are. I think really important strategies to implement in all your sessions are whole body movement tasks, and that's whenever you are involving the whole body into the activity to focus on one little thing. Like, for example, we do jumping jacks while spelling or obstacle courses while you're writing or doing a puzzle. So you're involving the whole body and not just little fine motor

things because kids tend to learn better whenever they're moving their body and interacting with their environment. I do a lot of obstacle courses, like I said, probably 5 to 6 a day. Always have kids on swings, a lot of sensory things.

I do love the sessions with some of the nonverbal kids, like, no talking sessions. I'll just go in and just sometimes I won't even say a word to them. We'll just point and gesture and interact and kind of get down, like, on their language level. I actually made a list of my top five favorite toys. If those are the only toys that I could have, these would be the ones. It'd be bubbles. Kids go crazy for bubbles. You know, those little plastic foods that you have to cut with a plastic knife?

That one's one of my favorites. I use that probably every single day. An ABC puzzle, something simple like that. Just your generic markers and paper, you can't go wrong, and then Play Doh. You can target so much with Play Doh.

**Lauren Clouser:**

And that's awesome. This isn't any sort of high-tech equipment. This is really some basic stuff, which is awesome.

**Sydney Krueger:**

Yes. Something that you probably already have in your home too.

**Lauren Clouser:**

Yeah. That's great.

**Sydney Krueger:**

Yeah.

**Lauren Clouser:**

Well and then what do you think the parents should know about an occupational therapist? If they're maybe considering getting them extra support for their child and they're looking at an OT, what are some things that you'd like them to know?

**Sydney Krueger:**

Yeah. This is a good question because I feel like OTs are not very widely talked about. A lot of people don't know what an occupational therapist does, and we were talking about a very broad spectrum, so there's just a lot. But your OT should be one of your biggest advocates for you and your child. They should help bridge the gap between the doctors or the doctors or the teachers or any other specialists that you have. We're here to assist you guys in every and any way because, you know, a kid's main occupation is play in school. And so that's kind of what we're mainly there for, to help kids get through those difficult times. I know school can be challenging for a lot of kiddos.

We will help to create sensory diets if needed, and establish routines. We work on potty training and sleep routines in the home. There's a lot that we do. So I think if you are curious about OT in any way, definitely talk to your pediatrician, and they'll be able to guide you more on the right path.

**Lauren Clouser:**

Yeah. That's fantastic. So can a child receive occupational therapy services in outpatient and school?

**Sydney Krueger:**

Yes. That's another good question. And a lot of parents don't know this, but if you do have OT services in the school, you can also get referred out into OT. Insurance does allow that and vice versa. And I think it's important to get both. You know, if a kid's getting one in school, they should also get outpatient because each niche is different. You know? School OTs don't always focus on the same thing as outpatient OTs. OTs in schools look a little bit different.

Your child has to have an IEP for them to qualify for OT services, and they have to be in the special education realm. So if your child either has an IEP or is in special education, then they qualify for OT services. And that's something that you can talk to, your adviser about or your IEP team to see if OT is needed in the school as well.

**Lauren Clouser:**

That's a really good point differentiating between an educational occupational therapist in the school and somebody who works more at a clinic like you do. So I think that's a great point to make just for parents who are considering services and to know what the support options they have are.

**Sydney Krueger:**

Yeah. For sure. And it's hard in outpatient because we only see the kids, you know, in 30 minute sessions, like twice a week. But in schools, they're in school a lot more for a longer time. And so I feel like a school therapist will also really be able to help them.

**Lauren Clouser:**

And at the time of this recording, we just wrapped up mental health awareness month in May, because of the large connection between learning disabilities and mental illness. So I was wondering if how can an OT support students with LD and emotional or mental health struggles because that is something that's so common.

**Sydney Krueger:**

Yeah. For sure. A lot of our kiddos have comorbidities of learning disabilities or some mental health struggles. I think one of the most important things to understand is that the child shouldn't fit into the play or the activity or the school task, that it should be the opposite where the task should fit the child. For example, if a child is having a hard time sitting in the chair to do a

worksheet, you don't force the child to keep sitting and keep working on that worksheet. You change the environment to suit the needs of the child, whether that's having them sit on a wiggle seat or giving them a little sensory break or working while standing up. I think that's really important. Also, just allowing the kids, if they just need a break, just to step outside the classroom.

You know? Just take a breather outside or to use the restroom or something, because it's a lot to be a kid and to sit in the classroom for that long. Like, you expect a lot out of these kids, and we have to remember they're kids. They need that break. So that's where your OT can come in and help implement those different strategies that they need. And then I think a lot of times, kids with learning disabilities or mental health get in trouble for not doing their work. And I think it's important to know that if a kid's struggling to do their work, there's normally a reason behind it, whether it's that they're bored, they want attention, they don't want to participate, or it's just too hard for them. There's always a reason why they are doing what they're doing or not doing what they're doing, and so it's important for the OT and the teachers and the parents to come together and figure out why the child is struggling. And in the OT realm, we call that a zoom in and out approach.

So we take a deeper look into the child specifically. So we zoom in and figure out what it is, and then we zoom out and figure out how we can best help them.

**Lauren Clouser:**

That's great. I really like that terminology.

**Sydney Krueger:**

Mhmm.

**Lauren Clouser:**

When we talked about this a little bit too, but how can parents work to complement the work of an OT at home, what are some strategies that you like to recommend for parents to bring home to help, support their students further at home?

**Sydney Krueger:**

Yeah. So I definitely talked about it a little bit earlier, but, I think incorporating a sensory diet is super important, and that's something that you can talk to your OT about specifically if you have one, whether that be, like, bringing a swing in the home or just doing some big exercises before sitting down and doing homework, things like that. It's also been proven that white noise can help children with ADHD to sit down and kind of focus more. So if your child is struggling with attention, putting on some music in the background or some white noise will help. Like I said, modification of the home environment, use of visual schedules and reward charts, I think, are also really important. That way that child has something to reference to. And I love doing this in my sessions too for kiddos that have a hard time following a schedule is actually write out the schedule and have check boxes next to them. So then the kid can go and check off each box on

their own so that they feel confident and feel like they're actually making progress and they can see that.

So I think that's a great idea to establish in the home too. Just continue to increase confidence with your kids. You know, sometimes it's hard being a kid, and trying to struggle through all the emotions and the changes and everything. So just keep encouraging your kid to be independent with tasks, including housework, like, doing laundry and helping cook and that kind of stuff, I think, is good for all kids to kinda give them a break from the school stuff and give them more responsibility so they feel better about themselves.

**Lauren Clouser:**

Well and I just wanted to ask too, what you mentioned earlier. Could you tell us what a sensory diet is?

**Sydney Krueger:**

Yes. So sorry. Yeah. A sensory diet is called a diet because it's things that your body needs, that your body is hungry for. And so a diet, a sensory diet will help feed your body with things that it needs to get to that ready to learn state. And a lot of times for kiddos, they don't receive the necessary sensory input that they receive in the classroom, because they're just sitting there all day and they're not using their whole body to learn. And so, since your diet can include things like I was saying, doing jumping jacks, if we're sitting down or swinging or just running, you have a ton of sensations. You have the 5 sensations that we all learned in kindergarten, the taste, touch, smell, hear, and see, but there's actually a couple more sensations.

So I won't get into all the science of it, but there's the vestibular, the kinesthetic, and the proprioception. And incorporating those into the diet as well is really helpful, like, obstacle courses, and things like that. So a sensory diet, yes, is important to do before you work and after you work to kind of help cool down the body as well. Does that answer your question?

**Lauren Clouser:**

Okay. Absolutely. Yeah. I wasn't sure what that was. So thanks for clarifying that. A really good part of the holistic approach, definitely.

**Sydney Krueger:**

Yes. Yeah. Very child led. You know? And it's a lot of trial and error too because we never know what's going to work for a kid. And one sensory diet for one child doesn't work for the next one, so it's very tailored to the child themselves.

**Lauren Clouser:**

Yeah. That's really true. Well, and then before we wrap up, Sydney, is there anything that I didn't ask about occupational therapy or just a related topic that you would want to add more about?

**Sydney Krueger:**

Sure. I was gonna say, and I meant to say this earlier, but to get a referral for OT, for outpatient OT specifically, you have to talk to your pediatrician or a neurologist or a specialist, and they have to refer out to an OT to schedule an eval. So your occupational therapist is not allowed to diagnose your child. We receive those diagnoses from the pediatrician. Now there's things that we can see in sessions, and we can kind of hint to parents like, hey. You should probably look into this or, hey. You should ask your pediatrician about this, but we're not allowed to specifically diagnose your child. And so definitely talk to your pediatrician if you have any concerns regarding your child's learning abilities.

**Lauren Clouser:**

So glad you added that because that's a really important distinction, especially for parents who are looking for services. So thank you for that. Yes.

**Sydney Krueger:**

Yeah. Of course.

**Lauren Clouser:**

Well, Sydney, thank you so much for being on the show. We've all learned a lot today about occupational therapy and how it can impact individuals with learning disabilities and related disorders. So thank you so much for sharing your expertise.

**Sydney Krueger:**

Yeah. Of course. Thank you for having me. I love talking about this topic.

**Lauren Clouser:**

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