

ACTIVITY WRITE-UP

Name of Activity: Video Games

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Type of modality	Video Games
Type of play	Solitary
Interaction pattern	Extra-individual, Aggregate, Inter-individual
# of participants required	Limitless due to live internet game play, but at least one participant and one facilitator.
Equipment/supplies	Television, Computer Screen or Tablet (visual equipment) <i>Bravemind</i> therapy video game Game console or internet based gaming server. Remote controls, keyboards, joy sticks, other forms of tactile stimuli that controls player actions.
Facilities required/environment	Seating arrangement that promotes comfort during game play Quiet room in which to conduct activity
Precautions	Game play needs to be guided and time needs to be limited. To be effective, VR needs structure and purposeful therapeutic intentions to be effective

Directions

1. Facilitator instructs individual to be seated in front to screen in a comfortable sitting position
2. Facilitator distributes controller to participant
3. Facilitator powers up gaming counsel, computer/television etc. screen, and controllers
4. Facilitator instructs participant of game play scenarios
5. Facilitator begins game
6. Once all equipment is powered up and adjusted properly (if necessary) facilitator exits room
7. Participant play through the scenario
8. Once activity is complete, facilitator enters room and collects gaming equipment
9. Facilitator guides participant in debrief session that hi-light stressors and aspects of emotional trauma.
10. Participants and facilitator end session by addressing what is to be addressed for the follow up session.

Activity Analysis

Category	Skills
Primary body position	Sitting, standing, laying down
Part of the body required	Hands, neck, head, arms, fingers

Movement	Grasp and Manipulate controls, picking up/putting down objects, and reaching.
Physical	Balance: dynamic sitting, balance: sitting still, bilateral integration, crossing midline, fine muscle coordination, gross muscle coordination, motor control, active range of motion: upper extremities, speed, and visual-motor integration
Cognitive	Arousal/alertness, attention: focused, attention: sharing attention, attention: sustaining, calculation, categorization, cognitive flexibility, concept formation, concentration, decision making: complex and simple, initiation, insight, intellectual knowledge, judgement, long and short term memory, orientation to person, place, time and topographical location, organizing and planning, simple and complex problem solving, reading, recognition to numbers, sizes, and shapes/forms, sequencing, spatial operations, spelling, strategy, abstract and concrete thought, time management and writing
Social	Heterogeneity, homogeneity, interpersonal interactions, maintaining social space, relating to equals, relating to persons of authority, relating with subordinates, regulating behavior, self-expression, social conduct, social cues, showing respect and warmth and showing tolerance
Perception	Auditory, tactile, visual and olfactory
Communication/language	Receptive to spoken, written, and body language, expression of spoken language, reception and production of signs and symbols
Self-care	N/A
Psychological/emotional (possible)	Joy, guilt, pain, anger, fear, and frustration

How to Simplify the Activity:

Utilize compact personal computers that allow activity to be performed anywhere at any time. Also, establish live link with facilitator when activity is done in private.

How to Make the Activity More Complex:

Further develop in scenarios that are more real world. Draw out more emotion, push the exposure aspect of the therapy.

Other Comments:

Video games as a modality have been on the rise in recent years. Millennials are more comfortable with technology than they are doctors. Many do not trust traditional psychiatrists and their practices. The image of laying back on a couch is not appealing to most. Opening up to a computer interface has been conditioned into individuals due to the social media boom. I believe that many would be more honest and likely able to benefit from therapy. Also the stigma of being seen by a doctor for mental health reduces the amount of participants seeking services. I believe that many would prefer being able to utilize video games for therapy. The idea of gaming is much “cooler” than having to go see a doctor. Also, due to advances in technology patients could potentially hand carry their own form of

therapy on a portable device. One could down load an “app” to their phone/tablet which would increase the autonomy of this activity as a form of therapy.