

**Board Games as Brief Interventions**  
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**Summary of research findings**

A review of the literature on brief interventions reveals they have primarily been studied in behavioral health settings and typically focus on helping people struggling with alcohol or tobacco use disorders (Kaner EF et al., 2009; McQueen, Howe, Allan, Mains, & Hardy, 2011; Moyer, Finney, C., & Vergun, 2002). Meta-analyses of brief interventions have demonstrated positive treatment effects from brief interventions when compared to nontreatment groups (Ballesteros, Duffy, Querejeta, Ariño, & González-Pinto, 2004; Wilk, Jensen, & Havighurst, 1997).

Despite evidence showing the beneficial effects of brief interventions, a definition has been relatively difficult to find since 'brief' is itself a subjective term (Heather, 1989). However, SAMHSA-HRSA (2017) established brief interventions as lasting from 5 minutes of brief advice to 15-30 minutes of brief counseling. Additionally, brief interventions are typically characterized by their attempts to incorporate the efforts of frontline or non-specialist staff and their targeting of large numbers of clients, typically beyond those reached by normal treatment approaches (Heather, 1989). It is worth noting that brief interventions are not the same thing as time-limited interventions. While the former focuses on the duration of a single session the latter typically refers to a treatment program consisting of multiple treatment sessions. More specifically brief interventions aim to motivate the patient to change a particular behavior or perform a particular skill, while time-limited interventions are used to address larger matters such as maintaining abstinence (Center for Substance Abuse Treatment, 2012).

While formal games received little attention during the early development of play therapy they have since gained recognition and classification based on the skills used to play (Beiser, 1979). There are games of physical skill, games of cognitive skill, and games of chance of which the latter typically encompasses board games (Beiser, 1979). However, since Beiser's (1979) work there have been significant advancements in our understanding, and the design, of board games and their utility in therapy.

General benefits of boards games

In terms of activities that might be suitable for recreation therapists (RTs) to use for brief interventions, board games offer many benefits. The first benefit is their size and portability, which allow the RT to easily move between therapy spaces and settings with ease. Additionally, board games can be an inexpensive piece of equipment with many games priced under \$20 and available from a range of retailers. Beyond simple practicality, board games have been shown to provide an effective means of promoting social and emotional learning among children that they can carry with them into adulthood (Hromek & Roffey, 2009). Further, board games are easily adaptable and can be set up to meet a variety of intervention needs. Indeed, in a nursing-focused study, board games were found to help learners internalize information and promote affective learning (Lewis, Saydak, Mierzwa, & Robinson, 1989).

Board games in therapy

While board games offer many general benefits, they have also found use within a range of therapeutic settings. Sometimes the games being used are specifically designed to meet the needs of a target population. Streng (2009) reported the findings from a study of the efficacy of a Lifegames intervention used with children and adolescents. The focus of these six therapeutic board games was on adversity created by grief, family problems, bullying, chronic illness, obesity, and poor relationships. The use of these games was found to encourage the learning and retention of new behaviors related to resilience (Streng, 2009).

Another study examined the development and effects of a specialized board game for individuals with schizophrenia. This game focused on behavioral and cognitive issues and the negative symptoms characteristic of the target population. This intervention found that game participants showed significant improvement in social withdrawal, interpersonal functioning, recreational activities, and work (Torres, Mendez, Merino, & Moran, 2002).

In older adults, the study of board games and game-based learning is being conducted to see if there are psychosocial benefits (Charlier & Ott, Michela, Remmele, Bernard and Whitton, 2012) indeed a 2013 study by Dartigues

et al. found possible beneficial effects of board games on dementia due to reduced cognitive decline and lower rates of depression in elderly game players. Such findings suggest that board games offer benefits well beyond childhood.

Finally, there has also been work done on the use of board games to help individuals with tobacco use disorders to decrease and cease use. The use of tobacco cessation oriented board game found to increase smoking cessation rate at the three months follow up (Khazaal et al., 2013). This final example of games' use in therapy provides a line of reasoning back to the use of games as a brief intervention.

### Implications for Recreation Therapy Practice

Board games offer a range of benefits and are easily adapted to meet the needs of a range of populations and participant groups. While it is important to note that many traditional games can be modified to meet specific needs of patients (Swank, 2008) it should also be noted that there are many new games available that offer various playing styles including cooperative games. Within this new landscape of board game design, it is worth noting that there may be different benefits derived from games based on the players and their demographics. For example, in general, board game players were more likely to appreciate games that allowed them to fantasize and gain uncommon experiences. However, while surprise elements were more popular with male players, female players appreciated the rhythm of the game itself (D'Astous & Gagnon, 2007). Ultimately, selecting appropriate board games is a matter of effective activity analysis and experimentation, but the benefits of this work could be significant even if the intervention itself is brief.

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