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Letter from the publisher

Having a child under ideal circumstances (is there anyone who does?) paints a picture that is rosy, easy and carefree; where everyone loves each other all the time, no one ever quarrels or bickers, no one is ever cranky, bossy, or in a bad mood; there is all the money, time and patience one needs, and perfection is a daily given.



These are the kinds of tales and scenarios that were prevalent on 1950s TV family sitcoms, but they are not the stuff of "real life," as we all know so well.

We get pregnant and we are overwhelmed with joy at the anticipation and the expectation of a fully healthy and perfect new baby arriving for us to raise and take joy in. We wait for perfections that seldom manifest and it's a rare couple who are prepared for the fantasy to crumble and the arrival or development of a challenged child.

Being a parent of a Special Needs Child is daunting at the least and heroic at the best. It is scary, disappointing, and demanding. It is not, however, necessarily isolating and does not need to be without support, guidance, or community. There is much help, assistance and directional expertise throughout the New York area, and this magazine attempts, through twice-yearly printing and in our online version, to address positive approaches and to tackle the questions parents may be asking.

Experts throughout the metro area, and even beyond, have, and continue to be, generous contributors of valuable information to help make parenting a Special Child easier and clearer.

These magazines and their content come straight from our hearts and we publish them because there is a need and a demand for information. We are all parents here and we are all also someone's child. We are woven into the fabric of the family experience and our core motivation is to help and inform.

Three and a half years ago, my colleague Sharon Noble and I began this journey that has turned out to be an education for all of us. Being in contact with the devoted people providing services, help and tutorial assistance for children who need special care and attention has been a real eye opener. We have spoken to extraordinary people and have gotten to know the stories of many of our readers.

We are grateful to all of you and hope to have more feedback and more input for those of you who are interested. Please contact us and tell us your stories. Personal essays are appreciated. Have a great summer and thanks for reading!

Susan Weiss

Susan Weiss-Voskidis, Publisher
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5 myths about fitness & autism

BY ERIC CHESSEN, MS, YCS

Regular exercise should be a part of every educational and therapeutic curriculum for youngsters on the autism spectrum, but vigorous physical play is often missing from their daily routine. The hurdles on the way to that goal have to do with the current, myth-riddled state of physical education, fitness, and physical culture in the U.S.

Here, I dispel some of the myths preventing our children with autism from achieving the physical fitness they deserve.

Autism fitness myth 1: Children “naturally” know how to move

A neurotypical toddler can perform a perfect squat — feet planted firmly on the ground, head aligned with the spine, knees slightly out, and torso at about a 45-degree angle. Five years later, the child has difficulty squatting and rounds the back to pick up an object. This may be an indication of some weaknesses in the major muscle groups, lack of trunk stability, and a few other less-than-desirable physical issues.

Is this movement deficit supposed to happen? Or is there another problem?

Movement — including strength, agility, balance, coordination, speed, and endurance — is a set of skills that must be continuously taught and reinforced as a child grows.

Research shows a high incidence of movement deficits (poor ability to utilize and control muscular systems) in young people on the autism spectrum. It may be evident in gait patterns (walking, navigating stairs), poor posture, or trunk stability. Sedentary lifestyle patterns (lots of sitting with little variety in physical activities and a lack of vigorous physical exercise) can exacerbate the movement issues in both neurotypical and autism populations.

Years ago, when children actually spent time on playgrounds, demonstrating the

magical power to fall, have it hurt a little, and get back up, movement skills were honed through random and energetic play. Jumping, hopping, skipping, climbing, pushing, pulling, throwing, and all variations and combinations of these patterns ensured further development of both the muscular and central nervous system.

Physical play skills require development through teaching and practice. My method is based on “structured teaching to develop skills for randomness.” Children may

Movement — including strength, agility, balance, coordination, speed, and endurance — is a set of skills that must be continuously taught as a child grows.

explore, but there is a point where new abilities need to be initiated through instruction.

Autism fitness myth 2: Fitness and sports are the same thing

Fitness is general, and can be applied to many different areas and situations in life, from daily tasks to athletic endeavors. Sports are highly specified and the skill sets within them do not generalize or “cross over” much to other activities. Most of the athletes in my Autism Fitness program do not play a sport, nor do they want to.

Have you ever watched a little league baseball game? The kids stand in the field, then get up at bat three or four times, sit on the bench, and maybe throw the ball five

times (and that’s if they are in the infield). Then the adults tell them how much exercise they got.

Individual sports (martial arts, yoga, fencing) are fine, but realize that these, too, are highly specific endeavors. Think of sports (individual or team) as branches on a tree. The roots and trunk of the tree are made up of general fitness and physical activity. Sports do not provide general ability, even at the highest levels. If you don’t believe me, my friend Carlo — the strength and conditioning coach for two Major League Baseball teams — will tell you how imbalanced (at least from a physical perspective) most single sport athletes are. Sports are not bad, but they do not meet all the physical needs of a child or adult.

Autism fitness myth 3: Kids with autism don’t want to be active

We generally do not enjoy things that we are not good at. Consider how many variations of physical fitness young individuals on the spectrum typically have access to — maybe sports, access to a treadmill (I applaud their escape-maintained behavior on this one), or a machine-based, weight-training program (boring, and offers great opportunities for injury and compensatory movement pattern development).

Many young people with autism have an aversion, or gravitate away, from vigorous physical activity because:

- They resist new activities and task demands that are out of routine,
- Motor deficits can make many of these activities difficult, especially when taught improperly,
- Movement has never been introduced in a way that is fun or meets the needs of the individual,
- Exercise programs have not been paired with reinforcement, including behavior-specific praise or secondary reinforcers (music, access to preferred activities).

Any of the above could be factors. My

athletes find exercise fun and reinforcing, because they are presented with new and dynamic options for regular fitness activity.

Autism fitness myth 4: Some kids just can't learn to exercise

Breaking any skill down to smaller increments helps the learner to master each step. Similar to math, science, reading, or any other cognitively based skill set, movement requires planning and appropriate implementation. I've had athletes learn a push-up through breaking the exercise down into eight discrete steps. While mastering each step, the athlete is also growing stronger and more confident.

Most often, the environment is not conducive to the athlete succeeding and this is why the athlete "fails."

In Autism Fitness, we do all sorts of animal movements, swing giant ropes, throw big medicine balls, and slam Sand-Bells. It is new and exciting for many of my athletes, while a few take more time to find it reinforcing. The key is addressing the major movement patterns (pushing, pulling, bending, rotation, and locomotion) and finding a way to teach it while having fun.

Often, behavioral and cognitive issues have to be addressed with individual athletes. I've started fitness programs for children that include a 10-second "exercise" period, followed by 10 minutes of reinforcing activity. Over time, as tolerance for the new exercise activities increase, we can engage in fitness longer and more regularly.

Saying "Some kids can't exercise" is on par with saying, "Some kids just deserve a higher likelihood of cancer and Type II diabetes."

Autism fitness myth 5: An exercise program needs to be highly structured with costly equipment

The play aspect of fitness is something that we are desperately missing, both in youth and adult fitness. There really should not be much difference (other than volume and intensity) between kid and adult fitness. With my athletes on the spectrum, we're performing the same movement patterns that



I would include in my own training/play sessions.

Many physical education and fitness programs are far too rigid without accomplishing the most critical goals: getting young individuals to move well and enjoy doing it. Teaching in a structured manner is important for developing the pre-requisite and basic movement skills, but movement exploration and discovery is the ultimate goal.

Expensive machines and video game system "fitness" programs are the antithesis of what actual fitness should be. Standing on a board and watching a video is recreational at best, no matter what the box tells you. It is not true, skill-building fitness, and it does not do much to promote strength, confidence, self-esteem, or socialization. Machines, such as treadmills or ellipticals, are simply expensive coat racks.

The vast majority of equipment I use is inexpensive, can fit in the trunk of a car, and provides much more fitness benefit than any system sold on TV. My short list includes: Hyperwear Sandbells, swinging ropes, medicine balls, cones, and small hurdles.

...

Major media is citing an "obesity epidemic" for the nation's youth — special needs populations included. The obesity issue is a symptom of a greater problem, namely inactivity and sedentary lifestyles combined with poor nutrition.

While the reactive approach means dealing with the possibility of certain types of cancer, Type II diabetes, postural distortions, inhibited cognitive function, and lower self-esteem, the proactive approach — physical fitness — opens the gateway towards new abilities, confidence, and long-term health. Which slide would you go down?

Eric Chessen, MS, is the founder of Autism Fitness. An exercise physiologist with extensive training in ABA and Best Practices for education, Chessen works with his athletes, consults, and provides workshops around the U.S. and internationally. More information is available at www.Autism-Fitness.com.

Improving school for disabled kids

Overturning the Rowley ruling, the Kryptonite of special education

BY MARILYN SCATTOREGGIO

With the release of “Waiting for Superman,” a documentary film that attempts to give answers to a very complex problem, everyone is talking about education and what we, as a nation, need to do to raise the standards so that our children can compete in the 21st century. But these discussions leave out a very important demographic of children and the education problem they face.

For all the talk about raising national standards for education, we keep forgetting that there are more than 6.5 million kids with disabilities who receive services based on a federal law, known as the Individuals with Disabilities Education Act. This law entitles all students with disabilities to receive a free appropriate public education — which means an individualized education program designed to meet the student’s needs.

The problem lies in the case of *Board of Education v. Rowley* — which the United States Supreme Court passed in 1982. In *Rowley*, it was determined that the Act only guarantees a “basic floor of opportunity,” meaning that public schools only need to provide disabled students with an education that allows them to make “some progress.”

The individualized program need not be the best one, nor one that will maximize the child’s educational potential corresponding with the opportunity offered to non-disabled students — rather, it need only



be a program that the child will somehow benefit from.

What this means, in practice, is that all this talk about excellence in education does not apply to disabled students.

Every parent knows that a fourth-grade reading level will not translate into academic success at the college level. But when parents of disabled students question the education their children receive in public schools, the schools usually cite *Rowley*.

“We don’t have to give you the best education — your child only has to make ‘some progress,’” is a familiar refrain to any parent of a disabled child who seeks to address a lack of significant progress — whether in reading, writing, math, critical thinking, or life skills.

And advocates and attorneys who work in the trenches have seen the impact of this low standard. We have seen schools — even in high wealth areas — graduating students who cannot adequately read, write or do basic math calculations. We have seen schools place many students on a non-diploma “individualized education program track” that, too often, does not give children the useful instruction they need to lead productive and independent lives.

We have also seen the passageway between schools and the criminal justice system grow so large that it is almost as if there is a pipeline to juvenile detention, as schools increasingly use the courts to circumvent their responsibility to identify and provide an education to students with disabilities.

It is time we did better for all children. We need to discover strengths in every child and nurture them, even if it means

redesigning the curriculum to accommodate the unique abilities and talents of each and every child. We need to teach all children how to think, question, and be creative to the best of their abilities.

We, as a country, need to ensure that all children are entitled to excellence in their education. It is time for Congress to amend the Individuals with Disabilities Education Act and say “goodbye” to *Rowley*. Equal opportunity is a bedrock principle in the United States. Upon this principle rests the hopes and dreams of all of our children.

While the average child in this country is “Waiting for Superman” to save her education, we must remember that more than 6.5 million students with disabilities are also waiting for us to do something. Unless we change the standard — now — our children will still be left in the basement while we talk about educational excellence for everyone else.

Marilyn Scattoreggio has been an education advocate for more than 20 years. She works as the supervisor of education advocacy at the Long Island Advocacy Center, Inc., in Suffolk County. This essay is her personal opinion and not that of her employer.

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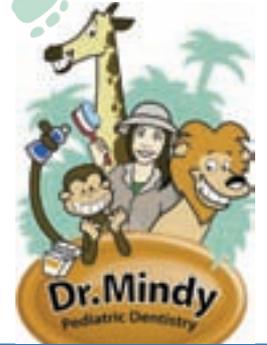
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Routine lesson

How activity routines can benefit the autistic

BY MARK GOLUBOW

Teaching individuals with learning disabilities such as autism is not any different than teaching any other person. Although teaching those with autism may challenge a teacher or parent to be more patient and creative, these individuals have unique characteristics and are often very intelligent. But for various neurological and environmental reasons, expressing, receiving, and interpreting information is difficult for those with autism.

Autistic individuals have the capacity and desire to excel in many aspects of their lives, but if there is difficulty processing everyday information effectively or appropriately, this can lead to weak social communicative skills, which can leave them feeling isolated, anxious, and low in confidence inside and outside of the classroom.

The limitations in social communicative skills and associated feelings commonly seen with individuals on the spectrum are particularly significant when put into the following context: Because of improved methods of testing, one out of every 100 people is diagnosed with autism. As a result, early childhood intervention is now a key step in managing autism and educating a new generation of parents and the public about the growing concern and social responsibility for this special needs population.

Constrained communication

However, the current focus on early childhood intervention has come at the expense of scant research and fully understanding the lives of adults with autism. Over the next decade, 500,000 to 1.5 million adults with autism will be leaving their respective public school systems across the country at age 22, and entering the real world.

When you couple this startling statistic with most public school systems not effectively incorporating social and communi-



cation skills instruction into special education classes, how will the majority of individuals with autism have future relational and/or professional success in life?

Specifically, individuals with autism typically show limited social and communication skills regarding joint attention and understanding the meaning of social interactions. It is difficult for autistic individuals to grasp the subjective “big picture” of everyday social interactions. Instead, most communication efforts are seen as a direct, imitated, and structured use of language within an explicit context, such as when requesting (“I want green ball”) or rejecting (“I don’t want milk”) something, or linked to desired or undesired items and reward-punishment types of consequences.

Consequently, clear, straightforward, situational cues or rules govern communication for autistic people. It is also because of these constrained communication rules that the absence of more flexible and cog-

nitive social communication skills is not, as typically believed, an unwillingness to share information with others, but a difficulty in understanding or extracting deeper meaning of information from daily conversations and social interactions.

As a result of being unable to appreciate the finer details of social interactions, those with autism often develop a rigid style of social communication. Repetitive, scripted language and preoccupation with a narrow range of topics typify conversations and social interactions for them. The complexity (i.e., taking the perspective of another person), and adjustments (i.e., appropriate turn-taking) of a conversation and social interaction, constantly challenges the person with autism. Showing limited awareness in understanding the views of another person and speaker-listener roles, often results in the inability to maintain long conversations or deal effectively with interpersonal and group

communication breakdowns or misunderstandings.

If we combine the lack of verbal skills with the limited understanding of reading nonverbal communication cues of another person — such as facial expressions, body posture, and rate, pitch, and tone — often witnessed with individuals with autism, the task for a parent (or instructor) teaching multiple meanings behind everyday social communicative interactions becomes daunting.

Daunting, for sure, but not impossible.

About activity routines

Parents can use a number of fundamental methods to promote social and communicative skills for their autistic children. Before instruction begins, however, consider and appreciate that although the average person finds autistic behavior puzzling, the individual with autism views typical behavior with equal puzzlement. Thus, instruction, or what I call, “empathic learning strategies,” should target the unique personality, interests, and cognitive and social abilities of your loved ones.

One effective empathic learning strategy that parents can develop is activity routines.

Activity routines are adult-modeled life

As a result of being unable to appreciate the finer details of social interactions, those with autism often develop a rigid style of social communication

situations of predictable and appropriate conversational scripts for autistic individuals. If one of the core challenges facing an individual on the spectrum is to understand what other people are saying, doing, and feeling, using activity routines can help assign meaning to various social and communication behaviors used within daily interactions.

When creating activity routines, you may wish to think of yourself as a director in a play, and you are instructing your lead actor on what to say, do, and feel in each of the scenes.

The primary goal of directing activity routines is to have the autistic child understand an appropriate life script and apply it to naturally-occurring social interactions he

is familiar with in order to keep motivation high. For instance, an adult with autism may want to know how to ask a person out on a date or how to count exact change when paying for an item in a store. In turn, a young child with autism may want to know what it is like to get a first haircut or how to talk to a teacher in class.

As your activity routines evolve, repetition of appropriate physical and linguistic behavior is important, but also dependent on the complexity of the social situation, its communicative purpose, and the cognitive abilities of the child. Once the child can effectively participate in an established, predictable interaction, expansion and flexibility to change can be slowly introduced.

Emphasis on social and communicative skill instruction is vital for the present and future lives of thousands of autistic individuals. Effective instruction of social and communication skills can also lead people on the spectrum into stronger relational bonds socially and professionally, as well as develop a more independent and self-assured sense of self.

Mark Golubow has an MA in special education and interpersonal communication, and will receive an advanced degree in autism from Brooklyn College in June 2011. For more information, visit www.aspecialeducator.net.

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Interrogating your lawyer

Important questions to ask when hiring a special education attorney

BY BRADLEY L. GERSTMAN, ESQ

Parents of children with special needs are sometimes faced with the difficult task of hiring an attorney to challenge a school district's assessment of their child's academic abilities and, ultimately, to obtain the educational services that are being denied. This can be a frustrating and emotional time for parents, but if you have clear guidelines for choosing the best attorney for your situation, the process will be much easier.

To ensure that you have covered the most important points, both practical and personal, ask the following questions when making your decision:

- What is the level of the attorney's expertise in education law and, specifically, special education law?

Beyond the appropriate accreditation and licensing, it is critical for your attorney to have extensive experience in special education law. This area of the law is extremely specialized, and a good lawyer should be completely versed in federal and state laws and regulations regarding children with disabilities and your child's rights. Since the law changes frequently, your attorney must be aware of all current court decisions.

- Are you comfortable discussing the details of your child's situation with the attorney?

The attorney you choose to represent your child must understand your situation and inspire confidence. The most effective special education attorneys are usually people who have been affected personally by a child with special needs — their own child or a child who is close to them. Comfort level can be difficult to measure, but it is one of the most important factors to consider when choosing an advocate for your child.



- Does the attorney understand how school districts work and does he have experience working with educators and school administrators?

A thorough understanding of how school districts operate, who the key decision-makers are, and the factors that go into providing or denying services is crucial for a special education attorney. A good attorney will understand the evaluation process, how an Independent Education Program is created, and the effectiveness of the most commonly recommended educational options, such as collaborative classrooms and pull-out programs.

- Does the attorney work with leading

outside education experts who will help with your case?

To validate your position, a good attorney will usually call on the expertise of outside educational experts who will strengthen your case with sound professional opinions. An independent medical, psychological, or educational assessment by a well-credentialed professional can be very influential in convincing school administrators that a child's needs are not being met.

- What are the costs for retaining a special education attorney?

Be sure you understand how the attorney expects to be compensated. Costs will vary depending on the complexity and time frame of the case. You will be asked to sign an agreement, which should include a fee structure and detailed description of the attorney's services. You will either be charged an hourly rate or a flat fee, and you will be charged for the initial consultation, which can be either over the phone or in person. Keep in mind that school districts are required to pay your legal costs if you win your case. Discuss this with the attorney and find out if you should pursue this option.

- Does the attorney work with support staff?

It is best to work with an attorney who employs legal assistants or paralegals who will do research and paperwork that does not have to be done by an attorney. This will streamline the process and make it more cost-efficient. If your attorney has to attend to every detail, it will be reflected in your bill and the process will be unnecessarily extended.

•••

Selecting a special education attorney to advocate for a child is an important decision. The attorney you choose should be someone who is experienced in both education law and dealing with school districts, understands the needs of children with disabilities, and is someone you trust. The basic guidelines outlined here will help you make the right choice.

Bradley L. Gerstman is a co-founding partner of Gotham Government Relations and the law firm of Gerstman Schwartz in Roslyn, NY. In his role as attorney, Gerstman focuses on special education legal issues.

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Smart thinking

How to help your child cultivate a winning attitude

BY MICHELE RANARD, M, ED

A few years back, my first-grader stepped off the school bus in tears. The words he squeaked out between sobs cut me to the soul. He said, "My teacher hates my reading 'cause I'm stupid."

It was the start of the school year, and he had been placed in remedial reading — a group of five students, pulled from the classroom for specialized instruction with a reading specialist. When I asked around, it seemed my son was the only student struggling with self-image over the placement. So why do certain children fall apart when faced with negative evaluation, while others seem to roll with the punches?

A fixed mind-set

Part of the answer may be due to what Stanford psychology professor Carol Dweck refers to as a fixed mind-set. Due to the interaction of genetics and environment, some children react with more hopelessness than others. Since academic success at school is evaluated as pass or fail, some children may be reinforced to regularly think in narrow terms and constantly monitor themselves, thinking: "Am I a winner or a loser? Will I succeed or fail?"

"People with a fixed mind-set believe that their traits are just given... and nothing can change that," Dweck writes in her book, "Mindset: The New Psychology of Success."

Here are some indications that your child may have a fixed mind-set:

- He worries excessively about his inadequacy.
- He believes intelligence, athleticism, ability, or talent are fixed traits, rather than qualities which can be developed.
- He is compelled to prove himself over and over because of a strong need to confirm that he is smart, athletic, or



talented in every situation.

- He over-focuses on judging.
- He often reacts with hopelessness.

Responding to a fixed mind-set

Be careful how you praise your child. Believe it or not, Dweck says praise, more than criticism, contributes to fixed mind-sets in children. If you repeatedly praise your child for being smart, he may grow to expect that school work will come easy. If he goes on to encounter failure in math or reading, this failure may feel like proof he is not smart as you characterized him.

Praise more effectively. Dweck recommends that when your child brings home an excellent grade you should avoid making comments of the variety "Wow, you are smart!" Instead, reference her effort and the pay off: "You worked so hard on that subject, and this is a great reward for it."

Educate him about intelligence. If your child bombs a test or comes home with a disappointing report card, and says, "I'm dumb," it is important that you explain how tests and report cards are indicators of performance, but not intelligence. Children need to understand that hard work and extra help can lead to greater success.

It may also help to have a conversation

about emotional intelligence and the value of it to her life's success.

Develop a growth mind-set

•Upgrade to a growth mind-set. The alternative to believing there is nothing you can do with the cards you have been dealt is called a "Growth mind-set." Within this mentality, "the hand you're dealt is just the starting point for development," according to Dweck.

•Think PET. Growth mind-set thinkers recognize people can grow and succeed through Personal effort, Experience, and Training. Dweck notes that when kids think the qualities they desire are attainable, their passion for learning is sparked.

•Ask, don't judge. Without a growth mind-set, when your child struggles with school, his self-image may be at risk. Fixed mind-sets focus on judging ("This means I'm dumb," "This means I'm a bad kid"), so a shift to a growth mind-set needs to occur. A child's inner voice could ask instead, "What can I learn from this?" or "How can I improve?" Dweck says developing this mind-set "allows people to thrive during the most challenging times of their lives."

•Help him heighten his sensitivity to negative self-talk. When kids grow more aware

of what their fixed mind-set is telling them ("Face it — you've got no talent!"), they will be in a better position to do something to change that internal monologue. Talk to them about the ways their self-judgments hold them back.

•Explain alternative ways to evaluate themselves. In the face of failure, there is always more than one response available. If he bombs a math test after studying hard, "You're a horrible math student" is only one potential reaction.

•Teach him to talk back! He will love this. Rather than allowing a fixed mind-set to drag him down — he should talk back to the voice that says he is not good enough. Encourage him to embrace a growth mind-set which, without judging, sees the possibilities and the opportunities that come from a setback.

•Discuss how a new mind-set may be put into practice. Dweck challenges individuals to embrace life's trials and learn from setbacks. She says, "Hear the criticism and act on it." Action based on a healthier mind-set will expand the opportunities available to our kids now and through adulthood.

Michele Ranard has a husband, two children, and a master's in counseling. She is happy to report that her son made great progress and has learned invaluable life lessons as a result of his academic struggles.

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8 costly mistakes

Things to avoid when planning for your special needs child

BY JOSEPH P. DONLON, ESQ.

We all hope to live long lives, but sudden illness or accidents are impossible to predict, so it's never too early to start making sure your loved ones will be taken care of when you're gone — especially if you have a child with special needs.

Unfortunately there are common mistakes people make when planning for the future that could cost a special needs child in the long run. Here's how to make sure that he is provided for in case something happens to you.

MISTAKE 1: Disinheriting the child. Many disabled people rely on Supplemental Security Income, Medicaid or other government benefits to provide food and shelter. You may have been advised to disinherit your disabled child (the child who needs your help most!) to protect that child's public benefits. But these benefits rarely provide more than subsistence, and this "solution" does not allow you to help your child after you are incapacitated or gone. When your child requires — or is likely to require — governmental assistance to meet his basic needs, you should consider establishing a Special Needs Trust.

MISTAKE 2: Ignoring the special needs when creating a trust for the child. A trust that is not designed with your child's special needs in mind will probably render your child ineligible for essential benefits. The Special Needs Trust is designed to promote the disabled person's comfort and happiness without sacrificing eligibility.

Special needs can include medical and dental expenses not covered by Medicaid, cutting-edge or non-traditional treatments or therapies, necessary or desirable equipment (such as specially equipped vans), training and education, insurance, transportation, and essential dietary needs. If the trust is sufficiently funded, the disabled person can also receive computers, books, games, vacations, movies, payments for a companion, and other self-esteem and quality-of-life enhancing expenses — the sorts of



things you now provide.

MISTAKE 3: Creating a "generic" Special Needs Trust that doesn't fit your child. Even some Special Needs Trusts are unnecessarily inflexible and generic. In most cases, an attorney with some knowledge of the area can prevent a trust from invalidating the child's public benefits; however, many trusts are not customized to the child's specific needs. As a result, the child fails to receive the benefits that the parents provided when they were alive.

Another mistake is when lawyers put a

"pay-back" provision into the trust, rather than allowing the remainder of the trust to go to others upon the death of the special needs child. These pay-back provisions are necessary in certain types of Special Needs Trusts — and not necessary in others. An attorney who knows when they should be used can save your family hundreds of thousand of dollars, or more.

MISTAKE 4: Procrastination. Since no one knows when they will die or become incapacitated, it is important to plan for your special needs child early, just as you

would for other dependents, such as minor children. Unlike other beneficiaries, your special needs child may never be able to compensate for your failure to plan. A child without special needs can obtain more resources as he reaches adulthood, and can work to meet essential needs. Your special needs child may not have that opportunity.

MISTAKE 5: Failing to invite other people to contribute to the trust. A key benefit of creating the trust now is that your extended family and friends can make gifts to the trust or remember the trust as they plan their own estates. In addition to the gifts and inheritances from other people who love your child, you can leave your own assets to the trust in your will. You can also name the trust as a beneficiary of life insurance and retirement benefits.

MISTAKE 6: Choosing the wrong trustee. During your life, you and your spouse can manage the trust. When you and your spouse are no longer able to serve as trustee, the person or persons you specify in the trust instructions will become the new trustee, such as a professional trustee or a team of advisors. Make sure that whomever you choose is financially savvy, well-organized, and ethical.

MISTAKE 7: Relying on your other children to use their money for the benefit of your special needs child. This can be a temporary solution, such as during a brief incapacity, if your other children are financially secure and have money to spare. However, because of the potential problems, this solution will not protect your child after you and your spouse have died, or when siblings have their own expenses and financial priorities. For example:

- What if your child with the money divorces? His or her spouse may be entitled to half of the funds and will not likely care for your special needs child.

- What if your child with the money dies or becomes incapacitated while your special needs child is still living? Will his or her heirs care for your special needs child as thoughtfully and completely as your child with the money did?

- What if your child loses a lawsuit and has to pay a large judgment or has other creditor problems? The court will certainly require your child to turn that money over to his or her creditors.

When you create a Special Needs Trust, you protect all of your children. The trust facilitates easier record-keeping and allows your other children to rely on the assistance of a professional trustee, if needed. Siblings of a special needs child often feel a great responsibility for that child, as they have all of their lives. When you provide clear instructions and a helpful framework, you lessen the burden on all of your children and build a loving, involved relationship that benefits your child with special needs.

MISTAKE 8: Failing to protect the special needs child from predators. Thieves, con men and other criminals look to take advantage of those who are most vulnerable, like your special needs child. A child trapped in the system with precious little resources and without anyone to look after his affairs can easily fall prey to these predators. When you establish a Special Needs Trust and properly structure your estate plan to protect your special needs child, you ensure that your child will never be left alone, will always be provided for, and will always have a trustworthy person — either a guardian or trustee, or both — watching over him.

Joe Donlon is an Estate Planning Attorney who has in-depth experience working with parents who have a special needs child. He offers the free article, "7 Key Questions Parents Should Ask About Special Needs Trusts." To receive a free copy, send an e-mail to joe@donlonlaw.com.



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Proposed law to help at-risk students

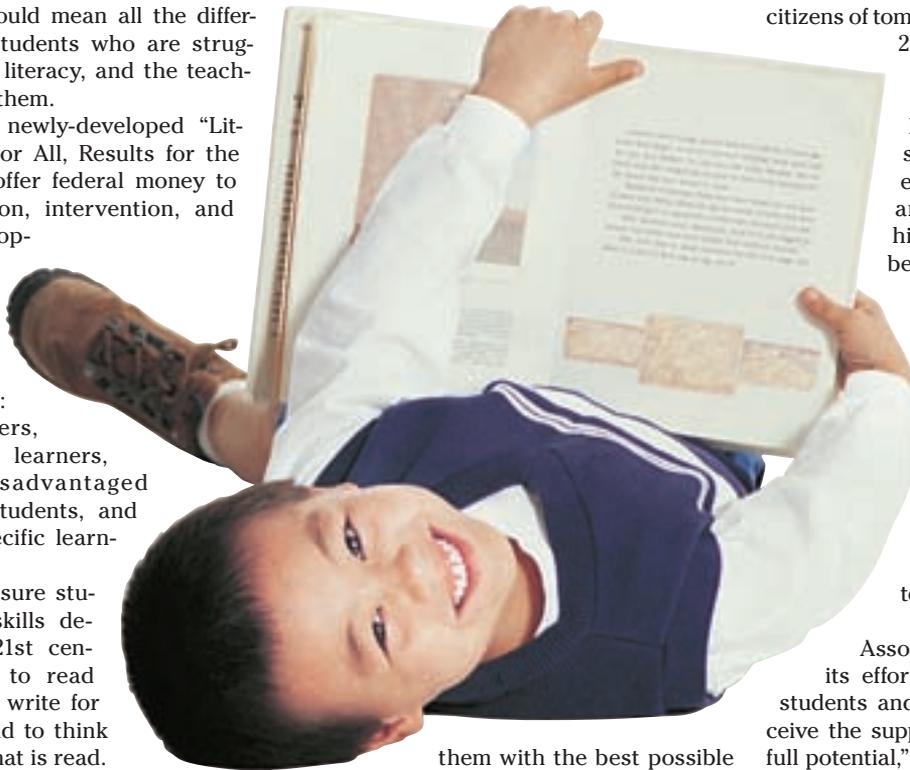
A new act could mean all the difference for students who are struggling with literacy, and the teachers trying to help them.

If passed, the newly-developed “Literacy Education for All, Results for the Nation Act” will offer federal money to support instruction, intervention, and professional development for teachers and support personnel working with students who are at risk for literacy failure: struggling readers, English language learners, economically-disadvantaged youth, dyslexic students, and students with specific learning disabilities.

The act will ensure students have the skills demanded in the 21st century: the ability to read for knowledge, to write for understanding, and to think critically about what is read.

The International Dyslexia Association is taking charge, urging Congress to pass the act. The Association has drafted a model language for state literacy law to assist states in accessing the funds once the act is passed, and to establish a set of standards to determine which educational entities will receive the federal grants.

“The LEARN Act and model language for state literacy law are products of the IDA’s goal to implement a set of ‘gold’ standards in education, so that parents know the institutions and professionals to whom they entrust their children are providing



them with the best possible chance to succeed,” said Cynthia Haan, member of the Association board, and chair of the Government Affairs Committee. “It’s a goal that is reflected in most all of the work we do to highlight literacy and education as the Civil Right of the new century.”

The act, introduced by Sen. Patty Murray (D-WA), authorizes federal literacy funds to be used for Multi-tier System of Supports to help struggling readers all through school. While the act authorizes federal funds for Multi-tier System of Supports, the Association’s law will ensure those funds go to institutions that utilize the proven Multi-tier

System of Supports. The law will make sure funding goes to the most highly-qualified educational institutions.

The model language for state literacy law will further require all those teaching reading to have the skills necessary to utilize the scaffolding of these support systems with diverse student populations. The goal is to have federal funds directly available to the states, to ensure that both teachers and students receive the supports they need to ensure that all children become literate by the third grade.

“The fact is that fourth-grade students not proficient in reading are all too likely to become the nation’s least-skilled, lowest-income, least-productive, and most-costly citizens of tomorrow,” according to Haan. “In 2007, 6.2 million young people ages 16- to 24-years-old [16 percent] had dropped out of high school and will cost our society an estimated \$260,000 each in lost earnings, taxes and productivity. America’s high school dropout rate has become a national crisis.”

The passage of the act and the utilization by the states of the Association’s model language for state literacy law will further the Association’s mission of providing the most comprehensive range of information and services that address the full scope of dyslexia and related difficulties in learning to read and write.

“The International Dyslexia Association has been tireless in its effort to promote literacy for all students and ensure that all learners receive the support needed to achieve their full potential,” said Stephen Peregoy, executive director of the Association. “The introduction of the LEARN Act and our model language for state literacy law puts us one step closer to our goal of strengthening individual learning abilities and tearing down social, educational and cultural barriers to language acquisition.”

The International Dyslexia Association is a non-profit, scientific, and educational organization dedicated to the study and treatment of dyslexia as well as related language-based learning differences. It operates 46 branches throughout the United States and Canada and has global partners in 13 countries, including Australia, Brazil, England, Germany, Ireland, and Japan.

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Basketball diary

Coach shares joys of sports with special needs adults

BY BOB ANDERSON

Playing sports is fun! Team sports not only give a child something to do with a group of friends who share the same goals and interests, but it can also considerably improve the lifestyle of a disabled child and may help control obesity, promote activeness, and increase a child's self-image and social skills. The structure, organization and rules learned while playing will translate to other parts of your child's life, and, additionally, he can practice verbal communication and interaction with his peers.

Aside from the physical benefits, children who play team sports learn teamwork and leadership skills by learning how to work together to achieve a goal. The confidence that's formed by achieving a goal with peers of similar ability can be very rewarding to these children, and their families.

Developing a sense of self-esteem and confidence is an extremely important part of a child's development, especially for a child with special needs. These children need to be involved in environments in which they feel that they are contributing successfully to a group. Their abilities in all other skill areas will improve as a result of a newly-gained positive self-image and sense of confidence.

Adults lacking motor skills

I have been playing sports since I was a child, and have been coaching since my now 14-year-old son was about 5. I've spent the last couple of years as an athletic director at my local parish, but it wasn't until I became a volunteer sports coordinator at an adult special needs agency that I learned how team sports can impact someone's life. After attending one of my parish basketball games, a group of men we care for at the agency told me that they really enjoyed the game and wanted to learn how to play.

So, my son and I volunteered the following Saturday, prepared to teach the guys some basic basketball skills. We weren't prepared, though, for how difficult it would be for some of them to learn how to play. Most of them



KICK START: These little players — (from left) Joseph Gormely, Nick Orlando, Jack Orlando and Alex Halligan — love sports.

looked and spoke just like we did, but they didn't have the same motor skills we had. Many couldn't catch or bounce the ball, and didn't have the strength to reach the hoop with their shots. As our session went on, my son and I realized that if we were going to really help these guys, then we were going to have to be committed to starting from the ground up.

We committed to working every Saturday — all summer long if the agency would let us. The agency quickly invested in some basketballs and hoops, assigned some staff members to work with us, and put the word out to all members of the agency that we'd be holding free basketball clinics for anyone

who wanted to learn. Soon, our handful of members turned into a group of more than 40 eager basketball students!

Love for the game, for each other

Although we were only there for a few hours each Saturday, our special needs athletes made us feel like we were rock stars. As soon as we would arrive, they would come running up to us, giving us hugs and thanking us until the minute we left. In all my years of coaching and playing, I have never seen a group of people work harder and be more appreciative of the coaching and training they were receiving.

Every time they successfully completed a training drill, or completed a pass to a teammate, EVERYONE cheered for each other. Do I even have to tell you what happened when someone made a basket? Well, it was like New Year's Eve — every time!

A local T-shirt company donated shirts for the guys to wear at the clinic and, as I usually did every Saturday, I learned something new about the guys. Some were adamant about what number they wanted to wear. I heard: "I want to be number 23 like Michael Jordan!" or "Can I have number 2 like Derek Jeter? PLEASE?!" Some guys wanted the numbers that fell on their birth dates, while others wanted their ages.

One player, who barely ever spoke, was indifferent about his number, so I asked him for his favorite number. He still had no preference, no matter how many times I told him he could pick any number he wanted. So, I checked the list and saw a number that hadn't been taken. It was his size, too, so I gave him number 24.

'The Big Game'

After about six months of practicing, we were ready to show our friends, families and co-workers just how far we had come and how hard we had all worked. A local facility, Fast-break, donated its gym to us and we invited every relative of every player to come and watch what we called, "The Big Game." We had more than 150 people in the stands!

From what started as a handful of guys who couldn't bounce a ball, had turned into a team that was looking at a score of 28-26 with a few seconds to go in the game. We called a time out and announced that there was no losing team that day, that everyone was a winner. The crowd gave every player a well-deserved standing ovation. The players graciously accepted the applause, but wanted to keep playing. So, we started the clock and just before the buzzer sounded, a bas-

ket made from the 3-point line garnered the shooter's team a win of 29-28.

In any other place in the world, after that shot, the winning team would be celebrating the last-second victory, and the losing team would be distraught by the loss. Not here. Before the ball could even hit the ground, as the winning players were jumping all over their hero, the players from the losing team were piling on as well! They were just as happy for their buddy as they would have been if he had sunk the winning shot for them. I think our million-dollar pro athletes could have learned something from our guys.

Lasting memories

After the trophy presentations and festivities were over and we were getting ready to leave, a woman approached me and asked if I'd take a picture with her son after he opened a gift she had bought him. She told me that after he had started playing basketball in the Saturday clinics, he became "a different person." She said that for years he would stay in his room alone all night and watch TV. He barely interacted with his family and never had a friend come over. But after starting the clinic, she said he would come out of his room and watch basketball with his dad, and on Saturdays, "wouldn't shut up about what he learned at basketball."

He opened the gift and pulled out the gold chain with a basketball charm on it. His eyes filled with tears and he asked me if I would help him put it on. I noticed there was another charm on it as well — the number 24, his new favorite number.

That is why I do what I do. *Bob Anderson is the athletic director at Our Lady of Pity church, and also the founder of Staten Island Special Needs Athletic Programs, a non-profit that provides free instructional sports clinics for special needs kids and adults. For more information, visit www.SIsnap.com, or call (347) 838-1121.*

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A parent's guide to understanding learning styles

BY NANINE IENGO

My sister and I were born 13 months apart. We didn't really suffer from sibling rivalry — what was mine was clearly her's, and vice versa, without question. I do not know a life or a way of being that does not include her.

However, we are as vastly different as two people can be, not only physically (I'm 5'8 and she's 5'4; she's blond and I'm not), but in the way we approached and functioned in school — as were many siblings before and after us. I was an avid reader, greatly preferring books and low-key activities (chess, puzzles), while she ran straight into any physical activity she could (she was actually on a pre-Olympic gymnastics team and one of her fellow gymnasts participated in the 1980 Olympics).

The comparisons were inevitable and typical. I was tall and awkward, but made straight As, while she was small and lithe and was banished to the resource room — as were most kids who were non-typical learners, and therefore, labeled learning disabled in the 1970s and '80s.

I remember the first day we moved into a new school — my sister and I had to take placement reading tests in order to see where we fit among the three classes on our respective grades. I placed in the middle grade because, while I may have been a great student, it was very intimidating sitting in the principal's office, under scrutiny of the third grade teacher, the principal, and my parents, while trying to read passages and answer questions.

My sister, a shaky test taker from the beginning, tested into the lower class. She

ended up developing low educational self-esteem because of the low abilities and bad behaviors of the other students in her class. To her, and obviously to the school, she wasn't able — able to read well, to write well, or to be a good student.

But, here's the thing: she was. Every child is — the key to learning just needs to be uncovered.

And it wasn't until I first read about Dr. Howard Gardner's Theory of Multiple Intelligences way back in my undergraduate days that I understood this and put into perspective the great differences in our educational experiences, and my sister's great difficulties in school. My sister wasn't a bad student, she just needed a different approach to learning than what schools at that time were using.

The theory illustrates the many ways in which a person can learn and process information. There are currently eight widely-accepted intelligences, and they are:

- **Visual/spatial intelligence:** People who are visual/spatial learners are great at visualizing and representing their ideas in 3-D, are great with puzzles, and may grow up to become engineers, architects and artists. They tend to need to incorporate concrete examples when they learn, such as drawing a scene from a play if they are reading Shakespeare, or creating a replica of the Eiffel Tower if they are learning about France.

- **Linguistic intelligence:** People who are linguistic learners are great with words, both written and spoken. They love to play with words and find reading a pleasurable activity. In order for them to learn, they need to include note taking or journal writing when they are learning.

- **Logical-mathematical:** People who are logical-mathematical learners tend to be great at reasoning and logic. Math and science are also strengths for these learners, as they approach learning in an investigative way, asking a lot of questions and applying their reasoning powers.

- **Bodily-kinesthetic:** People who are bodily-kinesthetic learners need to incorporate movement into their learning. They retain information when there is an action incorporated into the lesson. They often need to touch something or physically do something (creating a muscle memory) for it to become meaningful.

- **Musical:** Musical learners tend to be sensitive to noises, music, rhythms and patterns. They need to incorporate music (whether it is by singing, dancing, or moving) in order to learn something and create a memory. You will often find these learners tapping their feet when they are listening to someone talk and creating their own songs from what they are hearing so that they can better understand it.

- **Interpersonal:** Interpersonal learners tend to be the social butterflies of any group. They learn best by transmitting information to others and having others interact with them. Very extroverted, interpersonal learners are empathetic and do well in groups of people.

- **Intrapersonal:** People who are intrapersonal learners are highly intuitive and seen as shy or quiet. They have a keen ability for self-reflection, and tend toward working alone rather than in groups.

- **Naturalistic:** Naturalistic learners love to be in nature and study best when the natural world is involved.

Dr. Gardner did not primarily develop his theory for education, but the educational world has wholeheartedly embraced it. It makes the vocation of teaching and parenting a little easier if a teacher or parent understands the ways in which children see and approach their worlds.

While there is usually a base type of intelli-

Resources

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To find your child's style, visit www.scholastic.com/familymatters/parent-guides/backtoschool/quiz_learnstyles/index.htm.

www.scholastic.com/familymatters/parent-guides/backtoschool/quiz_learnstyles/index.htm.

For more information on Dr. Howard Gardner, visit www.howardgardner.com.



gence, many of us do exhibit a combination of intelligences, and that is why it is so important that when teachers and parents approach any type of activity — whether it be reading, disciplining, teaching, or playing — they include a variety of ways to approach it.

Now, as an educator, I often look back on the pair of us and our educational and personal paths, and use it to inform my educational theories. And it is because of this that I have always aimed at providing my students with lessons that were developed with many different learning styles in mind. I usually didn't plan lessons until I got to know my students and the different styles they offered. I made sure to include activities or projects that would help me uncover the way they learned, and offered them a multitude of ways to access the different centers or projects in our class. This was easy in a preschool environment, but maybe not so much so in a higher elementary grade.

On the first day of class, I designed my classroom to provide opportunities for small and large group, as well as individual activities (listening center, playdough, reading nook). During circle time or whole group work times, I allowed for the different ways a child may need to access the circle or whole group experience. A child was allowed to sit at the table,

sit at the circle in a chair, sit holding a stuffed animal, or stand, as long as he wasn't disrupting the class.

When I first started teaching, I had a little girl in my class who was so sensitive to music that she was terrified of the music teacher. After bringing her outside of the classroom to calm down a few times, the music teacher and I decided that it was best for her to sit at the door in a chair. But, by the end of the music time, she was usually in the circle dancing with the other kids.

To be honest — this does create more work at first, especially doing this for an entire class. But, as a preschool teacher, I found that approaching teaching in this way, creating lessons to include as many of the ways of learning as I could, challenged me and help me become a better teacher.

And now, I see this with my own parenting style. My 3-year-old son is also highly sensitive to sound, but is extremely musically inclined (not to brag too much). He plays simple scales on his piano, and has started writing music with my husband, and on his own.

However, when he enters a room full of screaming kids (say, at an indoor play area), he sometimes has a hard time functioning.

I feel that it is up to me — and those who take care of him — to understand his learning needs, and help him understand them as well. This will help him in school, and will make things a little easier for him when he comes across information that he just doesn't understand.

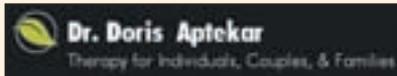
We were taking music classes together at a local Music Together Studio, and after a few weeks, he just wasn't able to handle it. There were too many elements for him to process, and while he loved the music, the surroundings became too much. My husband and I feel that our son does love music, and we want to encourage his natural abilities, so we plan on enrolling him in one-on-one music lessons. Being able to identify his way of learning helps me, especially when the challenging times come up. And trust me, they do come up!

My sister and I sat down and filled out an online questionnaire to find our learning styles. Sure enough, what we had already assumed was true — I'm a linguistic learner, and she's a bodily/kinesthetic learner. I did the same for my son, and confirmed he is a visual/spatial and musical learner. I can't wait for my husband to take the test!

Nanine Iengo is an Early Childhood Educator and Administrator who is working toward her Professional Certification in special education. While taking a leave of absence from the working world to be home with her son, she has developed a parent participation class called Toddler Lit 101, which is aimed at giving all children a love of reading.

Special Needs

RESOURCE GUIDE



Doris Aptekar, PhD

30 The Hemlocks
www.miracleshappendrdorisaptekar.com

Dr. Aptekar specialize in ADD/ADHD, hypnotherapy, behavior modification, communication skills, self-esteem, and educational skills, tools, and techniques.

She practices a therapeutic approach, providing support and practical feedback to clients with ADD/ADHD, establishing limits and boundaries, facilitating behavior modification, introducing learning techniques, and developing parental guidance for teaching and behavior management.

She specializes in therapy for depression and anxiety, family and marital counselling, parenting support, stress management, conflict resolution and bereavement.

She is a member of the National Society in Psychology.



HOPEFitness

2750 North Jerusalem Road, North Bellmore, NY (Nassau) and 1615 Ninth Avenue, Bohemia, NY (Suffolk)
(877) 396-HOPE or www.hopefitness.com

HOPEFitness was created and dedicated to give individuals with all types of disabilities a gym they could call their own.

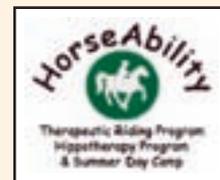
Its mission is to bring fun and challenging opportunities in exercise to youth and adults with intellectual, developmental and physical disabilities. The facilities and equipment at HOPE are designed to allow for maximum participation while adjusting to the strengths and weaknesses of all in a safe and comfortable atmosphere.

It offers group training, personal (one-on-one) training and kids programs. The founder is a longtime Special Olympics coach and the parent of a special needs young man.

Horseability

238 Round Swamp Road
Melville, NY
(631)367-1646
www.horseability.org

HorseAbility Therapeutic Riding Program, Hippotherapy Program, and Summer Day Camp offers a wide range of horse-related programs to children, adults, and families with special needs



to promote the physical, psychological, emotional, social, and spiritual well being of its participants.

The personal attention that each participant receives from our wonderful staff and volunteers is unparalleled. Consultation with participants, their families, and staff takes place on a regular basis to ensure that the appropriate level of service and programs are being utilized to optimize the impact of our programs.

ADVOCACY

Association for the Help of Retarded Children

Children of Nassau County
189 Wheatley Road, Brookville, NY 11545
516-626-1000
www.ahrc.org/

Services Provided: Case Management, Community Education, future planning, Information and Referral, residential, treatment, vocational/employment

Association for the Help of Retarded Children (AHRC)

Suffolk County
2900 Veterans Memorial Highway,
Bohemia, NY 11716-1193
631-585-0100
www.ahrcsuffolk.org

Services Provided: Assistive Tech/Equipment, Community Education, Future planning, Information and referral, residential, treatment, vocational/employment

Long Island Advocacy Center

999 Herricks Road, New Hyde Park, NY 11040
(516) 248-2222

Services Provided: Information and referral,

Individual/case advocacy, legal advocacy

Long Island Center for Independent Living

3601 Hempstead Turnpike, suite 312,
Levittown, NY 11756
(516) 796-0144
www.lilic.net

Services Provided: Information and referral, Individual/case advocacy, legal advocacy.

Other: equipment loan bank, independent living skills, transportation

Long Island Chapter March of Dimes Birth Defects Foundation

325 Crossways Park Drive, Woodbury, NY 11797
(516) 496-2100

Services Provided: Community education, information and referral, individual/case advocacy.

Other: Specializing in community education

Nassau County Commission on Human Rights

240 Old Country Road, Mineola, NY 11501
(516) 571-3662
www.nassaucountyny.gov

Services Provided: Community education,

Information and referral,

Individual/case advocacy, legal advocacy

Nassau County Department of Social Services

60 Charles Lindbergh Blvd., Uniondale, NY 11553

(516)227-8000

www.nassaucountyny.gov/agencies/dss/managedC.htm

Services Provided: Information and referral

Nassau County Medical Center, Division of Genetics, Department of Pediatrics

2201 Hempstead Turnpike, East Meadow, NY 11554

(516) 572-5717

Services Provided: Community education, Future planning, information and referral, treatment.

Nassau/Suffolk Law Services Committee, Inc.

One Helen Keller Way,
Hempstead, NY 11550

(516) 292-8100

www.nslawservices.org

Services Provided: This unit is funded by the Committee on Quality of Care and Advocacy

Special Needs

RESOURCE GUIDE

for persons with developmental disabilities to provide free advocacy and legal services to this population.

Suffolk Early Childhood Direction Center

Developmental Disabilities Institute (DDI)
99 Hollywood Drive, Smithtown, NY 11787
(631) 863-2600

Services Provided: Information and referral

AUTISM

Asperger's Syndrome and Higher-Functioning Autism Association of New York

189 Wheatley Road, Brookville, NY 11545
(888) 918-9198
www.ahany.org

Services Provided: Provides support and education for families, individuals and professionals affected by Asperger's Syndrome, high-functioning autism and other pervasive developmental disorders.

Kids Success, Inc.

2950 Hempstead Take.
Levittown, NY 11756
(516)796-0989
www.all4kidsuccess.com

Services Provided: Educational and intervention services for parents, educators, schools, and caregivers of children with Autism Spectrum Disorder, ADD/ADHD

Learning Disabilities, Emotional and Behavioral Disorders.

Quality Services for the Autism Community (QSAC)

56-37 188th Street, Fresh Meadows, NY 11365
(718) 357-4650
www.qsac.com

Services Provided: QSAC is an award winning non-profit organization dedicated to providing services to persons with autism and/or pervasive disorder (PDD) throughout New York City and Long Island.

CEREBRAL PALSY

United Cerebral Palsy Association of Nassau County, Inc.

380 Washington Avenue
Roosevelt, NY 11575
(516) 378-2000
www.ucpn.org

Services Provided: All developmental disabilities

United Cerebral Palsy Association of Greater Suffolk, Inc.

250 Marcus Blvd. PO Box 18045,
Hauppauge, NY 11788-8845
(631) 232-0011
www.ucp-suffolk.org

Services Provided: Case management, community education, information and referral, residential, vocational/employment

DEVELOPMENTAL DISABILITY SERVICES

Children with Special Health Care Needs Program

(Formerly Physically Handicapped Children's Program)
Suffolk County Department of Health Services

Division of Services for Children with Special Needs
50 Laser Court, Hauppauge, NY 11788
(631) 853-3000

Services Provided: Residents of Suffolk County under the age of 21, with chronic or disabling medical conditions may be eligible for diagnostic and/or treatment services through PHCP. Most children with chronic health problems can obtain a diagnostic evaluation to enable physicians to establish a diagnosis; a qualified family can address care plans for their child which may include surgical procedures, therapies and medications. PHCP may also assist families in securing devices such as braces, wheelchairs, hearing aids and other medical equipment and supplies.

WHO IS ELIGIBLE?

Some examples of children ages birth to 21 who are eligible for services are:

Children with chronic health conditions such as spina bifida, asthma, diabetes, cerebral palsy, PKU, cancer, blood, hearing or seizure disorders, heart conditions, etc.

Parents may be asked to pay a fee based on their ability to pay.

Child Find Program

Suffolk County Department of Health Services
Bureau of Public Health Nursing
PO Box 6100
Hauppauge, NY 11788-0099
(631) 853-3069 (Western Suffolk)
(631) 852-1591 (Eastern Suffolk)

Service Provided: Children under the Age of three, who have significant health problems or need special health care, may be eligible to receive services from a public health nurse.

The nurse will make home visits to provide support, information and training, as well as periodic screening and assessment of infant development. The program is designed to assist families in their care of babies born with health related issues, monitor and/or identify potential growth and learning problems and provide referrals to other support services (including Early Intervention) when appropriate.

WHO IS ELIGIBLE?

Some examples of children who are eligible are: Children who were born after a pregnancy of less than 33 weeks; Children who weighed less than three pounds at birth; children who spent more than 9 days in a neonatal or special care unit; children who exhibit growth and/or developmental problems; and children with special health problems.

Feel Better Kids

626 RXR Plaza
Uniondale, New York 11556
(866)257-kids(5437)

Services Provided: Feel Better Kids is a not-for-profit children's charity whose primary mission is to help children who are seriously ill or disabled.

The Hagedorn Little Village School

Jack Joel Center for Special Children
750 Hicksville Road
Seaford, New York 11783
(516)520-6000

Services Provided: The mission of HLVS is to provide the finest educational and therapeutic programs for infants and young children with a wide range of developmental disabilities. These disabilities may include cognitive delays, social/emotional deficits, autistic spectrum disorders, speech/language delays, orthopedic and/or motor impairments, visual impairments, and/or significant medical issues.

Long Island Infant Development Program

Nassau County
2174 Hewlett Avenue, Suite 105
Merrick, NY 11566
Suffolk County
15 Smiths Lane
Commack, NY 11725
(516) 546-2333
(631) 300-2333

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Special Needs

RESOURCE GUIDE

Continued from page 25

Services Provided: Early Intervention, Preschool, ABA (Applied Behavior Analysis) services from birth through age 5

Nassau Early Childhood Direction Center

Variety Child Learning Center
47 Humphrey Drive, Syosset, NY 11791
(516) 921-7171/(800) 933-8779
www.vclc.org

Services Provided: Information and referral, Individual/Case advocacy

Other: Preschool programs, transportation, medical, educational and social services, evaluation and assessment services, parent education programs and resources.

Nassau County Health Department, Early Intervention Program

106 Charles Lindbergh Blvd.
Uniondale, NY 11553
(516) 227-8661

Services Provided: Information and referral

Other: Point of entry into early intervention services

National Center for Disability Services

201 I.U. Willets Road, Albertson, NY 11507
(516) 747-5400
www.abilitiesonline.org

Services Provided: Assistive tech/equipment, Case management, community education, future planning, information and referral, individual/case advocacy, legal advocacy, vocational employment.

DOWN SYNDROME

Association for Children with Down Syndrome Inc.

4 Fern Place, Plainview, NY 11803
(516) 933-4700
www.ACDS.org

Individuals Served: Down Syndrome, Mental Retardation

Counties Served: Nassau, Suffolk, Kings, Queens

Services Provided: Case management, community education, future planning, information and referral, Individual/Case advocacy, treatment.

EPILEPSY

Epilepsy Foundation of

Metropolitan New York

257 Park Avenue South, Suite 302, New York, NY 10010
(212) 677-8550
www.epilepsyinstitute.org

Epilepsy Foundation of Long Island

550 Stewart Avenue
Garden City, NY 11530
(516) 739-7733
www.epilepsyfoundation.org/longisland/

Services Provided: The Epilepsy Foundation of Long Island serves people with Epilepsy, as well as other developmental disabilities through its Day Habilitation program; Residential program; a Community Services program that provides Medicaid Service Coordination, Respite, and Residential Habilitation.

MUSCULAR DYSTROPHY

Muscular Dystrophy Association

11 East 44th Street, New York, NY 10017
(212) 682-5272
www.mda.org

Services Provided: Assistive Tech/equipment, case management, community education, future planning, information and referral, legal advocacy, treatment.

SOCIAL SERVICES

Suffolk County Department of Social Services

3085 Veterans Memorial Highway,
Ronkonkoma, NY 11779
(631) 854-9930

Services Provided: Services vary by county

Suffolk County Department of Social Services, Family & Children's

Services Administration
3455 Veterans Memorial Highway,
Hauppauge, NY 11779
(631) 854-9434

Services Provided: Child protective services, foster care placement

TOURETTE SYNDROME

National Tourette Syndrome Association

42-40 Bell Blvd., Bayside, NY 11361-2820
(718) 224-2999

www.tourette-syndrome.com

Services Provided: Community education, information and referral

VOCATIONAL EDUCATION

Nassau County BOCES Rosemary Kennedy School

2850 North Jerusalem Road, Wantagh, NY 11793

www.staffet@mail.nasboces.org
(516) 396-2600

Services Provided: Educational services for students with developmental disabilities from age 9-21

The Board of Cooperative Educational Services of Nassau County (Nassau BOCES)

Serves the 56 school districts of Nassau County, Long Island, by providing cost-effective shared services, including career training for high school students and adults, special education, alternative schools, technology education, and teacher training, as well as dozens of programs to expand educational opportunity and help districts operate more efficiently.

Vocational and Educational Services for Individuals with Disabilities (VESID)

NYS Education Dept.
Riverhead office, Plaza 524, East Main Street, Riverhead, NY 11901
(631) 727-6496

Service Provided: Assistive tech/equipment, community education, information and referral, vocational/employment

Vocational and Educational Services for Individuals with Disabilities (VESID)

NYS Education Dept.
Hauppauge District Office, NYS Office Building,
250 Veterans Highway,
Hauppauge, NY 11788
(631) 952-6357

Services Provided: Assistive tech/equipment, community education, information and referral, vocational/employment.

www.webfamilyny.com



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