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## LETTER FROM THE PUBLISHER

# Let the help come in

I recently watched a terrific British television mini series that was very complex in its content. It was a crime mystery drama and it centered around two family scenarios. The reason I mention it is that one of the lead characters, who happens to be the police captain heading the investigation, and her husband are contacted by their school and told that their 4-year-old son needs to be evaluated for possible issues. He's their only child and although a cute little boy, has some oddities to his behavior and is prone to tantrums. He's rather aloof from other children and seems to have socialization difficulty. He exists seemingly happy in a kind of cocoon until he's disturbed and then he can be disturbing. The mother's response to the school's concern is anger and denial. She is unable to see their intervention as a positive thing, and is uncooperative, at least in attitude. This doesn't remain that way, but her initial response is defensive.



Who of us doesn't understand that? We all wish for, hope for, and would like to assume that our children will be the norm. It's rare to find a parent completely prepared, emotionally or psychologically for the unknown factors. Whether it's behavior, learning skills, illness or disability, it's a difficult pill for parents to swallow and disappointment is profound. A perfectly happy little girl becomes a teenager who is obsessed with her weight and image and is counting calories or purging what she does eat. A sweet little boy is now a school child who is sullen and withdrawn and has no friends and is acting weirdly.

The variables are vast and as parents the responsibility enormous. It's impossible to do without help and support from a wide array of knowledgeable trained professionals. And they are out there, all kinds of trained personnel; teachers, therapists, instructors, friends, and family to give the sense of community that all really important circumstances require. Don't even try to do it alone. That's dangerous and also largely unnecessary. The mother in this series finally figured that out and came to grips with the situation. She relaxed and allowed others to help steer and guide them. She cried and released her disappointment and her anger. She let go and let the help come in.

We started this magazine in 2008. We are enormously proud that it is still going and that more and more of you have requested its distribution, for your homes, for your schools, for your community centers. We hope with all our hearts that it is a helpful resource in the daunting experience of raising children with special needs.

Thanks for reading.

Susan Weiss-Voskidis, Publisher

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# Eating clean

## Can diet changes help neurocognitive disorders?

BY MALIA JACOBSON

Jodi Cohen's second son was an energetic, happy preschooler, most of the time. But the mom of two from Seattle worried about his erratic behavior, shaky focus, and "Jekyll and Hyde" mood swings.

"I have an older son who is free from any issues with impulse control and focus, so I felt something wasn't right," she says.

Cohen tried parenting classes without results. Then a friend mentioned changing his diet. Out of options, she took the suggestion, nixing corn, soy, and dairy — so-called inflammatory foods believed to contribute to learning and behavior problems in children — from the family menu. Her "eat clean" efforts paid off.

"Right away, he was a calm, sweet kid," she says.

Cohen never looked back. She was so impressed with the changes to her son's learning and behavior that she permanently changed her family's diet and went on to earn a degree in nutritional therapy.

This type of elimination diet (removing foods that may be problematic for a child) and intensive nutritional therapy are wildly popular with parents of children dealing with issues that range from mild problems with focusing to serious neurological disorders.

According to the Journal of Developmental and Behavioral Pediatrics, at least one-third of children with autism spectrum disorder have used complementary treatments, including dietary supplements and elimination diets.

Proponents of this type of therapy point to life-changing results.

"I won't say I can cure every child [with a neurological disorder]," says Dr. Deborah Z. Bain, of Healthy Kids Pediatrics in Frisco, Texas. But parents report that diet changes are game changers, she says. "They tell me, 'He's making eye contact, he's speaking, he's a new person.'"

### Treatment or cure?

Despite the wide use of special diets for kids with neurocognitive disorders, doctors, dieticians, researchers, and parents are split on the issue. Sandra Kimmet, a mom of

four from Dryad, Wash., is a doubter. She wanted to find a "miracle cure" for 7-year-old Jasper's sensory processing disorder and 5-year-old Tabitha's childhood apraxia of speech, a motor speech disorder. But a gluten-free, sugar-free diet didn't yield results. She credits her children's progress to intensive therapy rather than dietary changes.

"I so wish there was a miracle diet," she says. "I'd be all over it!"

And doctors say a diet alone may not be enough.

"Parents shouldn't think of food as a cure, but rather as one tool they can use to help their child," says pediatric neuropsychologist Dr. Daniela Ferdico, who founded Bellevue's Cogwheel Clinic for Neurodevelopment in 2015 as a hub of comprehensive care for children on the autism spectrum.

Cogwheel offers psychology and therapies — occupational, speech and others — along with nutritional counseling, something Ferdico sees as an essential piece of the puzzle for children with neurodevelopmental disorders.

She makes a distinction between treatment and cure: A cure is a one-time solution, whereas treatments are ongoing. Like speech, occupational, and behavioral therapies, nutritional therapy is usually ongoing and works best when it's just one component of a more comprehensive plan, she says.

Nutritional therapy won't cure autism, Ferdico notes. But it can form the foundation for an effective treatment plan by reducing a child's level of gastrointestinal pain and distress, enabling him to be more receptive to other therapies. Nutritional therapy does this by stabilizing blood sugar to ward off mood swings and meltdowns that make day-to-day life difficult, and supplying the body with the protein and nutrients required for cognition, she says.

### Pinpoint the plate

Nutritional therapy sometimes involves an elimination diet, wherein certain foods are eliminated and then gradually reintroduced to help pinpoint food sensitivities. Researchers have long theorized that foods containing gluten, soy, and casein — a protein in milk — may irritate the intestines of

sensitive children with autism, contributing to a "leaky gut" that leaches inflammatory proteins throughout the body, impacting behavior, mood, and learning.

A small Danish study found that inattention and hyperactivity abated for children ages 4 to 10 after 12 months on a gluten-free, casein-free diet, but the gains seemed to plateau when the same kids were tested after 24 months on the diet.

Gluten and casein are potentially problematic because when sensitive individuals can't properly digest the foods that contain these substances, a buildup of internal inflammation results. This contributes to mental fog, inattentiveness, unresponsive behavior, and continued carbohydrate cravings, says Bain.

"It's a feed-forward cycle, where the child eats more and more unhealthy foods and less and less of the nutrients he needs to grow and thrive."

But aside from the Danish study, evidence on the impact of gluten-free diets is limited. Evidence on the negative impact of food dyes, a common food additive thought to be especially harmful to children with learning disorders, is more robust (artificial food dyes have been linked to behavior problems in children for decades), and new studies are currently under way.

Because elimination diets can get complicated quickly, parents who want to try one should seek out the help of a nutrition expert. Parents shouldn't simply yank nutrient-dense foods such as grains and cheese from a child's plate without consulting their pediatrician and a dietician, says registered dietitian Kathleen Putnam, owner of Seattle's NutritionWorks counseling service. One problem: Removing potentially problematic foods is only part of the picture; those calories need to be replaced with something else, and that something may not be any better than the foods that were eliminated.

Popular elimination diets such as Gut and Psychology Syndrome are gaining ground as a means to treat learning and neurodevelopmental disorders, but the protocol — sticking to a simple diet of mostly meat, fish, eggs, meat stock and fermented foods — can seem daunting to the average busy parent and dif-



ficult to maintain over the long term.

Plus, eliminating entire food groups can introduce nutrient deficiencies, complicating an already complex situation, Putnam says.

"Nutrition that's limited can contribute to problematic development, both cognitive and behavioral. Children with ADHD are often treated with medications that significantly lower the appetite, which is a major concern for growing children."

Though gluten-free and casein-free diets are still under scientific study, they can be worth trying, with professional guidance, Putnam says. And removing most junky refined carbs — bread made from highly refined flour, most crackers and cookies — is probably a safe, healthy

step for most children.

Replacing refined sugar with fruit-sweetened foods is another change that some parents find worthwhile, says licensed social worker Katie Hurley, and author of "The Happy Kid Handbook: How to Raise Joyful Children in a Stressful World." A Korean study found no relationship between sugar intake and the development of attention deficit hyperactivity disorder in children, but some parents report that removing sweets calms kids down. Whether you're a believer in elimination diets or a skeptic, eating less junk food never hurt anyone, right?

### Nutrition addition

Once you've removed potential problems

from your child's diet, you're not done. Now, under the guidance of your child's health-care provider, you may need to add or supplement nutrients to replace those you've removed, or ones your child was missing before you started. Supplementation can benefit some kids on the autism spectrum; a 2005 study found sleep and digestion improved in autistic children taking a multivitamin supplement.

Magnesium, B vitamins, zinc, omega-3 fatty acids, and probiotics are often used and recommended, but parents shouldn't supplement without consulting a nutritionist or dietitian, Bain says, because taking too much of one nutrient can impact others. (For example, excess magnesium can lead to diarrhea, which could reduce absorption of other vital nutrients.)

"Nutrients don't work in isolation," she notes, and each child's nutritional blueprint is unique.

Another wrinkle: Children with neurological disorders often have sensitive stomachs — those with autism can be prone to gastrointestinal distress and constipation — and they can be intensely picky eaters, Hurley says. In other words, you can't simply tell a child to eat a banana or a plate of spinach and expect it to happen. That makes solving nutritional challenges a two-steps-forward, one-step-back dance for many families, and it's why vitamin supplements are sometimes needed, at least at first.

Nutritional therapy for spectrum disorders doesn't have to complicate families' lives or promote expensive fad diets, says Ferdico. It's simply one facet of a comprehensive, whole-child care plan.

"If a child has stomach pain and isn't digesting food properly or is so picky that they're not getting what they need, it's going to affect cognition and behavior," Ferdico says. "If you try other therapies without also looking at nutrition, you're not using all the tools you can use. And we owe it to these kids to use every tool we have."

### Where to start

A pediatrician or naturopathic physician can order a simple blood test to check for nutritional deficiencies such as low iron, zinc, or magnesium. Parents who suspect food sensitivity in their child can ask a pediatric nutritionist or naturopathic physician about immunoglobulin G food allergy testing. This blood test can identify food sensitivities to pinpoint the best dietary candidates for elimination from your child's plate.

*Malia Jacobson is a nationally published sleep and health journalist and author of "Sleep Tight, Every Night: Helping Toddlers and Preschoolers Sleep Well Without Tears, Tricks, or Tirades."*

# The myth of the 'impossible child'

How misdiagnosis can  
keep kids from reaching  
their potential

BY JOEL H. WARSHOWSKY

**C**hildren diagnosed with a behavior disorder can be very misunderstood by adults around them. Their teachers and parents often label them "impossible children."

Attention deficit disorder, attention deficit disorder hyperactivity, learning disabilities, oppositional defiant disorder, conduct disorder, dyslexia, and central auditory processing disorder are a few of the diagnoses that have been diagnosed in these children. Typically, the child's pediatrician, psychiatrist, or neurologist routinely prescribe Ritalin, Concerta, Adderall, or Prozac to create order and quiet in a child's behavior.

Understandably, professionals are pressured to find answers for these children with learning and behavior disorders who often tend to be disruptive in nature. The school system and individual teachers are pressured as well to create an environment where these children labeled as lazy, wild, a dreamer, difficult, stupid, or uncooperative can become social and functional within a mainstream classroom situation.

Medication may promote a child's behavior to be more predictable and may even appear



If the underlying problems these children are experiencing are not medical in nature, these children will ultimately begin a downward spiral, lowering their self-confidence and subsequent self-esteem.

to cause a child to focus better on a particular task; however, if the underlying problems these children are experiencing are not medical in nature, these children will ultimately begin a downward spiral, lowering their self-confidence and subsequent self-esteem. The medication he takes may cause a child to not disrupt his classroom activities, but he continues to know within himself that something isn't right.

### **Visual disorders**

With the knowledge that upwards of 80 percent of information processing comes from vision, a solution for your child's learning difficulty can come to light.

Behavioral vision disorders commonly affect a child's ability to process visual information. Difficulty converging and coordinating their eyes inward, focusing in order to identify, along with tracking inefficiency, can cause children to see double, have blurry vision, or lose their place and skip lines while they are reading.

Neglecting the possibility of visual dysfunction causing learning difficulty in children can potentially lower self-esteem and ultimately lead children to develop a failure syndrome. Children that experience a failure syndrome believe that not being able to perform a particular task results from them being a failure. Rather than being inaccurate with a task, they feel that they are the inaccuracy. These children may

consider lowered professional expectations, achieving a vocation or a profession lower than their actual potential. Early and appropriate intervention can change a child's course of development from a lack of ability and frustration to an encouraged belief in himself.

Parents may feel a false sense of security by taking their child to a conventional eye doctor who says that their child's eyes are fine because they see 20-20. Seeing clearly is important, but your child's visual concerns may have nothing to do with eyesight and everything to do with inefficient and inaccurate eye coordination, focusing, and tracking ability.

### **Giving kids every chance**

Parents, teachers, and school administrators have the power to advocate for our children. If we know that symptoms of these "impossible children" mimic behavioral vision dysfunction, we can give children the opportunity to explore appropriate evaluation and treatment strategies and a future that creates opportunity and success in their self-discovery.

If you do, you might be a parent that says, "Guess what? My child just picked up a book to read all by himself."

*Dr. Joel H. Warshowsky is an associate clinical professor emeritus and founding chief of pediatrics at SUNY College of Optometry, where he taught in vision therapy and pediatrics for 37 years. He is the author of "How Behavioral Optometry Can Unlock Your Child's Potential," and president of Vision From The Heart, a private practice comprised of three offices located in Roslyn, Long Island; Ringwood, New Jersey; and Riverdale, New York.*

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# Difficult call

Is she acting out because of special needs, or just because she's a kid? First, find the behavior's source

BY DR. MARCIE BEIGEL

**Y**our role as a parent is a balancing act. You're on the tightrope juggling school vs. home, nutrition vs. treats, play vs. discipline.

And you have something else to manage that many parents don't understand: being a parent of a child vs. being a parent of a child with special needs.

Sometimes your child has an undesired behavior because, well, she's a kid.

But other times, it's based on her developmental challenges.

There is never an ex-

cuse for challenging behavior, but the difference in origin will affect how you address your child.

It's a delicate balance! Let's outline a set of guidelines to assist in making the determination. Having this knowledge can help you to parent more effectively.

**Consider the location.** Does your child have problem behavior in some locations and not others? This is an indicator that

the problem behavior is actu-

ally a behavior and not connected to her special needs. If your child is an angel at school and a devil at home, consider what may be possible at home. Speak with the classroom teachers to get some ideas of how they address problem behaviors.

**To whom is the behavior directed?** Differentiation of people is another way to identify the root cause of challenges. Does your child eat a great lunch with your babysitter but will not take even one bite with you? Ask your babysitter exactly what she's doing during their mealtime and integrate that into your own mealtime.

**Think about basic human needs.** Being tired or hungry will exaggerate problem behavior and make it worse. If you're noticing the start to problem behavior, this might be a great time to offer a snack. Offering food at the onset could provide the fuel your child needs and the piece of mind you want.

When you know your small being's actions are strictly from behavioral causes, then the need to address it becomes clearer. Your role as a parent becomes easier with clarity. You will know what

you need to address and what you may decide to let go.

Each child is unique and each situation may have its own root cause. Consider your family and see how you can apply these guidelines to your small being.

*For more resources to help you navigate behavior, consider going over to the special page exclusively for NY Parenting's Special Child at [bit.ly/vid-spneeds](http://bit.ly/vid-spneeds).*

*Dr. Marcie Beigel is a behavioral therapist based in Brooklyn. She has worked with thousands of families for more than 15 years and has condensed her observations into her practice and programs. For more on her, visit [www.BehaviorAndBeyond.net](http://www.BehaviorAndBeyond.net).*



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# Find support online

## Five ways Facebook groups are vital for parents of special-needs kids

BY DANIELLE SULLIVAN

**S**upport is incredibly important for parents of children with special needs, and there is a multitude of it available in the form of internet support groups. All you have to do is place your child's condition in the Facebook search bar and click on "groups." Be sure to check out how each group interacts, if questions receive a good amount of answers, and that the interaction is every hour or so (as opposed to a new post every other week). You want to select a group that posts regularly, is managed by a strong group leader (to weed out off-topic posts), and is supportive. You can also always join a few groups and leave the ones that you find unhelpful.

Here are five ways Facebook support groups supply fundamental encouragement, knowledge, and understanding:

### Instant understanding

Your mom, sister, or friend might not always understand what your child or you are going through, but another parent facing the same situation and frightening diagnosis can.

Many parents who join online support groups are astonished when they read post after post detailing what could be a day in their own life. It is an unbelievable feeling to

know that you are not alone, and people really do understand.

### Vital information

There is no better detective than a mother with a sick or debilitated child. Even doctors that specialize in your child's condition do not know the daily struggles that your child faces, nor do they know the special tricks that can work for getting and keeping your child happy despite her circumstance.

Even more importantly, there are many times when your child may be encountering a late-night symptom, which is not an emergency, but it's keeping you wide awake. It is often then that a parent will post a question and get flooded with answers for what other parents did in the same situation, or what helped alleviate the child's distress.

### Medical references

In addition, there is also no one else who can recommend a doctor, hospital, or therapist in your area who effectively treats your child's condition other than a parent who has visited that doctor or practice. The last thing that a parent or child needs is visiting a doctor who does not know about your child's condition, does not effectively treat it, or is condescending and a hindrance

rather than a help. (And as special-needs parents know, far too many of these exist!)

Facebook groups often have a list, categorized by state, of top doctors and hospitals for your child's condition.

### Privacy

The Facebook groups are typically closed groups online, so only users in that group can read posts, which means that people on your friends' list cannot view them (unless they are members of the same group).

That is an important component, because it really allows parents to share information and feelings without judgment from in-laws, family, and friends who simply don't understand. It also allows a free space to vent.

### Making friends

Having a child with special needs requires a fierce fortitude and an often overwhelming amount of time and focus, all of which can leave a mom or dad feeling isolated and alone. Parenting can pose a challenge to meeting new friends and socializing, but special-needs parenting is an even larger trial. Facebook groups allow a safe place for a group of moms and dads who can discuss, vent, laugh, cry, and relate to each other on a whole new level.

*Danielle Sullivan, a mom of three, is a parenting writer and editor. Born and bred in Brooklyn, she specializes in health, lifestyle, and pets, and also writes for ASPCA Parents and Disney's Babble.com. Find Sullivan on her blog, Some Puppy To Love.*

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# Pushing past disabilities to success

## Four inspirational young people tell their stories

BY DAVE PAONE

**I**t can be frustrating and heartbreaking for parents when their children are struggling in school. Here, four young people who have floundered in school — battling everything from severe depression to learning disabilities — courageously look back on their early childhoods and share their stories of hardship — and hope.

Alex Lemus, Jennifer Hoffman, Jack Pontillo, and Emily Takacs relate how they were able to own and overcome their challenges and even enroll and succeed in college. These students are not alone in not being able to get the help they needed in our schools' special education programs. Their inspirational perseverance can't help but inspire other young people — and the families that love them — not to give up on their aspirations for a college degree.

### Alex

Right from the beginning, Alex had a hard time paying attention and focusing in school.

At 8 years old, his teacher recommended he see the school psychiatrist, who suggested that he may have attention deficit hyperactivity disorder and oppositional de-

fiance disorder, which involves problems with authority.

Middle school was torture.

"I was picked on horribly," he said. "Seventh grade, eighth grade, really picked on bad. It was atrocious. I'd get punched in the head and called 'a faggot.' I was singled out, because I was different than those other kids, so I was an easy target to be bullied."

His high school years were full of what he called "impulsive mistakes," such as stealing bus passes, fights, and acting out in class, which often led to referrals and hours spent sitting in in-school suspension.

At 15, he was on a series of anxiety medications.

"They put me on Zoloft, then they put me on Celexa, then they put me on Wellbutrin, then they put me on Strattera. None of them worked."

Regardless of these disorders, his intelligence level was fairly high, because he excelled in his computer video production class with grades in the 90s.

### Jennifer

For Jennifer, major depression and anxiety started at age 12. This led to crying uncontrollably in school and cutting herself. (She once sliced her face with a razor blade.)

At 13, she had her first suicide attempt. By ninth grade, she was admitted several times to Four Winds psychiatric hospital in Westchester where she spent most of the school year.

In a similar fashion to Alex, her intelligence level was high. In seventh grade, she was in an accelerated math class and in ninth grade, she was taking 10th grade classes.

### Jack

Jack's signs of his nervousness, anxiety, and slight depression started around age 4. He was in special education as early as pre-K. This was followed by special education classes in the morning and then mainstream classes in the afternoon through second grade.

"Whenever I couldn't understand something, I would start to get upset. I used to cry a lot, because I didn't understand things. I would get mad easily."

In seventh grade, Jack had a devastating and life-changing incident. He had done his math homework incorrectly, and the teacher held his paper up to the class, and they all laughed.

"That actually made me give up on math in middle school, which messed me over in



high school," he said.

He found himself in the slower-track math class for the next five years.

### **Emily**

In third grade, Emily was diagnosed with a "moderate-to-severe" case of dyslexia. This means her brain would move numbers, letters, and words around when she read them. This resulted in little-to-no understanding of what she read or what she was doing. Additionally, her handwriting was illegible, even to herself.

After being diagnosed, she was given intensive reading therapy. It didn't work.

"In fourth grade, they tried a slew of different things," she said. This included speech therapy, a separate location for tests, the tests read to her, and extra time for the tests. This carried out through high school.

In middle school, she was put in a resource room with other special education students.

While all of these services helped a great deal, she was far from where she could and wanted to be.

### **Effective strategies**

At some point, each of these students realized the only way he was going to beat his problem was by making at least one major change. In some cases, the change was the direct opposite of what the system was promoting all along.

In Alex's case, the answer was medita-

tion, not medication. Contemplation and reflection did the job that prescriptions couldn't.

Another change that happened from within was developing a relationship with his teachers on a personal level.

"Up until then, it was just, 'Here I am, this is the teacher who's speaking at me, giving me something.' I didn't look at the teacher as an individual," he said. "I started to form relationships with people, and see that my teachers are full people. I can have a discussion with my teacher. If there's something that I missed, because I was distracted, I can ask, and I'm not going to be told I was stupid."

Additionally, he found his passion in environmental studies, which is his major at State University of New York Ulster.

"I just found my passion, and I grabbed it, and did everything I could to make it happen," he said.

Jennifer's story parallels Alex's.

"From the time that I was 13 until about 17 years old, I was on medications constantly," she said. "I can't even list them all for you."

At one point, she was so overmedicated she was sleeping all the time, slurring her speech, and had tremors in her hands.

At 17, she decided to wean herself off the medications, and her mother took her to a homeopathic-naturopathic doctor, because she had enough of traditional doctors doing not much more than prescribing endless medications.

This alternative doctor suggested Jennifer get specific tests that the medical doctors weren't using. The results indicated a thyroid problem.

"My antibodies were out of whack," she said. Her numbers were extremely high when they needed to be much lower.

Part of the remedy for this was a change in diet. Jennifer had already become a vegetarian at age 9 and then a vegan at age 12, of her own accord.

But it was going gluten-free, soy-free, and goitrogen-free that did the trick. (Goitrogenic foods may create an unwanted growth on the thyroid gland.) Jennifer made this decision with the input of the alternative doctor.

Over time, her antibodies' numbers have dropped considerably. Jennifer believes the diet changes — plus meditation and yoga — have been major factors in keeping her problem in check, or at least close to it.

"Whenever I'm going to a guided-meditation or yoga class is when I feel the healthiest," she said. "Those were the moments that even when I was so depressed, that I felt connected."

"In fourth grade, I had an epiphany," said Jack. He had recently received his report card and thought, "These grades are going to affect me in the future."

"So from then on out, I tried to do better in school," he said. By high school, he was taking the usual science classes (including

*Continued on following page*

physics) and did quite well in them.

Emily came to the conclusion at 15 that if she wanted "to get anywhere in life" she needed to be a "self advocate" by speaking up and saying what she actually needs as opposed to teachers telling her what she needs.

She began getting these things, such as access to a word processor, so everyone could read what she wrote. It seems no one had thought of this solution before, or if someone did, it was never presented, because "the district has to pay out for it."

She also realized she needed to put in the hours of studying necessary for good grades.

"You set your mind to something, and you tell yourself, no matter how hard it is, you're going to do it."

After she spoke up and applied herself, those zeros on assignments turned into As and Bs.

## Help from Trio

While the self-motivated changes were a gigantic step forward, these students still need help from others. This help comes in the form of Trio Support Services. The name refers to (originally three, now eight) federal programs to increase access to higher education for economically disadvantaged students. The services are provided to colleges throughout the country through the US Department of Education.

In its mission statement, Trio says it's there "to provide support toward completion of a post-secondary education to individuals who are traditionally under-represented because of income, family education, or disability."

One is also eligible to participate if he or she is a first-generation college student.

Trio began 50 years ago as part of President Johnson's "Great Society." This was a set of programs with the goal to eliminate poverty and racial injustice in the United States. Three of these programs addressed education and were passed through the Higher Education Act of 1965. They eventually became known as Trio.

Jennifer is a 20-year-old, second-year, visual and fine arts major at the New York State University in Ulster. While she's well on the road to recovery, she's not completely out of the woods. On occasion, she has an emotional breakdown, and it can (and does) happen at school. In her two years at Ulster, she's had about 10.

"Trio helps me get through it," she said.

Jennifer has two counselors at school, Deb Heppner and Stephanie Kroon, and if they're not available, she can speak to any counselor in the Student Support Services office.

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At some point, each of these students realized the only way he was going to beat his problem was by making at least one major change. In some cases, the change was the direct opposite of what the system was promoting all along.

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"They're the ones that give me the support when I'm crying," she said. She credits them as "the only reason" she's "able to even go to college."

Ulster is a two-year school and should Jennifer want to attend a four-year college to complete her Bachelors, such as School of Visual Arts in New York City, she would find the lack of Trio there a "huge" problem. Big enough where attending may not be an option.

"I'm not going to be as lucky in the future, and I realize that," she said.

Jack calls the Trio office a "safe zone" where he can come in and do his work, and his counselor, Stephanie, helps him get over any nervousness he may be feeling on a given day.

While at Ulster, Emily met with Trio counselor Kristin Flynn every two weeks to work out a plan.

"It was nice to have someone to talk to who knew about my problem and knew how to help me with it," she said. "It's easy to be honest with her, because she doesn't judge."

"They do it all here," said Alex. "They have their own scholarship foundation for kids like us. Last semester I got a \$1,400 scholarship, and I'm in the running again."

## Success stories

Alex has a grade-point average of 3.4. He's the vice president of the Environmental Club at State University of New York Ulster. He's part of the Environmental Advisory Council at Karma Triyana Dharmachakra, the Buddhist monastery in Woodstock where he practices. He's engaged, and he has a 19-month-old daughter.

Jennifer hasn't self-mutilated since 2010. The desire to commit suicide "has dwindled down to the strength of a weak flame." On her latest report card, she received three As and a B.

Jack's current grade-point average is 3.31. He's been accepted to State University of New York College of Environmental Science and Forestry and will start classes in the Fall. (He's an environmental studies major as well and is friends with Alex.)

After making the Dean's List, Emily graduated from Ulster in the fall of 2014 and is now a junior at State University of New York New Paltz as a special education major with a concentration in geology. This will enable her to become an Earth science teacher.

Her decision to become a special ed teacher is a direct result of her own struggles with her disability.

"I think being special ed and being raised in the special ed system, you understand there are a lot of flaws," she said. "The systems aren't created by people who have these needs; they're created by politicians and people with PhDs in the field. They're not created by people with special-ed needs. I think that needs to change."

Ashley has a bachelor's in psychology and a masters in early childhood special education. She has two New York State teaching certificates, one for general education, birth through sixth grade, and one for teaching students with disabilities, also birth through sixth grade.

Like Emily, Ashley believes special-ed students make better special-ed teachers.

"I believe my disability to be a strength, especially as a special educator, because I have a very personal perspective on what it's like to be different in school," she said. "I think I can be a positive role model not only on students with special needs but also on parents who might be hesitant to help their children explore his or her full potential."

She's currently a substitute teacher at four school districts on Long Island.

Although Trio has been around for 50 years, it's not as permanent as it may seem. Every five years, a college needs to reapply for its grant. Ulster submitted its application this past February.

"The Department of Education is anticipating around 1,600 applications, and they can award about 1,000 programs," said Todd Zeff, director of the disabilities program at Ulster.

If they say no, the department disappears.

Additionally, the federal government allows a maximum of 100 students per year to be serviced through a school's program.

"This college has over 200 students with disabilities," said Todd. "So once we fill up our roster with students with disabilities, we will then put them on our waiting list and see if the other Trio program can take them."

*Originally printed in Campus News, a college paper.*



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# Baby, talk!

## Strategies to enhance speech and language development for tots

BY THOMAS DAUS

The first years of life are a pivotal, intensive, yet very exciting time for learning and language acquisition. The time between birth and 5 years of age allows for a wide array of learning opportunities. During the beginning years of life, a child has a tremendous amount of plasticity. This term refers to the quality of being shaped or molded, and it is the duty of parents or caregivers to provide language learning in all realms.

There is never a wrong time to provide language stimulation for young children. Parents or caregivers can be taught specific learning strategies to be utilized during play, bath, and feeding times. It is pivotal to always set aside specific times, throughout the day, to allow for structured and unstructured learning opportunities.

Speech-language pathologists have a wide array of therapy tools to use within this age range. Within the infant and toddler arena, we can utilize manipulatives (i.e. Mr. Potato Head, Jack-in-the-box, Ring Stacker, Shape Sorter, train, boat, truck, windups, etc), household items (i.e. chair, table, food utensils), pictures of family members, and also the opportunity to practice everyday routines within one's home.

When will my child start to talk? This is usually the first question that speech-language pathologist's specializing in early

intervention are asked.

My analogous response is compared to constructing a new home: let us visualize a home with a basement, first, and second floors. With comparison to speech and language development, the basement can be equated to an infant or toddler's overall attention level, and once this is established we can then move along in therapy to a focus on auditory comprehension; the first floor of the home.

Learning is always a compounded effort. Each and every nuance learned can be scaffold to chain and chunk more information together.

Verbal expression (i.e. words, phrases) can only develop when attention and understanding skills are solidified; which is compared with the completion of the second floor of a home.

Speech-language pathologists' main focuses are with that of joint and sustained attention, auditory comprehension (identification of basic body parts, shapes, household items, pictures of family members, primary colors, and also the following of simple, one step commands).

Once a very strong understanding, constant familiarity, and interest within specific tasks or activities are developed, then verbal expression will typically be exhibited. Infants and toddlers usually produce their first words, such as "mama," "daddy," "ball," "bottle," because they have a strong interest, intentionality, and purpose to have such words under-

stood by their parents within their home environments.

A child's learning environment is a haven for language growth, and is filled with an abundance of opportunities. Sometimes parents may have too many distractions with a multitude of toys all over the home. This is not such a good idea; hence it creates an overwhelming situation for many children.

If a child is exposed to a limited amount of toys, it allows the parents to practice specific tasks with the same item.

Only after specific goals are met, should another toy be switched. I feel that no more than five toys should be left out at any one particular time.

The rotation of toys can be done, but parents should use their judgment as to when this should be done. I suggest every week, adding a new toy to the existing group of items.

Always remember that in order to elicit the attention from our infants and toddlers, we need to start off with some very visually, and perhaps audible toys. This is why cause-and-effect toys, such as pop-up toys, and jack-in-the-boxes, are utilized as starter toys during early intervention. When selecting toys, it is suggested to look for visually stimulating, multi-colored, and lively, appearing toys. Developmental charts may accompany guidelines on which types of toys to select.

Speech-language pathologists provide on-going assessment of the children on their caseloads. Language growth, within the infant and toddler age range, is quite different from that of school-aged children. With a school-aged child, there are higher demands, and newly taught information is expected to be learned and



The early years of language development is a fascinating and dynamic learning time. A toddler is learning absorbent, and is such an exciting and fun time for parents, too.

absorbed on a daily basis through homework assignments. With infants and toddlers, it is a different assessment.

We expect a child to acquisition in a more lengthily time frame. Typically, on a quarterly basis, a speech-language pathologist will review specific progress of children to their parents, providing norm referenced or criterion referenced developmental improvements.

The early years of language development is a fascinating and dynamic learning time. A toddler is learning absorbent,

and is such an exciting and fun time for parents, too.

It is important for parents to always keep in mind that each and every child, and also accompanying siblings, are not exactly alike; and unique in their own ways. It is strongly discouraged to be in the mind-set of comparing other children of a similar age, or older siblings. Your children are only this age once, and it is important to enjoy every moment with them.

Worrying about possible speech and

language delays should be compartmentalized, and fun learning activities, and the creation of long-lasting memories, are best to replace such worrisome moments.

*Thomas Daus is a licensed New York State Speech-Language Pathologist, and also holds certification through the American Speech and Language Hearing Association. He has close to 20 years of experience, and is truly dedicated towards making a positive impact in the lives of his clients. For further information, feel free to view his website at speakingfromtheheart.org.*

# What they need

Does your child require special services in school?

BY DANIELLE SULLIVAN

**H**ave you noticed that when you search for the term “special needs,” the main focus tends to be typically on autism and attention deficit hyperactivity disorder? Those conditions certainly deserve a concentrated focus and increased awareness, but there are so many special needs that extend well beyond those two widely known areas. And there are so many parents with children who are sincerely desperate for information and support for their child’s specific special needs.

Remember, autism was not always widely known; it was through the huge effort of the many moms and dads, doctors and teachers, researchers and advocates, who stood up and demanded that more research be done, more money be allocated for, and more information become available for children with autism.

The same needs to be done for the many diseases, conditions, and afflictions of all children so every child can get the services, treatment, and accommodations necessary for her particular circumstance.

## What is a special need?

A special need is required when a diagnosis in a child requires special assistance in order to help that child be the best she



can be, physically, mentally, and emotionally. There are medical issues (chronic and congenital), developmental delays, behavioral issues, mental issues, and more. It is impossible to list all, but here are just some special-need conditions (some you may not have heard of) that warrant treatment and services at home, in school, and beyond:

**Medical-chronic:** Diabetes, thyroid disease (such as Hashimoto's Disease, Graves' Disease) and other endocrine disorders, allergies, rheumatoid arthritis, fibromyalgia, Ehlers-Danlos syndrome (a connective tissue disorder), Postural Orthostatic Tachycardia Syndrome (which mainly affects both cardiovascular and neurologic systems, but can affect gastrointestinal and other systems).

**Medical-congenital:** auditory and visual issues.

**Developmental delays:** speech and social issues.

**Behavioral and mental:** Pediatric Acute-onset Neuropsychiatric Syndrome and Pediatric autoimmune neuropsychiatric disorders associated with Streptococcal infections (which stems from a medical issue but affects behavior), anxiety, depression, and obsessive-compulsive disorder.

It's important to keep in mind that medical issues sometimes present as behavioral problems because the child may be experiencing physical and debilitating symptoms that she cannot effectively communicate.

encaging physical and debilitating symptoms that she cannot effectively communicate.

## What to request at school

If your child is living with a diagnosed disability, she is entitled to receive help at school. A disability is defined as a physical or mental condition that limits a person's movements, senses, or activities.

A 504 Plan is often used for medical needs. It helps children whose medical issues affect their learning, but do not require specialized learning programs. For example, a parent of a child with diabetes may request that the child has free access to the bathroom, can leave the classroom for blood sugar checks, can drink water freely in class, etc. A doctor, the parents, and the school typically create a 504 for the individual child based on her specific needs. Once filled out, the school is supposed to meet with the family to outline exactly what will be done.

An individualized education plan is a special education plan for what a child with learning disabilities will receive, and provides individualized special education and related services to meet the needs of the particular child.

## Advocate!

It cannot be said enough: if your child requires special services, you must advocate for her. In many instances, the services will not come easily to you. Some schools will do their best to accommodate your child, but many will not.

It is a sad truth. Even when parents do advocate for their child, they are often met with opposition, whether it is due to a staff that is uninformed or simply unwilling to put in the extra effort. But it is not legal for them to do so.

The Individuals with Disabilities Education Act is a federal law, which ensures that students with a disability are provided with Free Appropriate Public Education, which is tailored to their individual needs. It also gives parents the right to be part of their child's education team.

It is never fun to confront an unwilling administration or teacher, but as a parent advocating for a child who cannot fight for herself, it has to be done. Stick to the facts, and date and record every meeting, phone call, and e-mail. Learn what your rights are and then fight like hell.

*Danielle Sullivan, a mom of three, is a parenting writer and editor. Born and bred in Brooklyn, she specializes in health, lifestyle, and pets, and also writes for ASPCA Parents and Disney's Babble.com. Find Sullivan on her blog, Some Puppy To Love.*



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# Period peace

## Explaining menstruation to a special-needs daughter

BY JAMIE LOBER

**I**nforming your special-needs daughter about one of the central concepts in women's healthcare, menstruation, can be successfully done in the same manner as you would with a child without special needs. In order for your daughter to feel as comfortable as possible, you want to have the conversation before the start of her first period. The timing of your conversation is important as well as your disposition, as you should be sensitive, empathetic, and understanding. You should also be informed yourself so you are ready to respond to any questions or concerns she may have. Maintaining open lines of communication during this major milestone is important.

Every adolescent approaches puberty differently, some with a more positive attitude toward the changes than others. Starting your menstrual period is one of the significant changes that occur, which is essentially when hormones prepare your body each month for the possibility of pregnancy. It is important that your child knows what to expect before it happens, so she is not shocked or overwhelmed by the experience.

"We usually recommend that parents start talking to their kid somewhere around age 10, because the average period for most young women starts at around 10-and-a-half, which is a little bit earlier than it used to be," said Dr. Raquel Dardik, an obstetrician and gynecologist at NYU Langone Medical Center.

There is no right way to have the discussion, but you want to cover the basics.

"You should keep it very factual, explaining that they will have some bleeding, and that it is normal, as well as that the bleeding may or may not be regular in the beginning," said Dardik. You should tell her that sometimes the period happens every month, but sometimes it is not on a scheduled basis.

"It can be disruptive for girls of that age not knowing when they are getting their period," said Dardik.

Some girls are bothered by the discomfort, while others handle it okay.

"You should explain what cramps feel like and that they are part of the normal process and that there are a lot of things we can do to manage it," said Dardik.

Often, girls are advised to take non-steroidal anti-inflammatory drugs like Motrin, because they are an easy first line remedy. The key is to take it as soon as the cramps come, because it can be harder to control if you wait.

"The heating pad is an old standby that does work," said Dardik. Everyone has a different pain threshold and is affected differently.

Address the issue of pads versus tampons and that it is about personal preference.

"A lot of girls have difficulty figuring out how to insert a tampon, whether it is anxiety-based or a lack of understanding the anatomy and mechanics of how to put it in and take it out," said Dardik.

Girls will inquire as to how long the bleeding lasts — and that can vary.

"A normal cycle can be between two or seven days," said Dardik. The first few days will likely be heavier and then the blood tends to lessen.

"They may get it light one month, not get it another month, and then get it heavy, because the hormones have not established the pattern yet and are not predictable," said Dardik.

Some girls want to talk about moodiness and irritability that can be associated with

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It is important that your child knows what to expect before it happens, so she is not shocked or overwhelmed by the experience.

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the period. Often times going through various emotions can just be part of being a teenager, so it can be tough to distinguish the difference. If your child talks about mood changes, you want to be reassuring that there is nothing wrong with them. If your child asks questions about periods or what is happening in the body, be prepared with honest answers.

"I talk about contraception, and say they are releasing an egg and now are fertile and can get pregnant," said Dardik.

Know that your daughter does not need to see a gynecologist just because she has had her first period.

"The recommendation to see a gynecologist is when you are sexually active or 21, unless you are having a problem," said Dardik. If you are uncomfortable broaching

the topic of periods, it may be a good idea to have a doctor hold the discussion.

"It can be stressful for girls to see a gynecologist, and they get nervous, so it is important for them to realize that they may not need an exam but rather just someone more familiar with the gynecologic part of their health than their pediatrician," said Dardik.

Just as most people find they share more similarities than differences, there is nothing unique about periods to the special needs population.

"The biology is exactly the same and the concerns are the same, such as what is happening and whether it is normal, whether they are special needs or not," said Dardik.

While it can be uncomfortable for parents to talk about, the conversation should happen.

"Most of the time should be spent explaining that it is a normal process, something they can expect, and part of normal human physiology so there is nothing much we can do about that," said Dardik.

*Jamie Lober, author of "Pink Power" ([www.getpinkpower.com](http://www.getpinkpower.com)), is dedicated to providing information on women's and pediatric health topics. She can be reached at [jamie@getpinkpower.com](mailto:jamie@getpinkpower.com).*

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# What not to say to the parent of a diabetic child

A little education about diabetes can curb hurtful words

BY SUE LEBRETON

**W**hen you interact with a parent whose child has type-1 diabetes, even when your intentions come from the right place, your comments may be hurtful. Your confusion is understandable, as this is a complex disease, and it is different than the type-2 diabetes that is commonly discussed in the media.

To help the conversation flow smoothly when you encounter someone parenting a child with type-1 diabetes, follow the suggestions below:

## **Do not ask how the child got diabetes**

He did not get diabetes from eating too much candy. In many cases there is not even a family history of diabetes.

"These comments hurt, because part of the initial adjustment involved convincing myself that I had not done anything wrong, deliberately, karmically, or genetically that resulted in Max having diabetes," says Michelle MacPhee. "We have found the blame game to be useless in diabetes and in life."

## **Do not ask if he will outgrow this**

Unfortunately, this disease is sometimes called juvenile diabetes. The word "juvenile" implies that a person may outgrow the disease, but that is not possible with diabetes. Until a cure is found, a diagnosis of type-1 diabetes is a life sentence.

## **Please do not share your diabetes horror stories**

The tales of your great aunt Betty and her blindness and amputations are terrifying to hear.

Every parent of a child with type-1 diabetes is well aware of the potential complications. We also know that thanks to advanced treatment options and good blood sugar control, these complications can be minimized or prevented.



## **Do not assume that an insulin pump is a near cure**

The insulin pump is an amazing example of technology. It helps people with diabetes administer insulin, but contrary to popular myth, it does not replace a pancreas. The pump is a device that parents program and reprogram frequently. It is not surgically implanted below the skin but attached via a small tube that is relocated every few days. Children with an insulin pump still prick their fingers multiple times a day to check blood sugar.

## **Please do not comment on what my child is eating**

Remember this is not the type of diabetes your great aunt Betty had when she had to "avoid sweets." This presumptuousness annoys Tracy MacPherson, mom of an 8-year-old daughter with diabetes.

"We have people offer Marin junk food, then another jumps in and says she cannot have it, because she has diabetes." Children with diabetes can eat anything you can eat, but they do need to balance that with insulin.

## **Do not assume the child misses fun things in life due to diabetes**

Parents whose children have type-1 diabetes help them live normal, full lives. People with diabetes have climbed Mount Everest. MacPhee is encouraging her 6-year-old son Max to do whatever he wants despite diabetes.

"Diabetes changes the equation in that he has to work harder and plan better than other kids."

## **Please do not suggest we try the latest 'cure'**

People with type-1 diabetes and the people who love them are emotionally invested in finding a cure. We follow the latest science, and some of us are actively participating in finding a medically sound cure.

*Sue LeBreton is a health and wellness journalist. She has been caring for a child with diabetes for more than six years and programming an insulin pump, often in the middle of the night, for five years.*



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# Does he need a special school?

**Dear Sharon,**

We are trying to make a choice between a special-education school for our mildly delayed 6 year old or put him into an inclusion program in a regular school. If we go the public school route, it would obviously be less costly. However, we're concerned that he will still somehow be comparing himself to the other kids. I was thinking he would benefit from being in an atmosphere with children not on the spectrum.

**Dear parents,**

When making a decision about schools, I often suggest that parents begin by talking to teachers and support people who know their child and can think through a good placement.

It can also help to visit the school choices that are available and picture your son in each.

When looking at a public school setting,



## PARENTS HELPING PARENTS

**SHARON C. PETERS**

consider what it would be like for your child to handle the typically large environment. Also, find out what specific support services the public school could offer, and if you would need to look for supplemental services for your son after school. Ask if the staff has experience with similar students and how they have managed the inevitable comparisons children can make.

When you visit the special-education school, get a sense of your child's potential peer group. Ask the school about the general growth and development of its students and how things can look for children over time without the benefits of a more typical classroom atmosphere. You could even ask to visit the classrooms of the older children to take a look into your son's future.

One of the best ways to get a clear picture of schools is to talk to other parents. Speaking to at least one parent with a special-needs child

in a public school inclusion class and another in a special-education school you are considering can offer a world of specific information. Think of questions you might like to ask these moms and dads, including ones about peer relationships in each setting. If you don't know anyone to talk to, approaching some people in the school playground could be a good place to begin. Parents are invariably happy to support each other when asked.

The stress associated with a school decision is also a factor to consider. Location is one potential cause for concern, as long commutes can take a toll on everyone. Increased financial pressures can also breed tension at home; a strained family is not good for any child.

Some parents I know have opted to try their child in one school with the idea that they could transfer their child if needed. One family I know chose to begin in public school after weighing the economic benefits and getting reassurances from the special-education school that there would be an opening available the following year if the family were interested.

Unfortunately, it is rare — if not impossible — to find a perfect school for any child. Every institution has strengths and weaknesses that parents and children ultimately have to sort through. Sometimes it means supplementing what a school offers with outside resources, while other times, it involves a long commute or sorting out how to expand a child's social network beyond school.

Ultimately, parents have to prioritize all of the factors and settle on the best decision they can. In the end, moms and dads figure out how to make different kinds of environments work for their children. If the negatives in a school ultimately outweigh the positives, then with hard work and persistence, parents are usually able to find a better fit.

Sharon C. Peters is a mother and director of Parents Helping Parents, 669 President St., Brooklyn (718) 638-9444, [www.PHPonline.org](http://www.PHPonline.org).

If you have a question about a challenge in your life (no issue is too big or too small) e-mail it to Dear Sharon at [Family@cnglocal.com](mailto:Family@cnglocal.com).

The logo for MetLife's Center for Special Needs Planning. It features the MetLife logo in its signature font, followed by "Center for Special Needs Planning" in a blue sans-serif font. To the right of the text is a black and white illustration of Snoopy sitting on his cloud, looking down at Woodstock who is perched on his nose.

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# On track

## How to help your kids overcome their learning obstacles this year

BY BARBARA DIANIS

**S**tudents diagnosed with dyslexia, attention deficit disorder, attention deficit hyperactivity disorder, or a learning disability may wonder whether they will be able to graduate from high school and/or collegiate studies. I worried over the same issue myself, because I was diagnosed with dyslexia in a time period when there were very few strategies to help strengthen my study skills. Education was very important to me, and I wanted to graduate from high school and college despite my scholastic challenges. Therefore, I set out to teach myself ways to overcome my learning obstacles and graduate. Through the implementation of systematic step-by-step educational solutions, I, like my students with learning issues, began to master how to overcome learning challenges. Here are some tips to help your special-needs student.

### Plan a homework schedule and study times

The planned work and review times will help your child or teen to help meet the scholastic increase of the new grade level. The plan should include additional study time, even if the child or teen has study halls during his school day. The times can be adjusted on a successful academic achievement basis.

Children and teens entering a higher grade level typically need to upgrade their study skills to help them keep pace with their current curriculum. They benefit from reviewing the notes they take in each of their classes for at least five minutes a day. Reviewing that day's class notes will help children and teens retain more core learning concepts. Consistent review will also assist their ability to access the information on tests. Younger students can benefit from

a few minutes of reviewing concepts such as grammar and phonetic rules.

### Check grades together

A parent and her child or teen benefit from checking the student's grades online together several times a week. Parents who check their child's grades online with the child show the child they care about education. Additionally, if there are downturns in grades or missing assignments, then educational solutions can be applied before difficulty becomes a scholastic issue. The extra accountability generally helps students of all grade levels stay on track throughout the school year. Students of all ages often respond positively to their parents' praise when they see good grades.

### Properly prepare for tests

Tests and quizzes become an important part of the academic experience. Children and teens should add more study and preparation time to the system they used in the previous grade level. Students of all ages benefit from studying for tests and quizzes several days before they are given. Parents can help their student to understand their brains may need time to absorb and readily access the educational concepts they will be tested over. Waiting until the day before a test may not be the best option for students because of the increase in information, which is associated with each new scholastic level.

As soon as a student begins to slide academically, educational solutions should be applied to help him overcome his academic obstacles. All too often, scholastic slides are not addressed early enough, because the parent may feel it is a problem that will correct itself. It is generally better to address the academic difficulty early on before the grades begin to spiral downward. One way to address scholastic slides is to help your child



or teen correct his mistakes on graded assignments that have multiple mistakes on them.

### Make learning fun

Children and teens can make review and drill time into a game show format using flash cards. They can make the flash cards from their study material. When review time is presented in a game show format, students generally are more engaged throughout the learning process. Parents may wish to host a study review time with several students in their child's classes. Students of all grade levels generally enjoy the review process when it is made into a game they are playing with their friends.

Parents can help their child or teen develop an interest in learning by asking their teen to tell them three concepts they learned in their classes each day. Asking the child or



teen to report several core concepts learned in class can also help improve a student's ability to focus in class. In addition, the student typically will report the class to be more interesting and fun.

### **Make extra time for math**

If a child or teen is struggling in the area of math, then pre-learning the mathematical formulas can really help increase the student's understanding of new concepts. Previewing the key concepts from the upcoming lesson can help the student absorb and glean more information from the instructional teaching lesson. Students can pre-learn new math concepts by reading the following day's lesson in their online text or textbook.

Next, the student should make a notation of concepts they don't fully understand. The child or teen should ask the instructor

for further instruction on the more difficult mathematical concepts. In addition, students benefit from reviewing key terms to increase their mathematical vocabulary to improve their understanding during the lectures.

Students of all grade levels and ages who implement educational solutions to help them overcome areas of academic weakness can improve in their educational skills. Generally, children and teenagers will discover over time that they are accurately able to spend less time learning new scholastic concepts as their organizational skills and study habits improve. Students may find learning to be fun as they become capable to meet scholastic challenges and overcome their learning weaknesses.

Another added benefit from implementing educational solutions into their daily study time is they may have a renewed

sense of academic self-esteem, dignity, and a restored positive attitude towards their studies. Parents can see improved grades and scholastic skills by igniting their student's interest and understanding in the subject matter.

*Barbara Dianis, Master of Arts in Education, overcame dyslexia in her own life using self-taught strategies and techniques. As Chief Executive Officer and Founder of Dianis Educational Systems, LLC, she has influenced society to view students with various learning issues as capable students who can overcome their issues if taught properly. In 2010, Dianis was awarded The Biltmore Who's Who VIP in Education and the Executive of the Year award, as well as the Remington Registry of Outstanding Professionals in 2011, for her continued leadership and achievement in the field of education. Learn more at [www.daniseducation.com](http://www.daniseducation.com).*

# 'Eight' is enough

## New book offers many ways to help kids with ADHD

BY JOANNA DELBUONO

**R**emain calm. That's a lot harder than it sounds.

Since our little bundles of joy don't come with instructions, we sometimes rely on other parents and relatives for a bit of advice. Which in turn creates more confusion and more questions.

As a child grows, parents have a tendency to compare their progeny's milestones with the progress of other children, and if there are older siblings, against them as well. When those milestones are not met, the questions start: "What did I do wrong? Why my child? What can I do? Will Jimmy or Janey grow out of it? How will this affect my other children?"

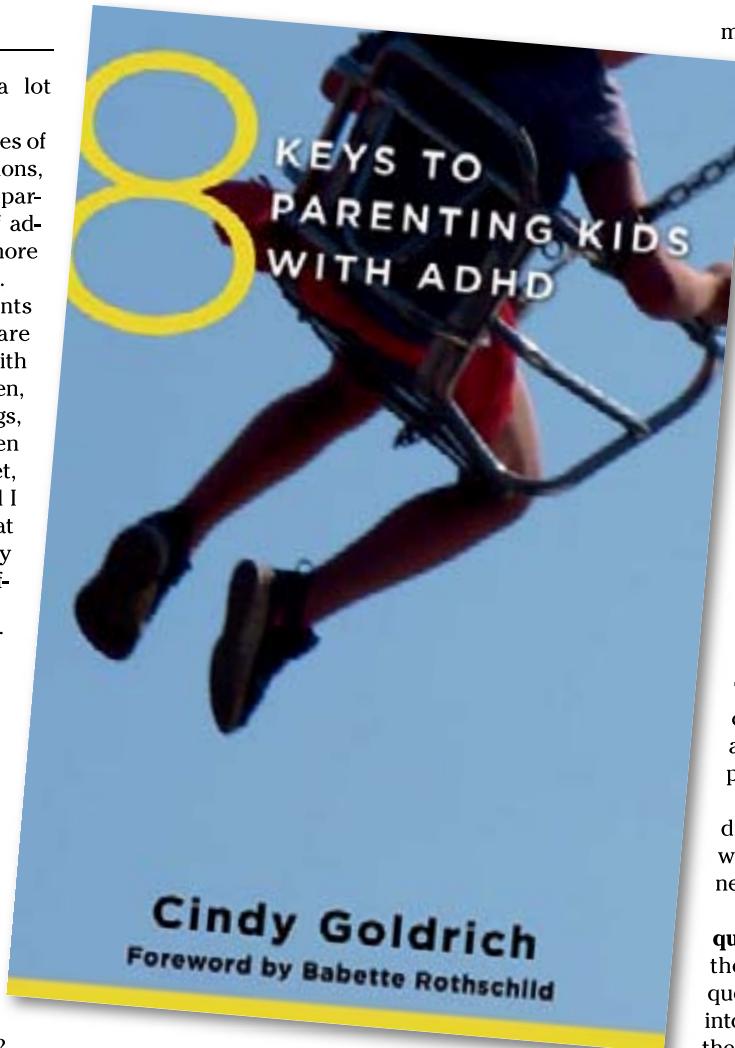
The first step is to take your child to the pediatrician. Who better to answer all of your questions, when it comes to your child's development? Hopefully your pediatrician is up on all the latest advances and techniques used to timely diagnose any and all problems. And if so, she will be able to make a diagnosis at the earliest opportunity.

If your child is diagnosed with having a disability, then what are the steps to take? Get educated. Seek the right specialists and start on the road to provide your child with the best possible treatment plans.

At this stage, parents are often left floundering in a sea of confusion. Information comes from all angles with differing opinions. So who do you trust and who has the best answers?

That is simple; help is here. Author Cindy Goldrich has provided a guide to help parents navigate the murky waters of diagnosing and parenting a child who has ADHD in her new book, "8 Keys to Parenting Children with ADHD."

Goldrich, an ADHD coach and mental



health counselor, has worked with parents, teachers, and service professionals to provide a clear and concise way to handle the everyday challenges facing parents and children with ADHD.

Her most important advice is to **get educated**. Learning is key to getting the help you need when you need it. Step one is outlined in the first chapter about how ADHD impacts behavior, academics, and social skills.

The other seven steps are—

• **Create a calm environment.** Goldrich imparts the importance of calm and why it

matters. She says, "Without calm, no learning can take place." And she also relates how important it is to "strike the right balance between 'control' and 'controlling.'" For some, she adds, "Being calm is a tremendous challenge." Goldrich provides the steps to create calm and achieve a calm home.

- **Strengthen connections.**

How to create a deep, lasting connection, listen to the "song" your child is trying to sing, and offer encouragement.

- **Cultivate good communication skills.** This is the key to the road of cooperation, compliance, and positive action.

- **Teach collaboration.** Parents will learn to accept why the child with ADHD doesn't "always do as they can, should, want, need, etc." This chapter delves into the right combination of reward, motivation, and guidelines to teach the discipline needed to succeed.

- **Be clear and consistent.** Predictability really helps, especially with a child who has ADHD. Parents need to be consistent.

- **Establish meaningful consequences.** All children need to know the value and impact of consequences, especially as the child grows into the teen years. Goldrich provides the steps necessary for parents to lay down the foundation for their children to understand consequences.

- **Choice.** This is the greatest lesson of all, says Goldrich: "Choice is power. It means you can exercise free will, have an opportunity to impact the outcome, and have the responsibility."

This book is an important acquisition for any parent who has a child with ADHD, and it offers invaluable assistance, information, and instructions on how to raise a happy, healthy child.

"8 Keys to Parenting Children with ADHD," by Cindy Goldrich, 204 Pages, WW Norton & Company, \$19.95.

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Services Provided: Free workshops, all ages for visually impaired.

#### Jewish Guild for the Blind

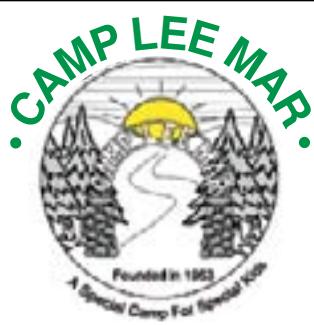
15 West 65th St., New York, NY 10023  
(212) 769-6200 (800) 284-4422

Services Provided: Information and Referral, Individual/Case Advocacy

#### National Association for Parents of Children with Visual Impairments (NAPVI)

c/o New York Institute for Special Education  
999 Pelham Pkwy., Bronx, NY  
(718) 519-7000

*Continued on page 34*



**Camp Lee Mar**, located in the beautiful Pocono Mountains of Pennsylvania, is a coed overnight camp for children and teenagers (from 7 to 21) with mild to moderate developmental challenges.

## A Life Changing Experience!

**2016 Dates:**  
**June 25 – August 12**

Check out our website at  
**www.leemar.com**

- Fun traditional summer camp activities
- Academics
- Speech and language therapy
- Daily living skills
- Older campers enjoy social dancing every week with an end-of-summer "Prom"
- Optional trips during the summer
- Exceptional facilities featuring air conditioned bunks and buildings
- Junior Olympic heated pool
- Caring Nurturing Staff
- Lee Mar L.I.F.E. Program Living Independently Functional Education



**64th Season!**

**Winter Office**  
**Camp Lee Mar**  
**Ph:** 215-658-1708  
**Fax:** 215-658-1710  
**Email:** ari@leemar.com  
**Like us on Facebook**



## EXPERT HELP FOR CHILDREN WITH AUTISM

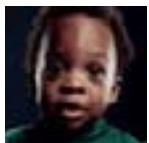
Comprehensive, flexible, and individualized home based and community ABA therapy.

Office based diagnostic evaluations & developmental assessments.

Serving families in their homes in all NYC boroughs and Westchester with 3 Convenient office locations in Brooklyn, Bronx and Manhattan

An in-network partner with most major insurances. Private pay or school based SETTS services also available.

Now accepting new referrals.



**Applied Behavioral Interventions**  
[abisvc.com](http://abisvc.com)  
(646) 666-3088  
[intake@abisvc.com](mailto:intake@abisvc.com)

**LEAKE AND WATTS SERVICES, INC.**



## Preschool Special Education Programs

All programs are approved/licensed by the New York State Education Department, and either the Westchester Dept. of Health & Office of Children and Family Services, or the NYC Department of Health and NYC Department of Education

### • **DR. KATHARINE DODGE BROWNELL SCHOOL:**

Special class in an integrated setting, Head Start, Universal Pre-K  
450 Castle Hill Avenue, Bronx, NY 10473  
**718-430-7938**

### • **MARION AND GEORGE AMES EARLY CHILDHOOD LEARNING CENTER:**

Special class in an integrated setting, UPK, Extended Day/Year child care services  
463 Hawthorne Avenue, Yonkers, NY 10705  
**914-375-8820**

### • **CHILDREN'S LEARNING CENTER:**

Special class with individualized instructional programming to students presenting on PDD/Autism Spectrum  
1751 Park Avenue, 2nd Fl, New York, NY 10045  
**646-774-3115**

## Our Preschool Special Education Programs provide:

- **Monolingual & Bilingual Multidisciplinary Evaluations (Ames & Brownell Locations)**
- **NYS Certified Teachers and Assistants**
- **Developmentally Appropriate & Individualized Learning Activities**
- **Occupational, Physical & Speech Therapy, Counseling**
- **Nutritious Breakfast and Lunch**
- **Transportation (provided by school district)**
- **Outdoor Play Area/Air Conditioned Classrooms**

For more information please contact any of our programs directly or visit our website:

**leakeandwatts.org**

# New York Special Needs

## DIRECTORY

*Continued from page 32*

[www.familyconnect.org](http://www.familyconnect.org)  
[jaynycapvi@aol.com](mailto:jaynycapvi@aol.com)

Services Provided: online forum, support group for parents with visually impaired children.

### Parents of Blind Children (National Federation of the Blind)

471 63rd St., Brooklyn, NY 11220  
(718) 567-7821 • (212) 222-1705

Individuals Served: Visual Impairments

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy, Legal Advocacy

### The Lighthouse National Center for Vision and Child Development

111 East 59th St.  
New York, NY 10022  
(800) 829-0500  
TTY/TDD: (212) 821-9713  
[www.lighthouse.org](http://www.lighthouse.org)  
Email: [info@lighthouse.org](mailto:info@lighthouse.org)

Services Provided: Community Education, Information and Referral.

Other: Vision rehabilitation, low vision services, professional, Continuing education

## CAMPS

### Camp Acorn

P.O. Box 1383  
Paramus, NJ 07653  
(973) 471-2911 or [www.campacorn.org](http://www.campacorn.org)

### Camp Akeela

3 New King St.  
White Plains, NY 20604  
(868) 680-4744 or [www.campakeela.com](http://www.campakeela.com)

### Camp Chatterbox

Children's Specialized Hospital  
150 New Providence Rd.  
Mountainside, NJ 07092  
(908) 301-5451 [www.campchatterbox.org](http://www.campchatterbox.org)

### Camp Cold Brook

Somerset Hills Handicapped Riding Center  
P.O. Box 305  
83 Old Turnpike Rd.  
Oldwick, NJ 08858  
[www.shhrc.org](http://www.shhrc.org)

### Camp Daisy

Hardenburg Ln. and Riva Ave.  
East Brunswick, NJ 08818  
(732) 821-5195 or [www.ebrr.org/campdaisy.html](http://www.ebrr.org/campdaisy.html)

### Camp Haverim

JCC on the Palisades  
411 East Clinton Ave.  
Tenafly, NJ 07670  
(201) 569-7900 or [www.jcconthepalisades.org](http://www.jcconthepalisades.org)

### Camp Hope

(845) 225-2005 X 207 or (866) 223-6369 or  
[WWW.CBFNY.ORG](http://WWW.CBFNY.ORG)

### Camp Horizons

127 Babcock Hill Rd.  
South Windham, CT 06266

(860) 456-1032 or [www.camphorizons.org](http://www.camphorizons.org)

### Camp Huntington

56 Bruceville Rd.  
High Falls, NY 12440  
(866) 514-5281 or [www.camphuntington.com](http://www.camphuntington.com)

### Camp Jotoni

141 S. Main St.  
Manville, NJ 08835  
(908) 725-8544 or [www.theearofsomerset.org](http://www.theearofsomerset.org)

### Camp Joy

250 Nimham Rd., Carmel  
(845) 225-2005 X212 or [www.cbfny.org](http://www.cbfny.org)

### Camp Lee Mar

805 Redgate Rd.  
Dresher, PA 19025  
(215) 658-1710 or [www.leemar.com](http://www.leemar.com)

### Camp Merry Heart

21 O'Brien Rd.  
Hackettstown, NJ 07840  
(908) 852-3896 or [www.eastersealnj.org](http://www.eastersealnj.org)

### Camp Nejeda

P.O. Box 158  
910 Saddleback Rd.  
Stillwater, NJ 07875  
(973) 383-2611

### Camp Northwood

132 State Route 365  
Remsen, NY 13438-5700  
(315) 831-3621 or [www.nwood.com](http://www.nwood.com)

### Camp Oakhurst

111 Monmouth Rd.  
Oakhurst, NJ 07755  
(732) 531-0215 or [www.campchannel.com/campoakhurst](http://www.campchannel.com/campoakhurst)

### Camp Sun N Fun

1555 Geteway Blvd  
West Deptford, NJ 08096  
(856) 875-1499 or [www.thearcgloucester.org](http://www.thearcgloucester.org)

### Camp Sunshine and Camp Snowflake

1133 E. Ridgewood Ave  
Saddle River County Park, Wild Duck Pond Area  
Ridgewood, NJ 07450  
(201) 652-1755 or [www.sunsine-snowflake.org/sunshinemain.htm](http://www.sunsine-snowflake.org/sunshinemain.htm)

### Camp Sunshine and Summer Fun Camp

Children's Specialized Hospital  
150 New Providence Rd.  
Mountainside, NJ 07092  
(888) 244-5373 X 5484

### Camp Tikvah

JCC on the Palisades  
411 East Clinton Ave.  
Tenafly, NJ 07670  
(201) 569-7900 or [www.jcconthepalisades.org](http://www.jcconthepalisades.org)

### Frost Valley YMCA Camps

2000 Frost Valley Rd.  
Claryville, NY 12725  
(845) 985-2291 or [www.frostvalley.org](http://www.frostvalley.org)

### Happiness is Camping Inc.

62 Sunset Lake Rd.  
Blairstown, NJ 07825  
(908) 362-6733 or [www.happinessiscamping.org](http://www.happinessiscamping.org)

### Harbor Haven Day Camp

1155 W. Chestnut St.  
Suite G-1, Union NJ 07083  
(908) 964-5411 or [www.hhdc.com](http://www.hhdc.com)

### Kiddie Keep Well Camp

35 Roosevelt Dr.  
Edison, NJ 08837  
(732) 548-8542 or [www.kiddiekeepwell.org](http://www.kiddiekeepwell.org)

### New Jersey Camp Jaycee

985 Livingston Ave  
North Brunswick, NJ 08902  
(732) 246-2525 or [www.campjaycee.org](http://www.campjaycee.org)

### Ramapo For Children

Rhinebeck Campus  
P.O. Box 266 Rt. 52 Salisbury Turnpike  
Rhinebeck, NY 12572  
(845) 878-8403 or [www.ramapoforchildren.org](http://www.ramapoforchildren.org)

### Round Lake Camp

119 Woods Rd.  
Lakewood, PA 18439  
(570) 798-2551 or [www.roundlakecamp.org](http://www.roundlakecamp.org)

### Summit Camp & Travel

322 Route 46 West, Suite 210  
Parsippany, NJ 07054  
(800) 323-9908 or [www.summitcamp.com](http://www.summitcamp.com)

### Maplebrook Summer Program

5142 Route 22  
Amenia, NY 12501  
(845) 373-8191 or [www.maplebrookschool.org](http://www.maplebrookschool.org)

### Minding Miracles Learning Center

90 Spring Hill Rd.  
Matawan, NJ 07747  
732-316-4884 or [www.mindingmiracles.net](http://www.mindingmiracles.net)

### New Jersey Camp Jaycee

198 Zeigler Rd.  
Effort, PA 18330  
(732) 246-2525 X 44 or [www.campjaycee.org](http://www.campjaycee.org)

### Rainbow Summer Day Program

(201) 343-0322 X 270 or [www.archbergenpassaic.org/about.html](http://www.archbergenpassaic.org/about.html)

### Southampton Fresh Air Home

36 Barkers Island Rd.  
Southampton, NY 11968  
(631) 283-5847 or [www.sfah.org](http://www.sfah.org)

## CEREBRAL PALSY

### United Cerebral Palsy of New York City

80 Maiden Ln.  
New York, NY 10038  
(212) 683-6700  
[www.ucpny.org](http://www.ucpny.org)

Services Provided: Assistive Tech Equipment, Case Management, Community Education, Information and Referral, Residential, Treatment, Vocational/Employment

# New York Special Needs

## DIRECTORY

Other: Day Treatment, Day Habilitation, Early Intervention

### DISABILITY GROUPS

**Adults and Children with Learning & Developmental Disabilities, Inc.**  
807 South Oyster Bay Rd.  
Bethpage, NY 11714  
(516) 822-0028

Services Provided: Educational Services, Family Support Services, Day Services, Homes and Independent Living and Health Care Providers.

**Brooklyn Center for Independence of the Disabled (BCID)**  
27 Smith St.  
Brooklyn, NY 11201  
(718) 998-3000/TTY/TDD  
(718) 998-7406  
[www.bcid.org](http://www.bcid.org)

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy, Vocational Employment

**Catholic Charities Office for the Handicapped**  
191 Joralemon St.  
Brooklyn, NY 11201  
(718) 722-6000  
[www.ccbq.org](http://www.ccbq.org)

Services Provided: Case Management, Community Education, Information and Referral, Individual/Case Advocacy, Legal Advocacy

**Center for Independence of the Disabled in New York**  
841 Broadway  
New York, NY 10003  
(212) 674-2300  
TTY/TDD: (212) 674-5619  
[www.cidny.org](http://www.cidny.org)

Services Provided: Information and Referral, Individual/Case Advocacy, Legal Advocacy

**Children's Aid Society**  
150 E. 45th St.  
New York, NY 10017  
(212) 949-4800

Services Provided: serves New York's neediest children and their families at more than 45 locations in the 5 boroughs and Westchester County. Provides comprehensive support for children in need, from birth to young adulthood, and for their families, to fill the gaps between what children have and what they need to thrive.

**Community Service Society**  
105 E. 22nd St., Room 303  
New York, NY 10010  
(212) 254-8900  
[www.cssny.org](http://www.cssny.org)

Services Provided: Case Management, Information and Referral

**Developmental Disabilities Center, St. Luke's Hospital**  
1000 10th Ave.  
New York, NY 10019  
(212) 523-6230

Other: Developmental assessments and evaluations.

### Disabled and Alone/Life Services for the Handicapped

61 Broadway, Suite 510  
New York, NY 10006  
(800) 995-0066  
[www.disabledandalone.org](http://www.disabledandalone.org)

Services Provided: Assistive Tech Equipment, Future Planning, Information and Referral, Individual Case Advocacy, Legal Advocacy

### Early Childhood Center Children's Evaluation and Rehabilitation Center

1731 Seminole Ave.  
Bronx, NY 10461  
(718) 430-8900

Services Provided: Treatment  
Other: Parent Support Groups

### Early Childhood Direction Center

New York Presbyterian Hospital  
435 E. 70th St.  
New York, NY 10021  
(212) 746-6175

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.

### Early Childhood Direction Center

1UCP of NYC, Inc, SHARE Center  
60 Lawrence Ave.  
Brooklyn, NY 11230  
(718) 437-3794

Services Provided: The Early Childhood Direction Centers (ECDCs) provide information about programs and services for young children, ages birth through 5, who have physical, mental, or emotional disabilities and help families obtain services for their children.

### Easter Seals New York

40 W 37th St., Suite 503  
New York, NY 10018  
(212) 220-2290  
[www.ny.easter-seals.org](http://www.ny.easter-seals.org)

Services Provided: Medical Rehabilitation, Inclusive Child Care, Camping and Recreational, Education and Recreational Services.

### EIHAB Children's Services

222-40 96th Ave.  
Queens Village, NY 11429  
(718) 465-8833

Services Provided: Connects disabled children To service providers, advocates, helps with entitlements, Medicaid waivers, financial assistance, care coordination.

### Fisher Landau Center for the Treatment of Learning Disabilities

Rousso Building, Second Floor  
1165 Morris Park Ave.  
Bronx, NY 10461  
(718) 430-3900

[www.einstein.yu.edu/cerc](http://www.einstein.yu.edu/cerc)

Services Provided: Health, Education and Vocational Rehabilitation

### Gingerbread Learning Center, Inc

80 Woodrow Rd.  
Staten Island, NY 10312  
(718) 356-0008  
[www.gingerbreadlctr.com](http://www.gingerbreadlctr.com)  
[gingerbread@gingerbreadlctr.com](mailto:gingerbread@gingerbreadlctr.com)

**Services Provided:** Group or individual curriculums at your home, preschool or our center. Diagnostic evaluations and therapy by licensed certified professionals — placement determined by NYC CPSE. New York State-approved preschool evaluation site. Free tuition and transportation for all eligible children \*(funding provided through state and local agencies — parent may transport for reimbursement).

**Developmental areas:** Behavior and socialization, cognitive development, speech and language, hearing loss, physical and occupational therapy.

Three convenient Staten Island locations. Call or visit our school and pick up a free brochure. For information concerning the Early Intervention Program call 311.

### Guild for Exceptional Children

260 68th St., Brooklyn, NY 11220  
(718) 833-6633  
[www.gecbklyn.com](http://www.gecbklyn.com)  
[mikefer@gecbklyn.org](mailto:mikefer@gecbklyn.org)

Services Provided: Early childhood Education, Day Habilitation Program, Other specialized services

### Heartshare Human Services

12 MetroTech Center, 29th floor  
Brooklyn, NY 11201  
(718) 422-4200  
[www.heartshare.org](http://www.heartshare.org)

Services Provided: Case Management, Community Education, Future Planning, Information and Referral, Residential, Treatment

### IAC-

**Interagency Council of Developmental Disabilities Agencies, Inc.**  
150 W. 30th St., 15th Floor  
New York, NY 10001  
(212) 645-6360

### International Center for the Disabled

340 E. 24th St.  
New York, NY 10010  
(212) 585-6000  
[www.icdnyc.org](http://www.icdnyc.org)

Service Provided: Medical, Rehabilitation and Mental.

### Jewish Board of Family and Children's Services, Inc.

135 West 50th St.

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# New York Special Needs

## DIRECTORY

*Continued from page 35*

**New York, NY 10020**  
(212) 582-9100  
(800) 523-2769  
[www.jbfcs.org](http://www.jbfcs.org)

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy, Legal Advocacy

### Korean-American Association for Rehabilitation of the Disabled

35-20 147th St.  
Annex 2F  
Flushing, NY 11354  
(718) 445-3929

Individuals Served: All Developmental Disabilities

### Learning Disabilities Association of New York City

27 W. 20th St., Room 304  
New York, NY 10128  
(212) 645-6730  
[www.ldanyc.org](http://www.ldanyc.org)

Services Provided: Information and Referral, Individual/Case Advocacy

### Living Above Disorder Shared Journeys Support group

Clinton Hill Public Library  
380 Washington Ave., Brooklyn  
(646) 481-6570  
[www.livingabovedisorder.org](http://www.livingabovedisorder.org)  
[info@livingabovedisorder.org](mailto:info@livingabovedisorder.org)

Services Provided: support for special needs children/adults, social workshops.

### Mayor's Office for People with Disabilities

100 Gold St.,  
New York, NY 10038  
(212) 788-2830  
[www.nyc.gov/mopd](http://www.nyc.gov/mopd)

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy

### Metro New York Developmental Disabilities Services Office

75 Morton St.,  
New York, NY 10014  
(212) 229-3000  
[www.cs.stste.ny.us](http://www.cs.stste.ny.us)

Services Provided: Case Management, Community Education, Individual/Case Advocacy, Residential, Treatment, Vocational Employment

### My Time, Inc.

9719 Flatlands avenue, Room 103  
Other Location: 1312 E8th street, Brooklyn  
(718) 251-0527  
[www.mytimeinc.org](http://www.mytimeinc.org)  
[infor@mytime.org](mailto:infor@mytime.org)

Services provided: Support group for parents of special needs children.

### National Center for Learning Disabilities

381 Park Ave. South, Suite 1401  
New York, NY 10016  
(212) 545-7510

Service Provided: Information and Promotes Research and Programs.

### New York City Administration for Children's Services

150 William St.  
New York, NY 10038  
(212) 341-0900

Services Provided: Protects New York City's children from abuse and neglect. Provides neighborhood based services to help ensure children grow up in safe, permanent homes with strong families. Helps families in need through counseling, referrals to drug rehabilitation programs and other preventive services.

### New York City Department of Health and Mental Hygiene

[www.nyc.gov/health](http://www.nyc.gov/health)

### New York City Department of Social Services

250 Church St.  
New York, NY 10013  
(877) 472-8411

Services Provided: Information and Referral  
Other: Services vary by county

### Partnership with Children

50 Court St.  
Brooklyn, NY 11201  
(212) 689-9500

Services Provided: Partnership with Children is a not-for-profit organization that provides emotional and social support to at-risk children so that they can succeed in school, in society and in their lives.

### Staten Island Mental Health Society, Inc.

669 Castleton Ave.  
Staten Island, NY 10301  
(718) 442-2225  
[www.simhs.org](http://www.simhs.org)

Service Provided: Clinical and Education

### YAI/National Institute for People with Disabilities

460 W. 34th St., 11th floor  
New York, NY 10001  
(212) 563-7474  
TTY/TDD: (212) 290-2787  
[www.yai.org](http://www.yai.org)  
[link@yai.org](mailto:link@yai.org)

Services Provided: Assistive Tech Equipment, Case Management, information and Referral, Residential Treatment, Vocational/Employment. Other: Early Intervention, preschool, health care, Crisis intervention family services, clinical services. Day programs, recreation and camping.

## DOWN SYNDROME

### Bronx and Manhattan Parents of Down Syndrome

1045 Hall Place, No. 3  
Bronx, NY 10459  
(917) 834-0713

### Down Syndrome Amongst Us

32 Rutledge St.  
Brooklyn, NY 11249  
[www.dsau.org](http://www.dsau.org)

### Manhattan Down Syndrome Society

124 W. 121st St.  
New York, NY 10027  
(646) 261-5334  
[manhattandowns@gmail.com](mailto:manhattandowns@gmail.com)

### National Down Syndrome Society

666 Broadway, New York, NY 10012  
(212) 460-9330 (800) 221-4602

Services Provided: Advocate for the value, acceptance and inclusion of people with Down Syndrome.

## EDUCATION

### Bedford-Stuyvesant Community Legal Services Corp.

1360 Fulton St.  
Brooklyn, NY 11216  
(718) 636-1155

Services Provided: Community Education, Future Planning, Information and Referral, Individual/Case Advocacy

Other: HIV Advocacy and HIV Custody Planning.

### BOLD – The Bronx Organization for the Learning Disabled in New York

2885 St. Theresa Ave.  
Bronx, New York 10461  
(718) 430-0981  
[www.boldny.org](http://www.boldny.org)

Services Provided: Education, speech therapy, occupational therapy, psychological assessments and other services.

### Early Childhood Direction Center Variety Pre-Schoolers Workshop

47 Humphrey Drive  
Syosset, NY 11791  
(516) 921-7171 (800) 933-8779  
[www.vclc.org](http://www.vclc.org)

Individuals Served: Children with diagnosed or suspected disabilities

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.

### East River Child Development Center

577 Grand St.  
New York, NY 10002  
(212) 254-7300  
[www.eastrivercdc.org](http://www.eastrivercdc.org)

Services Provided: A Non-Profit, Family-Centered, Community based Preschool Program offering an array of Educational and Therapeutic services to children with special need between

*Continued on page 38*

# March of Dimes

## RESOURCE GUIDE

### New York Chapter

[www.marchofdimes.org](http://www.marchofdimes.org)  
515 Madison Ave., 20th Floor, New York, NY, 10022  
(212) 353-8353

### Long Island Division

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

### Northern Metro Division

580 White Plains Rd., Suite 445, Tarrytown, NY, 10591  
(914) 407-5000

### Staten Island Division

114 McClean Ave., Staten Island, NY, 10305  
(718) 981-3000

### March of Dimes National Office

1275 Mamaroneck Ave.  
White Plains, NY 10605  
(914) 997-4488

Find **SPECIAL CHILD** online at  
[www.NYParenting.com](http://www.NYParenting.com)

Rebecca School is a therapeutic day school for children ages 4 to 21, promoting the education and development of children with neurodevelopmental delays in relating and communicating, including PDD and autism.

Our curriculum is based upon the DIR® (Developmental Individual Differences Relationship-based) model of Dr. Stanley Greenspan, which considers the variations in individual motor and sensory processing systems and tailors each child's program to his or her specific needs. We are committed to celebrating each child's strengths and supporting their limitations.



### Learning Through Relationships

Elizabeth O'Shea, Admissions Director 40 East 30th Street NYC 10016  
(212) 810-4120 [www.rebeccaschool.org](http://www.rebeccaschool.org)  
eohsea@rebeccaschool.org



*Extended Care for Quality of Life*

Extended Home Care serves Special Needs patients of all ages:

- CHILDREN
- ADOLESCENTS
- ADULTS

Special Needs diagnoses include:

- DEVELOPMENTAL DISABILITY
- AUTISM
- PDD/AUTISM SPECTRUM DISORDERS
- MENTAL RETARDATION
- EPILEPSY / SEIZURE DISORDERS
- CEREBRAL PALSY
- ADHD
- OTHER CONGENITAL DISORDERS and NEUROLOGICAL IMPAIRMENTS

We accept Medicare, Medicaid and a variety of other insurance plans.



JCAHO Accredited

### Extended Home Care can help each individual reach their maximum potential

Our specialty is caring for people with Developmental Disabilities



You want your family member, young or old, to have the best possible quality of life. But accessing all the right services for people with Developmental Disabilities can be very challenging.

Extended Home Care is specially licensed to serve cognitively and neurologically impaired individuals. We are a CHHA, or Certified Home Health Agency, serving all five boroughs of New York City, as well as Nassau and Suffolk Counties.

We offer in-home support to meet your family member's health, developmental and safety needs by providing Skilled Nursing and Home Health Aides, plus Physical Therapy, Occupational Therapy, Speech Therapy, and Social work, as needed.

Our culturally diverse staff speaks a variety of languages, including:  
Spanish, Russian, Mandarin, Creole, Korean, French and others.

#### Contact Us

Sherri Franceschini, Director of Business Development 917-721-3235  
Nancy Castelle, Director of Intake Services at 212-356-4200 ext. 3403  
Fax: 212-563-8022



360 West 31st Street  
New York, NY 10001  
(212) 356-4200

2617 East 16th Street  
Brooklyn, NY 11235  
(718) 891-0808

900 South Avenue  
Staten Island, NY 10314  
(718) 982-1360

[www.extendedhc.net](http://www.extendedhc.net)

# New York Special Needs

## DIRECTORY

### Continued from page 36

the ages of 3 and 5. These special needs include specialized instruction, speech therapy, occupational therapy, physical therapy, counseling, assistive technology, and parent education.

### Shield Institute for the Mentally Retarded and Developmentally Disabled

144–61 Roosevelt Ave.  
Flushing, NY 11354  
(718) 939–8700  
[www.shield.org](http://www.shield.org)

Services Provided: Assistive Tech/Equipment, Case Management, Community Education, Information and Referral, Individual/Case Advocacy, Treatment.

### EPILEPSY

#### ANIBIC (Association for Neurologically Impaired Brain Injured Children)

61–35 220th St., Oakland Gardens  
(718) 423–9550  
[www.anibic.org](http://www.anibic.org)

Services Provided: Physical activities for mentally disabled children.

#### Epilepsy Foundation of Metropolitan New York

257 Park Ave. South, Suite 302

New York, NY 10010

(212) 677–8550

[www.efmny.org](http://www.efmny.org)

Services Provided: The Epilepsy Foundation of Metropolitan New York is a non-profit social service organization dedicated to improving the quality of life of people with Epilepsy and their families.

### GENERAL-MULTIPLE SERVICES PROVIDED

#### Adoption Crossroads

444 East 76th St., Manhattan

(212) 988–0110

[www.adoptioncrossroads.org](http://www.adoptioncrossroads.org)  
[joesoll@adoptionhelpline.org](mailto:joesoll@adoptionhelpline.org)

Services Provided: Educate parents on handling adopted children.

#### Advocates for Children of New York

151 W. 30th St., Fifth floor

New York, NY 10001

(212) 947–9779

[www.advocatesforchildren.org](http://www.advocatesforchildren.org)

Other: Advocate for educational rights in the public school

#### Board of Visitors, Staten Island Developmental Center

1150 Forest Hill Rd.

Staten Island, NY 10314

(718) 983–5200

Services Provided: Community Education,

Information and Referral, Individual/Case Advocacy

#### Brooklyn Bureau of Community Services

285 Schermerhorn St.  
Brooklyn, NY 11217  
(718) 310–5600  
[www.bbcs.org](http://www.bbcs.org)

Services Provided: Case Management, Community Education, Future Planning, Treatment, Vocational Employment

Other: Job training and placement services, Home and Community Based Waiver Services, Comprehensive Medical Case Management, Parent Support Group

#### Brooklyn Children's Center

1819 Bergen St.  
Brooklyn, NY 11233  
(718) 221–4500

Services Provided: Inpatient Hospital Day, Day Treatment Program, Parent Advocate Services, Family Support Group. The Brooklyn Children's (BCC) Mission is to promote an environment for the Development of healthy children and adolescents.

#### Brooklyn Parent Advocacy Network

279 E. 57th St.  
Brooklyn, NY 11203  
(718) 629–6299

Services Provided: Assistive Tech/Equipment, Case Management, Community Education, Future Planning, Information and Referral, Individual/Case Advocacy, Legal Advocacy, Residential, Vocational/Employment

Other: HIV-AIDS, homeless housing, food program, respite, after school and day care.

#### Bronx Children's Psychiatric Center

1000 Waters Pl.  
Bronx, NY 10461  
(718) 239–3639

Services Provided: Community Day Treatment, Intensive Case Management, Crisis Intervention

#### Greater New York Chapter of the March of Dimes Birth Defects Foundation

515 Madison Ave., 20th Floor  
New York, NY 10022  
(212) 353–8353  
[www.marchofdimes.com](http://www.marchofdimes.com)

Services Provided: Community Education, Information and Referral.

#### Institute for Community Living Brooklyn Family Resource Center

2581 Atlantic Ave.,  
Brooklyn, NY  
(718) 290–8100, x. 4145  
(718) 495–8298  
[www.iclinc.net](http://www.iclinc.net)  
[info@iclinc.net](mailto:info@iclinc.net)

Services Provided: Clinical consultation, counseling, workshops, and after-school programs for

special needs children.

#### Maidstone Foundation

1225 Broadway, Ninth floor  
New York, NY 10001  
(212) 889–5760  
[mariettte33@aol.com](mailto:mariettte33@aol.com)

Services Provided: Case Management, Community Education, Information and Referral, Vocational Employment

Other: Help people with unusual problems seek the proper help that is needed for that problem and also provide education and training.

#### New Alternatives for Children

37 W. 26th St.  
New York, NY 10010  
(212) 696–1550

Services Provided: NAC provides real help and real hope to thousands of children with disabilities and chronic illnesses and their families throughout NYC. Through an integrated continuum of health and social services, NAC keeps children safe from abuse or neglect and works with birth, foster and adoptive families to keep children out of institutions and in nurturing, loving homes.

#### Queens Children's Psychiatric Center

74–03 Commonwealth Blvd.  
Bellerose, NY 11426  
(718) 264–4500

Services Provided: QCPC serves seriously emotionally disturbed children and adolescents from ages 5–18 in a range of programs including inpatient, hospitalization, day treatment, intensive case management.

#### Resources for Children with Special Needs, Inc.

116 E. 16th St.  
New York, NY 10003  
(212) 677–4650  
[infor@resourcesnyc.org](mailto:infor@resourcesnyc.org)  
[www.resourcesnyc.org](http://www.resourcesnyc.org)

Services Provided: Case Management, Community Education, Information and Referral Case Advocacy

Other: Free workshop series with a focus in issues related to early intervention, preschool, school-age special education, transition to adulthood and community resources.

Also publishes several directories.

#### Services for the Underserved

305 Seventh Ave. 10th floor  
New York, NY 10001  
(212) 633–6900

Services Provided: SUS is a non-profit organization that provides housing, services and support for individuals with special needs to live with dignity in the community, direct their own lives and attain personal fulfillment.

#### Sinergia, Inc.

2082 Lexington Ave.  
New York, NY 10035  
(212) 643–2840  
[www.sinergiany.org](http://www.sinergiany.org)

# New York Special Needs

## DIRECTORY

[information@sinergia.org](mailto:information@sinergia.org)

Residential Office:  
902 Amsterdam Ave.  
New York, NY (212) 678-4700

Services Provided: Case Management, Information and Referral, Individual/Case Advocacy, Legal Advocacy, Residential, Vocational/Employment

### Staten Island Mental Health Society, Inc.

669 Castleton Ave.  
Staten Island, NY 10301  
(718) 442-2225

Service Provided: Offers mental health and related services to children and adolescents and their families.

## HEARING IMPAIRED

### Center for Hearing and Communications

50 Broadway  
New York, NY 10004  
(917) 305-7700 (917) 305-7999  
TTY/TDD: (917) 305-7999  
[www.chcheating.org](http://www.chcheating.org)  
[info@chcheating.org](mailto:info@chcheating.org)

Services Provided: Case Management, Community Education, Information and referral, Individual case Advocacy

### Lexington School for the Deaf

Center for the Deaf  
26-26 75th St.  
East Elmhurst, NY 11370  
(718) 350-3300  
TTY/TDD: (718) 350-3056  
[www.lexnyc.org](http://www.lexnyc.org)  
[generalinfo@lexnyc.org](mailto:generalinfo@lexnyc.org)

Services Provided: Assistive Tech/Equipment, Case Management, Information and Referral, Individual/Case Advocacy, Vocational/

Employment.

Other: Mental Health Services including early intervention program, hearing and speech services and a school for the deaf.

### The Children's Hearing Institute

380 Second Ave., Ninth floor  
New York, NY 10010  
(646) 438-7802  
[www.childrenshearing.org](http://www.childrenshearing.org)

Services Provided: The institute provides funding for research, educational support, and other programs relating to the restoration of hearing for infants and children with hearing loss or profound deafness. While CHI currently focuses much of their efforts on children who are deaf and can be helped with cochlear implant technology, they conduct research related to causes of deafness that ultimately can benefit people of all ages.

## LEGAL SERVICES

### Lawyers for Children, Inc.

110 Lafayette St., Eighth floor  
New York, NY 10013  
(800) 244-2540  
[www.lawyersforchildren.com](http://www.lawyersforchildren.com)

Services Provided: Future Planning, Information and Referral, Legal Advocacy

### Legal Aid Society of New York City

199 Water St.  
New York, NY 10038  
(212) 577-3346  
(347) 245-5132  
[www.legal-aid.org](http://www.legal-aid.org)

Individuals Served: All Developmental Disabilities Services Provided: Community Education, Information and referral, Individual/Case Advocacy, Legal Advocacy

Other: Advocacy training, and systems advocacy

### MFY Legal Services, Inc.

299 Broadway, Fourth floor  
New York, NY 10007  
(212) 417-3700

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy, Legal Advocacy.

### New York Lawyers for the Public Interest, Inc.

151 West 30th St., 11th floor  
New York, NY 10001-4007  
(212) 244-4664  
[www.nylpi.org](http://www.nylpi.org)

Services Provided: Community Education, Information and Referral, Individual/Case Advocacy, Legal Advocacy.

## MUSCULAR DYSTROPHY

### Muscular Dystrophy Association

11 E. 44th St. 17th floor  
New York, NY 10017  
(212) 682-5272  
[www.mda.org](http://www.mda.org)

Services Provided: MDA is the gateway to information, resources and specialized health care for individuals and families coping with muscle disease. MDA's offices serve every community through a vast program of clinics, support groups, summer camps, equipment loans and much more.

## TOURETTE SYNDROME

### National Tourette Syndrome Association

42-40 Bell Blvd., Bayside, NY 11361-2820  
(718) 2242999  
[www.tourette-syndrome.com](http://www.tourette-syndrome.com)

Services Provided: Community education, information and referral.

# Developmental Disabilities Service Offices

## RESOURCE GUIDE

The State Office of OPWDD provides services through the following Developmentally Disabled Service Offices (DDSO) of each borough. Services include group home placement, advocacy, respite care, financial planning, estate planning, education, day treatment, children's services, and discharge planning.

### Metro NY Developmental Disabilities Service Office — Bronx

2400 Halsey Ave.  
Bronx, NY 10461  
Voice (718) 430-0478  
Fax (718) 430-0866

### Metro NY Developmental

### Disabilities Service Office — Manhattan

75 Morton St., New York, NY 10014  
Voice (212) 229-3000  
Fax (212) 924-0580

### Brooklyn Developmental Disabilities Service Office

888 Fountain Ave.  
Brooklyn, NY 11208  
Voice (718) 642-6151

### Queens Developmental Disabilities Service Office

80-45 Winchester Blvd.  
Hillside Complex, Bldg. 12

Queens Village, NY 11427  
Voice (718) 217-4242  
Fax (718) 217-5835

### Staten Island Developmental Disabilities Service Office

1150 Forest Hill Rd.  
Staten Island, NY 10314  
Voice (718) 982-1903

### Long Island Developmental Disabilities Service Office

45 Mall Dr., Commack, NY 11725  
Tel: (631) 493-1700  
Fax: (631) 493-1803  
Website: [www.omr.state.ny.us](http://www.omr.state.ny.us)

# *Long Island Special Needs*

## RESOURCE GUIDE

### ADVOCACY

#### **Association for the Help of Retarded Children (AHRC)**

Nassau County  
189 Wheatley Rd.  
Brookville, NY 11545  
(516) 626-1000  
[www.ahrc.org/](http://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](http://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 Rd.  
New Hyde Park, NY 11040  
(516) 248-2222

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

#### **Nassau County Commission on Human Rights**

240 Old Country Rd.  
Mineola, NY 11501  
(516) 571-3662  
[www.nassaucountyny.gov](http://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/](http://www.nassaucountyny.gov/agencies/dss/)

Services Provided: Information and referral

#### **Nassau/Suffolk Law Services, Inc.**

Nassau County  
Hempstead Office  
1 Helen Keller Way – Fifth Floor  
Hempstead, NY 11550  
(516) 292-8100  
[www.nslawservices.org](http://www.nslawservices.org)  
Suffolk County  
Islandia Office  
(serves Suffolk West of Route 112)  
1757 Veterans Highway – Suite 50  
Islandia, NY 11749  
(631) 232-2400  
Riverhead Office  
(serves Suffolk East of Route 112)  
400 W. Main St., Suite 301  
Riverhead, NY 11901  
(631) 369-1112

### AUTISM

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

189 Wheatley Rd.  
Brookville, NY 11545  
(888) 918-9198  
[www.ahany.org](http://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.

#### **Matt and Debrea Cody Center for Autism and Developmental Disabilities**

Stony Brook University, 5 Medical Dr., Port Jefferson Station  
(631) 632-8844  
[www.codycenter.org](http://www.codycenter.org)

#### **Nassau-Suffolk Services for Autism (NSSA)**

80 Hauppauge Rd., Commack, NY 11725  
Tel: (631) 462-0386  
Fax: (631) 462-4201  
Website: [www.nssa.net](http://www.nssa.net)

#### **Quality Services for the Autism Community (QSAC)**

56-37 188th St.  
Fresh Meadows, NY 11365  
(718) 357-4650  
[www.qsac.com](http://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.

#### **United Supports For Autism**

283 Commack Rd.  
Commack  
(516) 848-8551  
[www.unitedsupportsforautism.org](http://www.unitedsupportsforautism.org)  
Contact: Natalia Appenzeller, Ph. D.

### CAMPS

#### **Camp Akeela**

3 New King St.  
White Plains, NY 20604  
(868) 680-4744 or [www.campakeela.com](http://www.campakeela.com)

#### **Camp Horizons**

127 Babcock Hill Rd.  
South Windham, CT 06266  
(860) 456-1032 or [www.camphorizons.org](http://www.camphorizons.org)

#### **Camp Horseability**

238 Round Swamp Rd.,  
Melville, NY 11747.  
(631) 367-1646 or [www.horseability.org](http://www.horseability.org)

#### **Camp Huntington**

56 Bruceville Rd  
High Falls, NY 12440  
(866) 514-5281 or [www.camphuntington.com](http://www.camphuntington.com)

#### **Camp Loyaltown**

Hunter, NY 12442.  
(518) 263-4242 or [www.camployaltown.org](http://www.camployaltown.org)

#### **Camp Northwood**

132 State Route 365  
Remsen, NY 13438-5700  
(315) 831-3621 or [www.nwood.com](http://www.nwood.com)

#### **Frost Valley YMCA Camps**

2000 Frost Valley Rd.  
Claryville, NY 12725  
(845) 985-2291 or [www.frostvalley.org](http://www.frostvalley.org)

#### **Helen Keller Summer Camp**

Farmingdale State University of New York.  
(516) 485-1235, ext. 617 or [info@helenkeller.org](mailto:info@helenkeller.org)

#### **Gersh Academy At West Hills Day Camp**

150 Broad Hollow Rd., Ste. 120,  
Melville, NY 11747  
(631) 385-3342 or [www.gershacademy.org](http://www.gershacademy.org)

#### **JCC Of The Greater Five Towns**

**Camp Friendship**  
207 Grove Ave.,  
Cedarhurst, NY 11516. 5  
16-569-6733 or [Gayle.fremed@fivetownsjcc.org](mailto:Gayle.fremed@fivetownsjcc.org)

#### **Kehilla Vocation Experience**

Henry Kaufman Campgrounds,  
75 Colonial Springs Rd.  
Wheatley Heights, NY 11798  
(516) 484-1545 or [www.sjccc.org](http://www.sjccc.org)

#### **Mid-Island Y Jewish Community Center Aspire Program**

45 Manetto Hill Rd.,  
Plainview, NY 11803  
(516) 822-3535, X 332 or [www.miyjcc.org](http://www.miyjcc.org)

#### **My Shine Program**

Sweet Hills Riding Center. West Hills Park,  
Sweet Hollow Rd.,  
Melville, NY 11747  
(516) 551-1491 or [www.myshineprogram.com](http://www.myshineprogram.com)

#### **NYU Summer Program For Kids**

College of New Rochelle,  
New Rochelle, NY  
(516) 358-1811 or [donofd01@nyumc.org](mailto:donofd01@nyumc.org)

#### **Our Victory Day Camp**

46 Vineyard Lane  
Stamford, CT 06902  
(203) 329-3394 or [www.ourvictory.com](http://www.ourvictory.com)

#### **Powerpals Physical Fitness Camp**

4 Cedar Swamp Rd.,  
Glen Cove, NY 11542.  
[www.power-pals.com](http://www.power-pals.com)

#### **Ramapo For Children**

Rhinebeck Campus  
P.O. Box 266 Rt. 52 Salisbury Turnpike  
Rhinebeck, NY 12572  
(845) 878-8403 or [www.ramapoforchildren.org](http://www.ramapoforchildren.org)

#### **Summit Camp & Travel**

322 Route 46 West, Suite 210  
Parsippany, NJ 07054  
(800) 323-9908 or [www.summitcamp.com](http://www.summitcamp.com)

#### **Southampton Fresh Air Home**

36 Barkers Island Rd  
Southampton NY 11968  
(631) 283-5847 or [www.sfah.org](http://www.sfah.org)

# Long Island Special Needs

## RESOURCE GUIDE

**TAPA (Theresa Academy of Performing Arts) for Children with Special Needs**  
(516) 432-0200 or [www.TheresaFoundation.org](http://www.TheresaFoundation.org)

### CEREBRAL PALSY

#### 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](http://www.ucp-suffolk.org)

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

#### United Cerebral Palsy Association of Nassau County, Inc.

380 Washington Ave.  
Roosevelt, NY 11575  
(516) 378-2000  
[www.ucpn.org](http://www.ucpn.org)

Services Provided: All developmental disabilities

### DEVELOPMENTAL DISABILITY SERVICES

#### 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.

#### Children with Special Health Care Needs Program

Suffolk County Department of Health Services  
Division of Services for Children with Special Needs  
50 Laser Ct.  
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.

#### Feel Better Kids

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

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.

#### Long Island Infant Development Program

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

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

#### 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

#### Nassau Early Childhood Direction Center

Variety Child Learning Center  
47 Humphrey Dr.  
Syosset, NY 11791  
(516) 921-7171 or (800) 933-8779  
[www.vclc.org](http://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.

#### National Center for Disability Services

201 I.U. Willets Rd.  
Albertson, NY 11507  
(516) 747-5400  
[www.abilitiesonline.org](http://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

#### Alexander's Angel's Inc.

425 North Broadway, #486, Jericho, NY 11753  
(516) 361-7263  
[www.alexandersangels.org](http://www.alexandersangels.org)

#### Association for Children with Down Syndrome Inc.

4 Fern Place, Plainview, NY 11803  
(516) 933-4700  
[www.ACDS.org](http://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.

#### Down Syndrome Advocacy Foundation (DSAf)

P.O. Box 12173  
Hauppauge, NY 11788  
(516) 983-7008  
[www.dsafonline.org](http://www.dsafonline.org)

### EPILEPSY

#### EPIC long Island

Extraordinary People in Care  
1500 Hempstead Turnpike  
East Meadow, NY 11554  
(516) 739-7733  
[www.efli.org](http://www.efli.org)

Serves not only individuals with epilepsy, but also those with developmental disabilities and mental health challenges.

### GENERAL

#### Family and Children Association

180 Broadway, Second Floor, Hicksville  
(516) 935-6858  
175 Nassau Rd., Roosevelt  
(516) 623-1644  
510 Hempstead Tpke, Ste. 202  
West Hempstead

#### LDA of Long Island

44 South Elmwood Ave.  
Montauk, NY 11954  
(631) 688-4858  
[Idalongisland@yahoo.com](mailto:Idalongisland@yahoo.com)

Services Provided: LDANY's regional affiliates provide a variety of programs and services for children and adults with learning disabilities. Please contact the regional affiliates closest to you for local information and referrals or to find out more about specific services offered.

#### Services for Children with Special Needs

50 Laser Ct., Hauppauge  
(631) 853-3100  
[www.co.suffolk.ny.us/departments/healthservices/children.aspx](http://www.co.suffolk.ny.us/departments/healthservices/children.aspx)  
Contact: Liz Corrao

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# **Long Island Special Needs**

## **RESOURCE GUIDE**

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### **The K.I.S.S. Center (Kids In Special Services)**

at the Mid-Island Y Jewish Community Center  
45 Manetto Hill Rd.,  
Plainview, NY  
(516) 822-3535  
[www.miicc.org](http://www.miicc.org)

Contact: Joanna M. Diamond, MS. Ed., director

### **FINE AND CULTURAL ARTS**

#### **Art without Walls, Inc.**

P.O. Box 341  
Satville, New York 11782  
(631) 567-9418  
[www.artwithoutwalls.net](http://www.artwithoutwalls.net)  
[artwithoutwalls3@webtv.net](mailto:artwithoutwalls3@webtv.net)

Services Provided: Art without Walls, Inc. Established in 1985 is an award winning 501c3 NY state arts–heath organization that develops original fine art and cultural programs to the disabled community. Art workshops, college portfolios, art therapy, art and cultural trips and exhibitions ages 7–18. Some adult programs are also available.

### **MUSCULAR DYSTROPHY**

#### **Muscular Dystrophy Association**

11 East 44th St.,  
New York, NY 10017  
(212) 682-5272  
[www.mda.org](http://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

**(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 St.,  
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.

# **New York State Special Education Parent Centers**

## **RESOURCE GUIDE**

There are Special Education Parent Centers across New York State. These centers will provide parents of children with disabilities with information, resources, trainings and strategies.

#### **Long Island Parent Center**

Center for Community Inclusion  
Brentwood Campus, Long Island University  
100 Second Ave., Brentwood, NY 11717  
(516) 589-4562  
<http://www.liparentcenterliu.org>

Covers the following BOCES: Suffolk; Nassau

#### **Brooklyn Center for Independence of the Disabled**

27 Smith St., Suite 200, Brooklyn, NY 11201  
(718) 998-3000  
<http://www.bcid.org/>

Region served: NYC – Brooklyn

#### **Resources for Children with Special Needs, Inc.**

The Bronx Parent Center Without Walls

116 E. 16th St., Fifth floor, New York, NY 10003  
(212) 677-4650  
<http://www.resourcesnyc.org/content/bronx>

Region served: NYC - Bronx

#### **United We Stand of New York, LTD**

Queens Special Education Parent Center  
Mail to: 91 Harrison Ave.  
Location: 98 Moore St., Brooklyn, NY 11206  
(718) 302-4313  
<http://www.meetup.com/QueensSpecialEducationParentCenter/>

Region served: NYC - Queens

#### **The Westchester Institute for Human Development**

Cedarwood Hall, Room A106  
Valhalla, NY 10595  
(914) 493-7665  
<http://www.hvsepc.org>

Covers the following BOCES: Dutchess; Orange-Ulster; Putnam-Northern Westchester; Rockland; Southern Westchester; Sullivan; Ulster and Yonkers City School District

See more at: <http://www.parenttoparentnys.org/education/#sthash.Gm8DbPrI.dpuf>

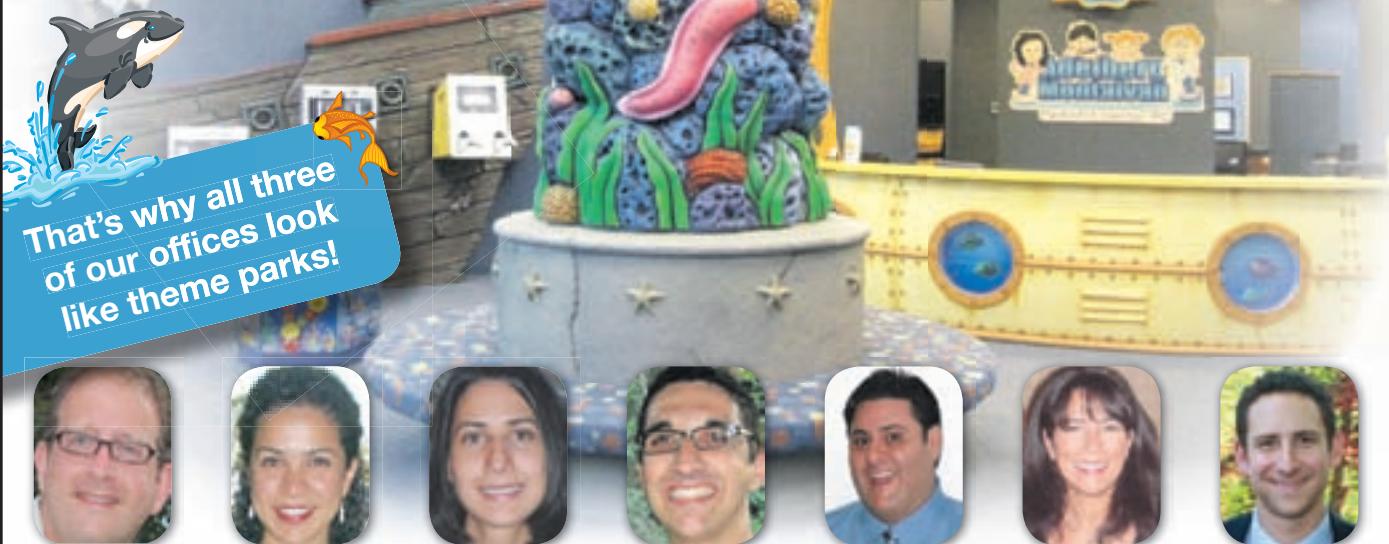


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Dr. Marc  
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Dr. Jon  
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Dr. Jenny  
Abraham



Dr. Adam  
Postel

### THREE CONVENIENT LOCATIONS

1000 F Park Boulevard, Massapequa Park, NY    62 Lake Avenue South, Suite A, Nesconset, NY    615 Montauk Highway, West Islip, NY

**516.798.1111**

**631.360.7337**

**631-661-7337**

Please visit us on the web at [www.AMPediatricDental.com](http://www.AMPediatricDental.com)



The Mid-Island Y JCC  
Adler Center For Special Needs

## Does your child need social, recreational and educational support services?

The **Mid-Island Y JCC** offers comprehensive programs and services for **pre-school age children through teens** with developmental disabilities.



- Social & life skills programs
- Swim activities for all ages
- Increased hours, lunch included
- Sunday parent & sibling support
- Field trips at no additional cost
- Low child-to-staff ratio
- Music therapist on staff
- Discounted full-year registration
- Peer mentoring
- Saturday monthly respite service

*JCC Membership not required to obtain services.*

**Questions? Call Sharon Hanover, LMSW, Adler Center Director**



**(516) 822-3535, x332**  
**45 Manetto Hill Rd, Plainview | [www.miijcc.org](http://www.miijcc.org)**



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