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STAFF

PUBLISHER/MANAGING EDITOR:

Susan Weiss

PUBLISHER: Clifford Luster

CREATIVE DIRECTOR: Leah Mitch

ART DIRECTOR: On Man Tse

PRODUCTION: Yvonne Farley

ADVERTISING SALES:

Sharon Noble

SPECIAL ASSISTANT:

Tina Felicetti

CONTACT INFORMATION

ADVERTISING SALES

718 260-2587

Family@cnglocal.com or
SWeiss@cnglocal.com

CIRCULATION

718 260-8336

TFelicetti@cnglocal.com

EDITORIAL

718 260-4551

Editorial@cnglocal.com

ADDRESS

Family Publications New York/CNG
1 MetroTech Center North
10th Floor
Brooklyn, NY 11201



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Letter from the publisher

A special summer

This latest issue presents articles we hope will be helpful and interesting.

They span a range of topics and cover some of the many child special needs categories parents and families deal with on a daily basis. We are so grateful to the many professionals who have contributed to our effort to bring such vital and positive information to the families in our communities who live with special needs realities.



Being a good parent is daunting in general. Addressing daily choices and decisions that are outside of the norm is what heroines and heroes are made of. That's for sure.

Summer is a good time for all of us. It frees us in many ways and we are let loose to be outside more and to commune with nature in ways that imbue us with more energy. I hope that you and your children/families will have an opportunity to take a break from the rigors of your routines and enjoy these weeks of summer that are in front of us.

We'd love to hear from you and find out if there are topics you'd like us to present that you haven't seen in any of our issues. Please know that we'd be very open to your suggestions.

Thanks for reading and for your feedback. You can email me at sweiss@cnglocal.com. Be sure to check out our website at www.familyresourcenyc.com and to look out for our monthly parenting publications that are presently printing in Brooklyn, Queens, the Bronx/Riverdale, Staten Island and Long Island.

The next issue of this Special Child magazine will be out in October. If you'd like to be put on our mailing list or know of where we should distribute that we don't, send us an email to family@cnglocal.com and we'll be pleased to get you set up.

Have a great summer!

Susan Weiss-Voskidis, Publisher

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Music therapy

Discover the incredible benefits of songs and sounds

BY: CHYNNA LAIRD

“Music is the great communicator.”

— Randy Grossman,
V.P. of Harmonizing With Humanity.

One thing that has always worked with calming my oldest daughter Jaimie — or giving her nervous system the little boost it needs — has been music.

Music is a fantastic tool because there are so many options out there to choose from — depending on what Jaimie needs and when. We can go from classical to pop to jazz to country and everything in between.

A lot of therapists incorporate music into their regular sessions because it can be soothing, bring emotions out that we aren't dealing with and can even rise us up when we're low. I'm finding that as Jaimie gets older, music has become an important part of her overall sensory plan. And it took a conversation with an amazing Dad to make me realize the importance of music — not only for children with special needs, but to all of us.

Our journey

One morning earlier this spring, while seeking some enlightenment from one of my online SPD parent support groups, a long-time member — and a very close friend — shared a link to a YouTube video of a song advising everyone who watched it to “have Kleenex handy!”

That song was called, “The Life That's Chosen Me.” It was written by Grammy-nominated singer, Karen Taylor-Good, with Lisa Aschmann, and performed by Karen for the first time in Orlando December 9th, 2008 for a roomful of parents of exceptional children. You don't have to be the parent of a special needs child to be touched by the song. But those of us who are such parents will feel it's meaning deep in our souls.

The song says what all special needs families wish we could say to others: “I know my family isn't perfect but it's okay. I'm doing the best I can because this is the



life that God gave me.” Then the song goes on describing what others can do to help. And Randy Grossman, V.P. of Harmonizing With Humanity, understands first hand the heart of this song: he has two autistic boys of his own.

“I realized that there are so many caregivers out there who aren't as lucky as my wife and myself in terms of support and/or assistance and are feeling very alone,” Randy said during our one-and-half hour telephone conversation. “We wanted to reach out through

music — the universal language — to help people find some sort of comfort.”

The awesome group of musicians contributing to the Harmonizing With Humanity are what Randy calls, “Indie Positive Artists”: Musicians who uplift spirits with their God-given talents. They are some of the most talented artists today and their music provides listeners with entertainment and a positive message. What could be better than that?

I think what touched me the most, aside from his obvious and contagious love for his

boys was the incident from which all of this stemmed from. One morning when dropping his son off at school he drove up at the end of a line-up of cars waiting to get out of the parking area. This wasn't a typical morning, however, because the parent at the front of the line was overcome by an emotional meltdown and unable to continue. "Parents behind her knew what was happening and felt her pain," Randy said. "No one moved or even honked. For about seven minutes we all waited patiently — all of us have been in that situation before. Then the Vice Principal came out to talk to her — to offer support — until she was finally able to leave the parking lot. It was then that I realized parents and caregivers need more support."

Shortly after that, he met up with Karen Taylor-Good who, unbeknownst to Randy, was so inspired by his story she'd written the lyrics to "The Life That's Chosen Me." From there, Randy was inspired to create an album filled with hope for these caregivers. As he states on his website: "Our mission is to unite like-minded 'positive music artists' and fans who love listening while providing a center point to support important causes."

By the time we'd reached the end of our conversation, I felt as though I said goodbye to an old friend. Randy and I related not only on the level of parents of exceptional children but also as musicians who understand what the power of music is capable of doing. It can inspire, encourage, uplift, recharge and unite. And powerful music mixed with beautiful lyrics is a recipe for success no matter how you look at it.

As I'd shared with Randy, as soon as I realized Jaimie struggled with something — before her SPD diagnosis — I used music as a way to get through to her. I couldn't hold her, but I could sing to her. She rejected my comforting "Mommy touch", but, she allowed me to sit with her while she listened to music or let me crazy-dance with her as she worked through a meltdown. And that's what Randy's gorgeous songs reminded me of. Through music, I'm able to reach a part of my daughter's soul very few get to...and it's my way of hugging her and her way to do the same.

In the four minutes I listened to that song, my soul healed, my strength to move forward returned and I was reminded why I do what I do for Jaimie, and all four of my children. As I've said many times, to myself and to others who want to be near Jaimie, if we want to grow, we need to be willing to look beyond the surface — beyond what only our eyes allow us to see — and be brave enough to look through other lenses. Only then, can we truly understand something or someone else. And that's exactly what Randy Grossman, and the rest of the people involved

Eight fun and simple ways to heal through music

You don't need to enroll your child in music therapy or be a professional musician, like Randy or his crew, to work music into a regular therapeutic routine. You just need to have a love for music and instill that love in your child. A very important note to make is that certain pitches can actually trigger negative reactions. The best thing to do is pay close attention to how your child responds and reacts to certain types of music and adjust what you use accordingly. Here are a few fantastic suggestions I found on a site called, "Raise A Smart Child" (<http://www.raise-smart-kid.com/music-therapy-activity.html>) on the subject of using music as therapy or a form of learning.

Chynna's brain bite: If you want to use music as a form of therapy then please seek the guidance of a trained professional who can create the best program for you and your child. The following options are simply ways to incorporate music into your set therapy set-up.

1 Sing loud and proud. Who cares if you aren't the next Michael Bublé or Whitney Houston? All your baby cares about is the music and the energy you put into it. Get into it and they will too!

2 Movement is key. Clap, stomp, boogie, shake your behind, wave, or tap. Using actions and movement not only injects some energy into the exercises but can also create a beautiful bond. Children learn best when they're in motion—besides, energy is contagious. So be sure to have tons of it.

3 Play instruments or toys with the music. Have a nice variety of musical instruments to work with to correspond with the child's needs, mood and abilities. Instruments like recorders, drums, maracas, and xylophones are great starts. Don't forget you can always use things around the house such as a comb covered with was paper, spoons,

pots and pans with a wooden spoon, etc. Use your imagination.

4 Show them how to do it! Be your child's role model. If you are excited and energetic, your child will be too. Show them how it's done! Throw caution to the wind and sing, dance, and go crazy. If your child needs help calming instead of exerting energy, show them how to relax and listen.

5 Offer a wide variety. Choose different styles of music like: Classical, Country, Rock, Vocal, Jazz, Bluegrass, Opera and Instrumental. My Jaimie's favorites are classical (for calming), Jazz or Beatles (for dancing the sillies away) and Harmonizing With Humanity (for working through feelings).

6 Praise participation at any level. It doesn't matter whether they can make it through the entire song. All that matter is that they try and that they get something from it. It's supposed to be spontaneous movement and provide the opportunity to express their feelings and energies. Allow this freedom.

7 Watch your child with your sensory glasses on. Be aware of how much time your child is exposed to music and sounds, including radio and television. Getting too much sensorial stimulation decreases the benefits of music, especially for children with auditory defensiveness.

8 Be in sync with the music. Be sure to have all distractions off: telephone, television, younger siblings, toys, etc. Your child will not absorb the benefits of the music if he or she is distracted.

The most important part is to have FUN. Even if your child doesn't seem to embrace it at first, continue working the music into regular activities and/or therapy sessions. Music truly is the great communicator—just give it a chance and you'll see!

with Harmonizing With Humanity, does.

Music truly is the great communicator because it makes us stop, listen and pay attention no matter what language we speak, the culture we're from, or if we can even communicate verbally at all. Shortly after watching the video with me, Jaimie leaned towards me, put her head in my lap — that's how she hugs most days — and said, "I loved that song, Mama." Today there isn't a day that

goes by she when isn't humming it or belting the lyrics out at the top of her lungs — depending on how she feels at the time.

That's the power of music. And God Bless people like Randy Grossman and his team for understanding that.

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Right question, wrong doctor

Factors that influence a doctor's view of complementary medicine

BY: ANARA MIDGETT

Parents of Special Needs (SN) children who have an interest in Complementary and Alternative Medicine (CAM) often feel trapped between competing worlds of health care. It's easy to feel as if questions about CAM are not taken seriously when the reply is "I cannot discuss that as it's not supported by research." Parents complain that the subject of non-traditional treatments and approaches to wellness are off limits and not viewed with respect by physicians. Sometimes the problem is not the question, but the type of doctor you are asking. If your child is receiving conventional medical care and your family's wellness philosophy includes CAM, then your child's doctors should have a similar approach to health and healing.

Different sources have different definitions for the terms used to describe complementary and conventional medicine. This article is using definitions of complementary and alternative medicine (CAM) and conventional medicine from the National Center for Complementary and Alternative Medicine. Conventional medicine is used to describe medicine as practiced by Medical Doctors (MD's) and Doctors of Osteopathy (DO's). Conventional medicine is also known as Western medicine, orthodox medicine, or regular medicine. Complementary medicine is used *together* with conventional medicine while alternative medicine is used *in place of* conventional medicine.

The term MD (Medical Doctor) is commonly, but incorrectly, used to describe all doctors. Look at a hospital's Physician Directory or flip open the Yellow Pages to

the physician section, and you will see two different sets of initials immediately following the doctor's name – MD or DO. MD's and DO's attend two different types of medical school. While approximately 98% of the medical training is the same, there are differences in philosophy that makes one group more open to CAM.

Doctors who graduate from allopathic medical schools use the title Medical Doctor, or MD. Allopathic Medicine is based on patient centered medical research that follows standardized methods and scientific principles. An example of this is the "double-blind study" often referred to in news reports and articles. The body is separated into systems, and each body system is its own unit unless a relationship with other body systems has been scientifically established. Diagnostic and treatment methods are research based. Historically the focus has been on curing disease, but preventative healthcare has become recognized as a necessary part of disease management. Many MD's consider CAM to be more theory than proven practice because it has not been proven according to the scientific principles taught in allopathic medical schools. The majority of medical schools in the United States follow the allopathic model.

While MD's trained in the allopathic model cite the lack of hard scientific evidence as a reason to beware of CAM, the

Continued on page 8



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reality is they don't practice in a textbook or medical journal. So they can and do use treatments that are not 100% research based. An example would be prescribing a medication for "off-label" use, like when certain antidepressants are used to treat neuropathic pain even though the manufacturer has not researched and labeled the antidepressant as a treatment for pain.

Osteopathic Physicians, or DO's, have a different concept of health. Osteopathic medical schools teach that the body is not a series of systems, but a self-regulating, self-healing unit where the body, mind, and spirit combine to make a person. In addition to using standard diagnostic testing, DO's are taught to take a comprehensive history of the whole person and to use hands on as part of their information gathering. DO's can also use Osteopathic Manipulation of the musculoskeletal and nervous systems to facilitate the body's ability to self-heal. Less than 10% of conventional physicians in the United States are DO's, but that number is expected to grow as the need for individualized primary care and preventative care becomes more accepted.

Once medical training is completed, DO's work in hospitals, operating rooms, the Military, clinics and private practice. They can choose to embrace a holistic approach to health and healing, follow the more common allopathic medical model, or create their own combined model of practice. Guided by the Osteopathic philosophy, 60% of DO's prefer Family Practice, Internal Medicine, and Pediatrics over specializing because these areas enable them to work with the whole person as partners in wellness, in addition to curing disease. Dr. Christopher Laseter, D.O., an Osteopathic Physician in Lancaster, Pennsylvania, uses advanced Osteopathic training to treat children with neurological and behavioral problems. He warns that, like MD's, DO's need specialized training to work with Special Needs children.

When asked about what appears to be a struggle between allopathic medicine and CAM, Dr. Laseter replied, "DO's, by being forced to train in both allopathic and osteopathic schools of thought gain a little perspective in what amounts to a turf battle for hearts and minds. We have a foot in both camps. In the future, patients will demand their physicians be cross-trained in several medical models and tensions will lessen."

Does this difference in philosophy mean that an MD will not support your interest in CAM? Some Medical Doctors have a personal and professional interest in complementary medicine, but their ability to recommend or discuss CAM is limited by

Resources

- The American Academy for Medical Acupuncture (medicalacupuncture.org) has a locator for conventional physicians who are board certified in Medical Acupuncture.

- Members of the American Institute of Homeopathy (www.homeopathyusa.org) include MD's and DO's with an additional interest in homeopathic medicine.

- The American Osteopathic Association (www.osteopathic.org/index.cfm?PageID=findado_main) website has a DO finder database.

While teaching hospitals affiliated with allopathic MD programs will not have DO's on staff, it is still possible to receive medical care through Integrated Medicine programs at some of the same medical schools.

whether the treatment you are asking about has been researched within allopathic guidelines – or if they are aware of the existing research. Some allopathic medical schools are now teaching Integrative Medicine, which combines researched CAM with allopathic treatments. Interested M.D.'s are pursuing additional training and certifications in CAM treatments or partnering with a variety of CAM practitioners to create their own integrated practice groups.

What if you feel that your child's physician is not willing to discuss CAM? The American Academy of Pediatrics Committee on Children with Disabilities Policy Statement on CAM, and children with chronic illness or disabilities, advises pediatricians to respectfully listen to the desires and fears of parents seeking to discuss the role of CAM in their children's healthcare. Dr. Karen Summar, M.D., Director of the Jane and Richard Thomas Center for Down Syndrome at Cincinnati Children's Hospital Medical Center, doesn't sugar coat this dilemma, "Go somewhere else. If you have a pediatrician who won't listen to you about CAM, he probably won't listen to you about other things, either."

Dr. Summar added not to rush into a relationship with any practitioner, conventional or non-traditional. "A doctor or practitioner has expertise in certain areas of medicine, but you are the expert about your child. If something is not ringing true or does not apply to your child, then go somewhere else." She also advises to make an appointment to discuss CAM treatments instead of trying to ask questions at the end of a visit. This way the doctor has time to research how the treatment relates to your child's

- The Consortium of Academic Health Centers for Integrative Medicine (www.amfoundation.org/practitioner.htm#SCHOOLS) has a listing of member programs.

- The Cranial Academy's (www.cranialacademy.org/index.html) members include DO's and MD's who have taken additional training in a specialized branch of Osteopathic Medicine called Cranial Osteopathy

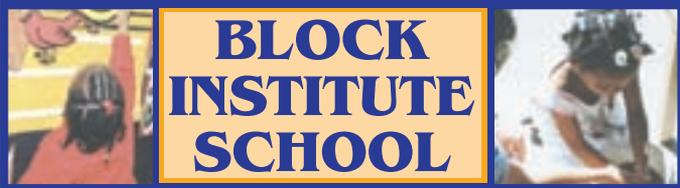
- Holistic Health Now! (www.holistichealthnow.org/web/) is the resource directory of The American Holistic Medical Association (AHMA). AHMA membership includes MD's, DO's, and other CAM practitioners. To download the American Academy of Pediatrics full Policy Statement on CAM and Special Needs Children, visit aappolicy.aappublications.org/cgi/content/full/pediatrics;107/3/598.

needs and there will be time for a more thorough discussion. (See this month's "Did You Know" for more information on discussing CAM with doctors.)

As research on the effectiveness of specific CAM treatments grows, the M.D.'s ability to partner with you in this grows as well. When one of my daughter's Neonatologists heard that I had a background in Aromatherapy he showed me research about using Vanilla essential oil to reduce episodes of Apnea of Prematurity – and he wrote an order for her nurses to use it on a schedule as they would any other ordered treatment. He found a way to introduce CAM into a very traditional medical setting. Don't assume that because a doctor is an MD that he is close minded or stuck working inside the box. There is still room in conventional medicine for creative and intuitive individuals to work within the boundaries of medical science while their patients benefit from centuries of health knowledge. CAM can be a part of the science and art of medicine.

So how do you find a doctor who is open to CAM and qualified to use CAM treatments in Special Needs children? Some online sources for CAM friendly physicians are listed below, and many of these organizations give tips on how to choose a CAM practitioner, but, a physician locator is just a starting point. Dr. Laseter recommends that parent to parent referral between like-minded parents be a part of your search for a physician who shares your family's philosophy of care.

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Yoga works

An alternative therapy for special needs children

BY: TERRI LEONARD

Yoga is an age-old discipline developed and practiced in India and more recently introduced and popularized throughout the United States. Yoga, as it was originally practiced, included the physical discipline of breathing and body postures designed to strengthen and cleanse the body as part of a spiritual philosophy. Some still associate yoga with “religion”. However, here in the United States, most students of yoga practice only the physical forms of yoga. Some of the original Indian language of Sanskrit is still used to name the postures and breathing exercises.

If you are looking for something therapeutic for your child that can be fun, economical, and done in a group, consider yoga. Adaptive yoga for children with special needs is a way to incorporate the benefits of traditional yoga with the particular needs of your child or teen, regardless of their disability.

What is adaptive yoga?

Yoga uses breathing practices and body postures to strengthen muscles, improve balance, increase body awareness, allow greater range of joint motion, promote relaxation and emotional regulation. Adaptive yoga, like other adaptive sports or forms of recreation, uses props and modified practices to allow people with disabilities to experience the same benefits.

For example, a yoga prop such as a foam block, a soft cushion, or even a folded blanket can support the torso or other parts of the body during a stretch. Using a cloth bag filled with sand in a breathing exercise can provide both deep pressure for sensory calming as well as resistance for slack stomach muscles. A yoga strap or belt wrapped can be looped around the feet to help a child extend or hold a stretch. The list of props is endless and many household items such as a bathrobe



belt or a rolled up towel or blanket can be used in place of expensive accessories.

Other modifications include allowing a child to work in a chair, wheelchair, or on a therapy table. Adaptive teachers can also teach partial postures or incorporate yoga movements into a game or song. Adaptations are endless and creativity is key to presenting yoga concepts and practices to children with less attention span, low muscle tone and body awareness, poor ability to communicate or comprehend language, or limited physical ability.

Also, working in a group enables students more opportunity to experience something therapeutic in a social setting. In an adaptive yoga class, students practice social skills and follow the discipline of a formatted yoga practice. Also, in a yoga class, students are encouraged to work at their own level, even while working as a class on the same posture or sequence.

Combining therapies

Other types of therapies can be incorporated into the framework of yoga to benefit a variety of special needs. For example, the child with poor muscle tone, due to a neurological disorder, could benefit from strengthening core muscles of the trunk and building stamina. This can be achieved through a series of yoga postures in the same way as a physical therapist or exercise physiologist might prescribe. An adaptive yoga teacher might work as a trainer with a teen or a class of teenagers, building up to a number of “yoga push-ups”, “yoga lunges”, or breaths during a balance.

Spasticity, tightened or shortened muscles can be addressed through simple joint movements such as pointing and flexing the toes and ankles. In therapeutic yoga, these movements would be practiced slowly and incorporated with alternating inhales and exhales. For students with limited movement, a yoga teacher can use a more hands-



on approach to help the student achieve greater range of motion. Similar to physical therapy, the yoga difference is in the combination of breathing and movement. Many standing postures incorporate ankle flexion combined with weight-bearing for more intense stretching. Coordinated breathing combined with these movements help students hold stretches for longer periods of time, and develop new patterns of sitting and standing.

Traditional yoga practice incorporates all parts of the physical body including the eyes. Vision exercises such as those used by developmental optometrists are a natural part of an adaptive yoga class. Brain Gym, a discipline of therapeutic movement designed to help with learning difficulties, also incorporates many eye exercises into practice. Again, in yoga, these physical movements, even those done with the eyes, are coordinated with breath.

Bilateral motor integration refers to the effective use of both sides of the body to complete a task. Many children with developmental disabilities lack coordination in this area. This affects balance as well as left-right spatial awareness. Bilateral practice is a natural part of many yoga postures. For example, lifting the right arm then the left and coordinating this pattern with the feet to the beat of a yoga chant can become

a fun and challenging game of balance. Students can then be encouraged to hold the postures, gradually learning to balance independently on one foot or the other. These exercises can also be done in a chair or close to a wall or other support for students who are unable to stand or balance.

Balance is an important goal in any yoga practice. Many yoga postures and practices focus on balancing practice. Even if a child is unable to balance well, practice can help improve compensation for a poorly functioning vestibular system, that part of the inner ear from which we get our sense of balance.

To help with proprioceptive ability, the neurological relay of information from the body to the brain, yoga postures promote weight-bearing for the arms, legs and works on improving joint mobility. In more advanced postures, even the shoulders and the head bear some weight. A core component of all yoga postures and exercises is strengthening the muscles of the trunk, especially the abdominals. This helps children with poor posture due to low muscle tone. It can also help prevent fatigue, increase stamina, and promote calming in children with attentional problems. Other sensory and core-building activities may include the use of sandbags, hula hoops, therapy balls, and lavender-scented eye pillows for deep

relaxation.

Vocalization is also incorporated as a form of yoga therapy. Children learn to modulate their voices and their tolerance of noise. They learn to notice how a loud or vigorous group activity can affect their own level of arousal. Vocalizing in a group also gives students with sensory issues an opportunity to appropriately address when noise is too much. We use recorded music (loud and soft), singing (when appropriate), screeching, growling, buzzing, as well as being very, very quiet.

Breathing

Most of us seldom pay attention to the way we breathe. In fact, most people are “shallow breathers”. This means we are not aware of the tendency to breathe into our chest, filling only the upper portion of the lungs. These short shallow breaths result in respiration which is inefficient because you breathe many more shallow breaths to get adequate oxygen into the circulatory system. Shallow breathing actually creates the “fight or flight” stress response in the body. Breathing shallowly and rapidly signals your body to react as if it is constantly responding to a crisis, fatiguing not only the muscles of respiration, but the organs and glands that help regulate the body.

Continued on page 12

Continued from page 11

Breathing, unlike blood pressure or digestion, is one of the few autonomic body systems over which we have control. For example, we can take a pill or change our diet to affect digestion. But, we can immediately and directly slow down and deepen the breath. Deepening the breath encourages greater intake of oxygen, nourishing for all body organs including the brain.

Most children are unaware of their breathing. Children with disabilities may be even less aware of their breath, especially since the muscles and the effects of respiration are not as obvious or rewarding as moving an arm or a leg on command. Some children even habitually and unconsciously hold their breath. Awareness of the breath can be difficult and sometimes confusing for children, especially those with cognitive or processing issues. This can make breathing one of the most challenging practices to teach, yet it is the most important.

For children who struggle with symptoms of emotional regulation, mood swings, anxiety, or lethargy, breathing techniques can help to modulate the body. The rhythm of breath is a constant companion, a tool that can be used for focus of a busy mind and a racing heart. The sound of the breath, too, can be used to calm and center a child with anxiety. In the beginning of a class or individual yoga session, we might practice an energizing or invigorating breath.

Beginning students might practice simple breathing exercises like taking a deep breath, holding the breath, and breathing only through the nose. Teachers can use belly sandbags to provide sensory input to the muscles surrounding the diaphragm. Different breathing techniques can be modified for children such as "bee breath" where the child makes a buzzing sound on the exhale. This is both soothing for the sensory system and helps focus the attention on lengthening the exhale in a fun way. When the room is filled with the sound of buzzing exhalers, children can have fun,

make noise, and practice breathing. Bunny breath is done by rapidly breathing out and in through the nose and helps children become aware of and practice breathing control. A simple practice like counting the breaths can serve as a tool for students who have difficulty sustaining attention.

Body awareness

One of greatest benefits of yoga for children with special needs is increased body awareness. Coordinating breathing and movement together becomes the first level of work. For example, lifting an arm on the inhale and lowering on the exhale not only helps with motor control and planning, and provides an inner sense of rhythm.

Identifying muscles and parts of the body as they are being used gives students a sense

If you are looking for something therapeutic for your child that can be fun, economical, and done in a group, consider yoga.

of power and self-esteem. For example, being able to correctly identify the thigh, ankle, wrist or chin helps kids embody the words they hear used so often. More complex tasks include learning to flex or tighten a muscle. They can learn, in a real body sense, what it means to relax. They practice noticing and being able to point to or even name where they feel a stretch, a tension, or other sensation. Students can learn the anatomical names of muscles, bones, and the locations of joints in their own bodies as they practice. More advanced students can even learn which postures and exercises stretch or strengthen a particular muscle group.

Finding a yoga teacher

Yoga is often not thought of as therapy.

Yet, there is a growing body of practitioners who use the methods and techniques of yoga as a therapeutic tool in various populations, setting, and disabilities. Some are licensed in other medical fields such as physical, occupational, or recreational therapy. Others may be yoga teachers who adapt traditional yoga practices to meet the needs of the specialized population they are teaching. Some have specialized training and certification from a yoga therapy program. These programs are growing to meet the needs of certified yoga teachers who want to specialize in the therapeutic application of yoga.

Clearly, people are recognizing that yoga as a stand-alone therapeutic tool or combined with another discipline can be of great benefit for those with disabilities and in need of physical rehabilitation. Yoga is especially suited for use in school systems for both students with and without disabilities.

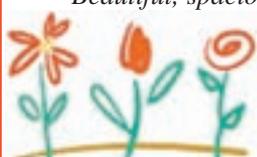
Teachers can work with individual students in a medical setting or private studio. Insurance reimbursement is rare unless the teacher is also a licensed medical practitioner or the session is performed under supervision of a licensed person.

Unfortunately, there are few who specialize in the disabilities of children. However, this is a field in which we will likely see future growth. If you cannot find a person who is practiced at teaching yoga to children and who understands disabilities, consider creating a class of your children's peers. Consult with an occupational therapist to help modify and adapt postures to meet the needs of the class, or consider taking some yoga training yourself. Some of the best adaptive teachers are parents of children with disabilities. As you know, we are the most experienced at understanding our children's special needs.

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New leash on life

Service dogs give independence to kids with disabilities

BY: NANCY FLANDERS

The family dog can wear many hats – running companion, watch dog, vacuum cleaner - but for families of a child with a disability, a dog can mean the difference between life and death. When Wendy Givens' son Scooter was first diagnosed with autism she knew there would be challenges ahead. At age two Scooter was already running off. It was around this time that Givens learned about autism service dogs and their ability to track children. She kept the idea in the back of her mind thinking it was something that needed to wait to be put into motion until Scooter got older. Then when he was five, the family was vacationing in a neighboring state and Scooter took off at an outdoor mall. By the time they found him he had crossed two streets and was playing in a toy store.

"We were frantic," explains Givens, "and I decided right then

that we needed to get a dog. We feel so strongly that Scooter needs to be out in public and to learn to deal with the public just as they have to learn to deal with him."

Two years ago, at age seven, Scooter was matched with his dog Madison, who is trained in tracking like most autism service dogs. The dog is able to find Scooter should he disappear and he is also a calming force for Scooter when he gets upset. Out in public Scooter is tethered to Madison, so should Scooter try to bolt, Madison plants himself and Scooter isn't able to go anywhere.

"Scooter has not escaped one time since we brought Madison home," says Givens, "We haven't had to use the tracking, but it's nice to know it's there. And Scooter's behavior changes with Madison. He's calmer and he's resigned to whatever we ask him to do. If he gets upset, Madison calms him down. We don't go anywhere without the dog and we're able to be a normal family."

Another story was told to us recently by Jackie Smolinski, who was going through a difficult diagnosis with her son Luke. He was just eight months old but had already experienced numerous seizures, and Jackie began by telling us about the first time.

"It was a pretty terrifying day," says Smolinski, "He woke up from a nap really irritable, moaning in a way I can't even explain... He started seizing but I didn't really know what it was. He was turning blue. I called 911 and by the time they got there Luke was coming out of it. When we got to the ER we were dismissed without any further testing. He had a slight fever so they considered it a febrile seizure."

But Luke's seizures kept coming and he was officially diagnosed with epilepsy.

By the time he turned one he wasn't meeting milestones and had even lost some language. Now, two years later, Luke has

been diagnosed with 16 different conditions including partial trisomy 16 (chromosome 16 duplication), hypotonia (weak muscle tone), dysphasia (difficulty swallowing), and Celiac disease.

"A lot of the times he slept with us at night," says Smolinski, "When he was in his room, we would video tape him at night and watch these videos of him



seizing. It was awful knowing that he was by himself going through that.”

Smolinski heard about seizure alert dogs and in October of 2009 the family went for the final training of their own dog and met Clarabelle. That first night, she alerted them to a seizure and continues to do so consistently, allowing the family to get Luke to a safe spot ensuring he doesn't fall and injure himself. Clarabelle goes to school with Luke and has alerted the teachers each time Luke was about to have a seizure, giving them time to remove him from the classroom.

“It's amazing,” says Smolinski, “She nudges me when Luke is going to have a seizure. She's like another person to take care of, but she has made life easier and brought a lot of benefits. She's cool. She can save his life.”

4 Paws for Ability specializes in training a multitude of dogs for children. Besides seizure and autism dogs, there are mobility dogs that help children who are in wheelchairs or children with balance issues. There are hearing dogs, dogs for children with fetal alcohol syndrome, diabetic assistance dogs, and multi-purpose dogs for children who have more than one diagnosis. Many service dog organizations have a waiting list of a few years, but with 4 Paws, the family raises the \$11,000-\$15,000 it costs for a dog, cutting the wait time down to a matter of months.

“The two things we look for during the application process,” explains 4 Paws founder Karen Shirk, “are whether or not it's safe to place the dog due to behavioral problems on the child's part, such as

biting, and whether or not the family can afford to financially care for the dog.” In 2009 alone 4 Paws placed 106 dogs. They are currently fundraising to build a bigger facility so they don't have to start a waiting list, something that is unacceptable to Shirk, since a child can wander away and die while waiting for a dog.

In addition to helping care for the children, service dogs offer other benefits. They are loyal friends who are able to be with the children during medical procedures. They also act as a bridge to building friendships with other children and

have brought about independence and increased self-esteem for children who have been so dependent on their parents in the past. These dogs bring new life to families.

“We have a little boy that we can take in public and to the park,” says Givens, “People don't realize how huge that is when you have a child with a special need. We can sleep at night knowing that if he gets out we can find him. It was a constant worry that we just don't have now. It's a huge relief. That right there was completely worth getting the dog.”

Side note: Currently the Givens family is in a legal battle with their school district over allowing Madison into Scooter's school. Under federal law, service dogs are allowed everywhere the child would go – restaurants, stores, and schools - however their school district has refused to budge despite proof that Madison helps Scooter to remain calm and avoid meltdowns especially when he is overcome by sensory stimulants that upset him.

“It's amazing. She nudges me when Luke is going to have a seizure. She has made life easier and brought a lot of benefits. She's cool. She can save his life.”



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The balancing act

Some advice on caring for a child with ADHD

BY: ELAINE LERNER, MSW, CSW

It's Monday morning and the start of a new week. Families all over America are getting ready to send their children to school. The Jones family, however, is late once again. Their child won't get out of bed on time. Their child won't listen when they say to get dressed. A simple routine of getting up, getting dressed and getting ready for school creates insurmountable obstacles, conflict, hostility and utter chaos. By the time he gets down the stairs for breakfast, the school bus has already left.

This happens every day. Their child has been diagnosed with ADHD, and they feel out of control and out of balance all the time.

Parents of a child with Attention Deficit Hyperactivity Disorder, or Oppositional Defiant Disorder, must search out schools, teachers, professionals, and other community resources.

They find themselves having to supervise, monitor, teach, organize, plan, structure, reward, punish, guide, buffer, protect, and nurture their child far more than is demanded by the typical parent. They will also need to meet more often with other adults involved in their child's daily life — school staff, pediatricians, and mental health professionals. Their lives are a balancing-act in which they must juggle complex schedules.

However, raising a child with ADHD can elevate parenting to a higher plane. It may be the hardest thing you ever have to do, but it can provide a tremendous opportunity for self-improvement and fulfillment as a parent.

We're all faced with daily stresses. Finances might be tight and difficult to manage. There may be too many things to do in a given day. Relationships might not receive the attention they deserve and they can become strained. There just never seems to be enough time to allow us to spend quality time with our children. We get caught up in the everyday activities of life and we fail to recognize what is most important to us, our children and their future.

The Jones family feels helpless and frustrated. Their expectations for their child



are not being met. They thought life would be easy for them, but their expectations do not take into consideration the reality of their child's disorder. They are disappointed and upset. They blame themselves for their child's inability to succeed at school and to form relationships with others.

What the Jones family fails to understand

is why their child acts and reacts to given situations. They don't understand that their child has a disorder and has difficulty focusing and concentrating on their commands. They don't understand that their child's impulsivity is a part of the disorder. Their child is confused and doesn't know why he behaves the way he does. As one child said

to their mother, "I don't understand why I act the way I do, please help me mommy." Their child feels out of control.

The Jones family is under constant stress. The family reacts to situations as opposed to being proactive. They fail to plan for winning outcomes. They take things personally, and think their child is just acting out. Their child isn't acting out, but is just asking for love in the most unloving way.

A family with an ADHD or ODD child needs to take control of the situation.

Be proactive.

Far too often, we react to our children's behavior on impulse without regard to the consequences and with no plan for what we are trying to achieve. Seeing a situation from a reactive frame of mind can make things look hopeless. It is not what your child does to you that creates these problems, but your response. Take the initiative to change what you do not like in the way you react to your child, and accept the responsibility to make the relationship happen in the way you want it to develop.

Spend time with your child.

Spend special time with your child each day. Be with them for 20 minutes a day in a non-judgmental way. These children are seeking your attention. Spending quality time with your child without giving directions or judgments is the first step in the

process of reconnecting with your child.

Be consistent.

Children with ADHD lack the ability to plan, to be organized and stay focused. This creates confusion as to what behavior is appropriate in a given situation. This can create a feeling within them of instability, lack of safety and lack of control. Being consistent can help provide them with a safe structure and controlled environment in which they can function at a more productive level.

Plan with the end in mind — be goal oriented.

All interactions between individuals are a form of negotiation. Don't just concentrate on what you want your child to do. Concentrate on setting up a behavioral management plan that is goal oriented and achievable. This will enable a child to feel successful and improve their self-esteem. The life plan is based upon wants instead of immediate needs and teaches them the ability to think and plan in a proactive way.

Take care of yourself.

Too often, parents of ADHD children devote too much of their time and energy to their children and, in the process, exhaust themselves. Failing to take time to renew yourself physically, mentally, socially, emotionally and spiritually can cause you to shut down and have less time and energy to de-

vote to your child. The best gift you can give yourself is the gift of self-renewal.

Use a collaborative approach.

ADHD in children often requires medical, education, behavioral, and psychological intervention. This comprehensive multi-modal approach to treatment often includes:

- Parent trainings
- Behavior intervention strategies
- An appropriate educational program
- Education on ADHD
- Individual and family counseling
- Medication, when appropriate

Parent Trainings are often the first step in the learning process. Trainings help educate parents to better understand the nature of the disorder. Conducting meetings in a group approach allows parents to share their experiences with others in a caring and supportive environment. Parents learn how to manage their children on a day to day basis. Trainings help relieve stress in families, bringing them closer together.

Life may still feel like a balancing act, but parents who rise to the occasion often feel a greater sense of accomplishment and bring parenting to a higher level.

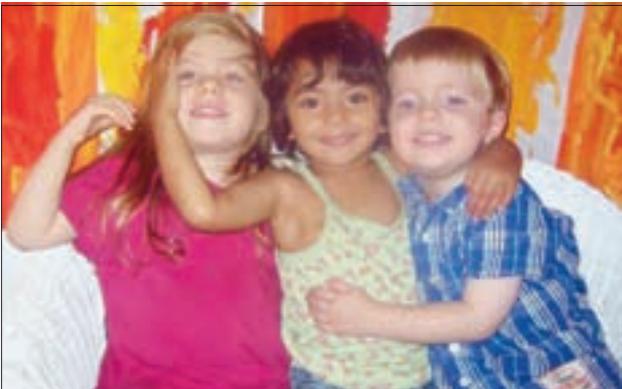
Elaine Lerner, MSW, CSW is an ADHD, ADD and ODD Parent Trainer. She trained with Russell Barkley, PhD, an internationally recognized authority on ADHD. Email: elaine@adhdparent-trainer.com.

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Making the adjustment to a special needs child

Dear Sharon,

Our son is not normal. I don't want to go into details, but we've realized for some time that he has "special issues." My question is not about him, it's about us. We are overwhelmed and depressed and to say "disappointed" is to understate the reaction we've had to the discovery that our child is not what we were hoping for or expecting.

My husband and I are trying to

navigate the difficult road of special everything for our boy and we're not doing badly, but it's how it's affecting my own state of mind, our marriage, and our other child that worries me terribly. The added stress is enormous and I feel myself sinking into despair.

Can you give me any advice as to how I can cope better with the burdens, decisions, and responsibilities that I find suffocating?



Dear Mom,

Juggling the needs of a child with special needs can be overwhelming and discouraging to any parent. Thank you for being so honest about what it has been like for you.

Here are some ideas that might help.

The loneliness of being a parent with a special needs child can be one of the hardest aspects of the job. Many organizations that provide services for children with special needs also have parent groups that meet regularly. I hold two such groups at Parents Helping Parents but there are other places to find meetings as well. For example, the central branch of many of the libraries throughout the metro region run regular workshops for parents of special needs children.

Groups such as these can offer moms and dads an opportunity to learn that they are not alone with their stress, questions and concerns. Groups can also provide an excellent way to get emotional support and practical advice from experienced parents.



PARENTS HELPING PARENTS

SHARON C. PETERS

If you cannot find an in-person group that meets your needs, then the internet can offer online support. One source for this kind of information is www.comeunity.com.

Through contacts with other parents you might make friends with people who also have special needs children. Such relationships can really help. When someone in your life "personally understands" the challenges you face it can make a big difference.

It's also important to try and juggle your son's demands with the needs of the other members of your family.

It is especially important that you and your husband have regular "dates" so that you can enjoy each other's company and get a break from the pressures you face. This might involve hiring a baby sitter or asking friends or relatives for help but it is almost essential. When mom and dad are more connected and have a little time to relax, things go better for everyone.

It can also help to spend time alone with your other child. You both need to remember that life is full of things that are not about special needs. One mom I know sets up her schedule so that she spends at least one afternoon a week alone with her "typical" child doing things he likes to do. Although that has taken a great deal of effort to arrange, it has improved everyone's mood at home. Sometimes, at the end of your fun time, it can be good to give your other child the op-

portunity to express how he or she is feeling about having a sibling that is a bit different. The opportunity to do so can help relieve some of the stress as well.

As a parent of several "special" and "typical" children, I have come to realize that "special" is an excellent description. Like you, I did not always feel at ease with the work I woke up to each day, but I learned that there can be something quite wonderful about a little one who has unusual challenges.

Sometimes the bonds between parents and their special-needs children grow incredibly deep and strong over time. I am not sure of all the reasons that this can happen, but perhaps the opportunity to love and give so much to a little one is an amazing gift for a mom or dad, even with the overwhelming work and emotional strain.

Thank you so much for your question, I wish you all the best as you continue to care for your son.

Sharon C. Peters is a mother and director of Parents Helping Parents, 669 President St., Brooklyn (718) 638-9444, 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 SWeiss@cnglocal.com.

www.webfamilyny.com

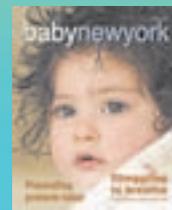


Are you ...

- Looking for family friendly activities?
- Wanting to connect with other parents?
- Interested in parent focused articles to inform and intrigue?

Our growing Web Community is waiting for you!
Places to post, vote and have your voices heard
too. Check It Out Today!

Education, Activities, Party, Camp, Special Needs,
Baby; these are just a few of the reasons why MOMS
are coming to www.webfamilyny.com





Specializing in Services for
Children and Adults

With
Autism & Developmental Disabilities

QUEENS AND LONG ISLAND LOCATIONS

- ★ **Music & Arts Therapy**
- ★ **Weekend Recreation**
- ★ **Medicaid Service Coordination**
- ★ **Stepping Into Adulthood**
(After School Program)
- ★ **At Home Residential Habilitation**
(Services in Your Home)
- ★ **Day Habilitation**
- ★ **Behavioral Intervention Services**
- ★ **Making Connections**
(Socialization Program)

For more information
please call
516-741-9000
Ext. 470 or 271



1501 Franklin Avenue
Garden City, NY 11530
Tel: (516) 741-9000 • Fax: (516) 741-5560
Visit us at www.lifesworc.org and follow us on



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Family Speech Center

Evaluation & Therapeutic Services For Children & Adults

Niki Stagias-Couliandis, M.A., CCC-SLP • Errika Nathenas-Dimitrakis, M.S., CCC-SLP

SPEECH-LANGUAGE THERAPY

- Articulation/Oral Motor Therapy
 - Myofunctional Therapy
- Early Childhood Intervention (0 - 3 Yrs.)
 - School-Age Language Disabilities
- Foreign Accent Improvement Program
 - Adult Language Disorders



Office Visits By Appointment (718) 939-0306
25-32 168 Street, Flushing, NY 11358



Special Needs

DIRECTORY

ATTENTION DEFICIT DISORDER

New York City Chapter of CHADD

PO Box 133, New York, NY 10024
(212) 721-0007
Services Provided: Information and referral for children and adults with Attention-Deficit/Hyperactivity Disorder.

AUTISM

Brooklyn Autism Center Academy

111 Remsen Street
Brooklyn, NY 11201
(718) 554-1027
www.info@brooklynautismcenter.org

Services Provided: BAC is a private, not for profit school dedicated to providing high-quality education to children with autism and support to the general autism community.

Association in Metro Area for Autistic Children

25 West 17th Street, Ground Floor
New York, NY 10011
(212) 645-5005 (877) 645-5005
www.amac.org
info@amac.org

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

Other: Residential Camp

QSAC, Quality of Life & Services for the Autistic Community

253 W. 35th Street, NY, NY 10001
30-10 38th Street, Astoria, NY 11103
And 2509 Broadway, Astoria, NY 11106

New York 11106
(718) 728-8476
www.QSAC.COM
QSACnyc@aol.com

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

Other: After school programs,

behavior management, Day Habilitation, Family reimbursement, In-house/overnight respite, parent support group, Parent training, pre-school, Residential Habilitation, Special education itinerant Teacher

Autism Society of America

Queens Chapter
188-83 85th Road
Holliswood, NY 11423
(718) 464-5735
Brooklyn Chapter
224 Avenue S
Brooklyn, NY 11223
(718) 3369533

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

New York Families for Autistic Children, Inc.

95-16 Pitkin Avenue
Ozone Park, NY 11417
(718) 6413441

Services Provided: NYFAC serves any family within New York that has a child with a developmental disability. Their doors are open to any family member, friend, professional, or student who wants to learn, to develop and to grow. Their motto: "Helping Parents.. Help their children..One family at a time"

BLIND AND VISUALLY IMPAIRED

Jewish Guild for the Blind

15 West 65th Street, New York NY 10023
(212)769-6200 (800) 284-4422
Services Provided: Information and Referral, Individual/Case Advocacy

Parents of Blind Children

(National Federation of the Blind)
471 63rd Street, 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 Street
New York, NY 10022
(212) 821-9707 (800)829-0500
TTY/TDD: (212) 821-9713
www.lighthouse.org
Email: info@lighthouse.org

Services Provided: Community Education, Information and Referral.

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

New York Institute for Special Education

999 Pelham Parkway
Bronx, NY 10469
(718) 519-7000 ext. 315

Services Provided: NYISE supports four quality programs for children who are blind or visually disabled, emotionally and learning disabled and pre-schoolers who are developmentally delayed

CEREBRAL PALSEY

United Cerebral Palsy of New York City

80 Maiden Lane
New York, NY 10038
(212) 683-6700
www.ucpnyc.org

Services Provided: Assistive Tech Equipment, Case Management, Community Education, Information and Referral, Residential, Treatment, Vocational/Employment
Other: Day Treatment, Day Habilitation, Early Intervention

DISABILITY GROUPS

Brooklyn Center for Independence of the Disabled

(BCID)
27 Smith Street
Brooklyn, NY 11201
(718) 998-3000/TTY/TDD
(718)998-7406
www.bcid.org

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

Catholic Charities Office for the Handicapped

191 Joralemon Street
Brooklyn, NY 11201
(718) 722-6000
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

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

Children's Aid Society

150 E. 45th Street
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 East 22nd Street, Room 303
New York, NY 10010
(212) 254-8900
www.cssny.org
Services Provided: Case Management, Information and Referral

Developmental Disabilities Center St. Luke's Hospital

1000 Tenth Avenue
New York, NY 10019
(212) 523-6230

Continued on page 22

Special Needs

RESOURCE GUIDE

Continued from page 21

Services Provided:

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

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

Early Childhood Direction Center

New York Presbyterian Hospital
435 East 70th Street
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

Staten Island University Hospital,
Spring Building
1034 Targee Street, Rm 107
Staten Island, NY 10304
(718) 390-4737

Services Provided: Community Education, Information and Referral
Other: Preschool programs, transportation, medical, educational, And social services, parent education programs and resources.

Early Childhood Center

Children's Evaluation and
Rehabilitation Center
1731 Seminole Avenue
Bronx, NY 10461
(718) 430-8900

Services Provided: Treatment
Other: Parent Support Groups

EIHAB Children's Services

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

Bronx – Jacobi Medical Center
Special Needs Clinic
(718) 918-4027

Services Provided: Connects disabled children

To service providers, advocates, helps with entitlements, Medicaid wavers, financial assistance, care coordination.

Guild for Exceptional Children

260 68th Street, Brooklyn, NY
11220

(718) 833-6633

www.gecbklyn.com

mikefer@gecbklyn.org

Services Provided: Early Childhood Education, Day Habilitation Program
Other specialized Services

Heartshare Human Services

12 Metro Tech Center, 29th floor
Brooklyn, NY 11201

(718) 422-4200

www.heartshare.org

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

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

120 West 57th Street
New York, NY 10019

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 Street, Flushing, NY
11354

(718) 445-3929

Individuals Served: All
Developmental Disabilities

Learning Disabilities Association of New York City

27 West 20th Street, Room303
New York, NY 10128

(212) 645-6730

www.ldanyc.org

Services Provided: Information and Referral, Individual/Case Advocacy

Mayor's Office for People with Disabilities

100 Gold Street, New York, NY
10038

(212) 788-2830

www.nyc.gov/mopd

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

Metro New York Developmental Disabilities Services Office

75 Morton Street,
New York, NY 10014

(212) 229-3000

www.cs.stste.ny.us

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

New York City Department of Health Borough, Physically Handicapped Children's Program

2 Lafayette Street, Box 34,
11th floor

New York, NY 10007

(212) 676-2954

Individuals Served: Children with Severe Chronic Illness or Physical Disabilities

Services Provided: Information and Referral, Treatment

New York City Department of Social Services

250 Church Street
New York, NY 10013

Services Provided: Information and Referral

Other: Services vary by county

Partnership with Children

50 Court Street
Brooklyn, NY 11201

(212) 6899500

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.

YAI/National Institute for People with Disabilities

460 West 34th Street, 11th floor

New York, NY 10001
(212) 5637474

TTY/TDD: (212) 290-2787

www.yai.org

link@yai.org

Services Provided: Assistive Tech Equipment, Case Management, information and Referral, Residential Treatment, Vocational/ Employment.

Other: Early Intervention, pre-school, health care, Crisis intervention family services, clinical services.

Day programs, recreation and camping.

DOWN SYNDROME

Association for Children with Down Syndrome, Inc.

2616 Martin Avenue
Bellmore, NY 11710

(516) 933-4700

www.ACDS.org

Counties Served: Nassau, Suffolk, Kings, Queens

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

Other: Recreation Program

Association for Children with Down Syndrome, Inc.

4 Fern Place, Plainview, NY 11803
(516) 933-4700

www.ACDS.org

infor@ACDS.org

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

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

Special Needs

RESOURCE GUIDE

Community Legal Services Corp.

1360 Fulton Street
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.
Board of Visitors, Staten Island

Developmental Center

1150 Forest Hill Road
Staten Island, NY 10314
(718) 983-5200

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

Brooklyn Bureau of Community Services

285 Schermerhorn Street
Brooklyn, NY 11217
(718) 310-5600
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

The Bronx Organization for the Learning Disabled in New York

2885 St. Theresa Avenue
Bronx, New York 10461
(718)430-0981
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

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.

EPILEPSY

Epilepsy Foundation of Metropolitan New York

257 Park Avenue South, Suite 302
New York, NY 10010
(212) 633-2930
www.epilepsyinstitute.org
epfndny@aol.com

GENERAL

Advocates for Children of New York

151 West 30th Street, 5th floor
New York, NY 10001
(212) 947-9779

www.advocatesforchildren.org
Services Provided: Advocate for educational rights in the public school

Association for the Help of Retarded Children (AHRC) New York City

83 Maiden Lane, New York, NY 10038
(212) 780-2500
TTY/TDD (800) 662-1220
www.ahrcnyc.org/

Services Provided: Case Management, Community Education, Information and Referral, Individual Case Advocacy
Legal Advocacy, Residential, Vocational/Employment
Other: Camps, school and respite

Bronx Children's Psychiatric Center

1000 Waters Place
Bronx, NY 10461
(718) 239-3639
Services Provided: Community Day Treatment, Intensive Case Management, Crisis Intervention

Brooklyn Children's Center

1819 Bergen Street
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 East 57th Street
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.

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

515 Madison Avenue, 20th Floor
New York, NY 10022
(212) 353-8353

www.marchofdimes.com
Services Provided: Community Education, Information and Referral.

Lawyers for Children, Inc.

110 Lafayette Street, 8th floor
New York, NY 10013
(212) 353-6420 (800) 244-2540
www.lawyersforchildren.com
Services Provided: Future Planning, Information and Referral, Legal Advocacy

Legal Aid Society of New York City

199 Water Street
New York, NY 10038
(212) 577-3346 (347) 245-5132
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

Maidstone Foundation

1225 Broadway, 9th floor
New York, NY 10001
(212) 889-5760

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.

MFY Legal Services, Inc.

299 Broadway, 4th floor
New York, NY 10007
(212) 417-3700

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

New Alternatives for Children

37 West 26th Street
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.

New York Lawyers for the Public Interest, Inc.

151 West 30th Street, 11th floor
New York, NY 10001-4007
(212) 244-4664
www.nympi.org

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

SKIP OF New York

213 W. 35th Street 11th floor
New York, NY 10001
(212) 268-5999
www.skipofny.org

Services Provided: Skip (Sick Kids Not Involved People) of New York is a nonprofit organization whose mission is to provide advocacy and support by providing access to all necessary services for families who care for their chronically ill or developmentally disabled children at home.

Continued on page 24

Special Needs

RESOURCE GUIDE

Continued from page 23

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 East 16th Street
New York, NY 10003
(212) 677-4650

infor@resourcesnyc.org
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 Avenue 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.

Shield Institute for the Mentally Retarded and Developmentally Disabled

144-61 Roosevelt Avenue
Flushing, NY 11354
(718) 939-8700
www.shield.org

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

Sinergia, Inc.

134 West 29th Street, 4th Floor
New York, NY 10001
(212) 643-2840
www.sinergiany.org
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 Children and Youth Day Treatment Center

777 Seaview Avenue
Staten Island, NY 10305
(718) 6672691

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

Staten Island Developmental Disabilities Services Office

1150 Forest Hill Road
Staten Island, NY 10314
(718) 983-5200

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

Staten Island Division, March of Dimes Birth Defects Foundation

1173 Forest Avenue
Staten Island, NY 10310
(718) 981-3000

www.marchofdimes.com
Individuals Served: All Developmental Disabilities

Services Provided: Community Education, Information and Referral

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.chchearing.org
info@chchearing.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 Street
East Elmhurst, NY 11370
(718)350-3300
TTY/TDD: (718) 350-3056

www.lexnyc.org
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.

MUSCULAR DYSTROPHY

Muscular Dystrophy Association

1140 Avenue of the Americas
Suite 1801
New York, NY 10036
(212) 679-6215
www.mda.org

Services Provided: Assistive Tech/Equipment, Case Management, Community Education, Future Planning, Information and Referral, Legal Advocacy, Treatment

Developmental Disabilities Service Offices

Information courtesy of the NYS office of Mental Retardation and Developmental Disabilities.

New York State Office of Mental Retardation and Developmental Disabilities

44 Holland Avenue
Albany, New York 12229
Information Line 1-(866)-946-9733
TTY:(866) 933-4889
www.omr.state.ny.us

Developmental Disabilities Service Offices by borough:

(Brooklyn)

Brooklyn Developmental Disabilities Services Office

888 Fountain Avenue
Brooklyn, NY 11208
Phone: (718) 642-6000
Fax: (718) 642-6282

(Long Island)

Long Island Developmental Disabilities Services Office

45 Mall Drive
Commack, NY 11725
Phone: (631) 493-1700
Fax: (631) 493-1803

(Manhattan & The Bronx)

Metro NY Developmental Disabilities Services Office

75 Morton Street
New York, NY 10014
Phone: (212) 229-3000
Fax: (212) 924-0580

(Queens)

Bernard M. Fineson Developmental Disabilities Services Office

80-45 Winchester Boulevard
Building 12
Queens Village, NY 11427
Phone: (718) 217-4242
Fax: (718) 217-4724

(Staten Island)

Staten Island Developmental Disabilities Services Office

1150 Forest Hill Road
Staten Island, NY 10314
Phone: (718) 983-5200
Fax: (718) 983-9768

Institute for Basic Research in Developmental Disabilities

1050 Forest Hill Road
Staten Island, NY 10314
Phone: (718) 494-0600
Fax: (718) 698-3803

Expert Professional Orthotic Services



• **Pediatrics** • **Adolescents**
...molding futures one orthoses at a time

**Does your child have
a neuromuscular
disorder or orthopedic
condition?**

- Difficulty walking?
- Limited function?
- Poor endurance?
- Poor balance?
- Limited range of motion?
- Low tone?
- Developmental delay?



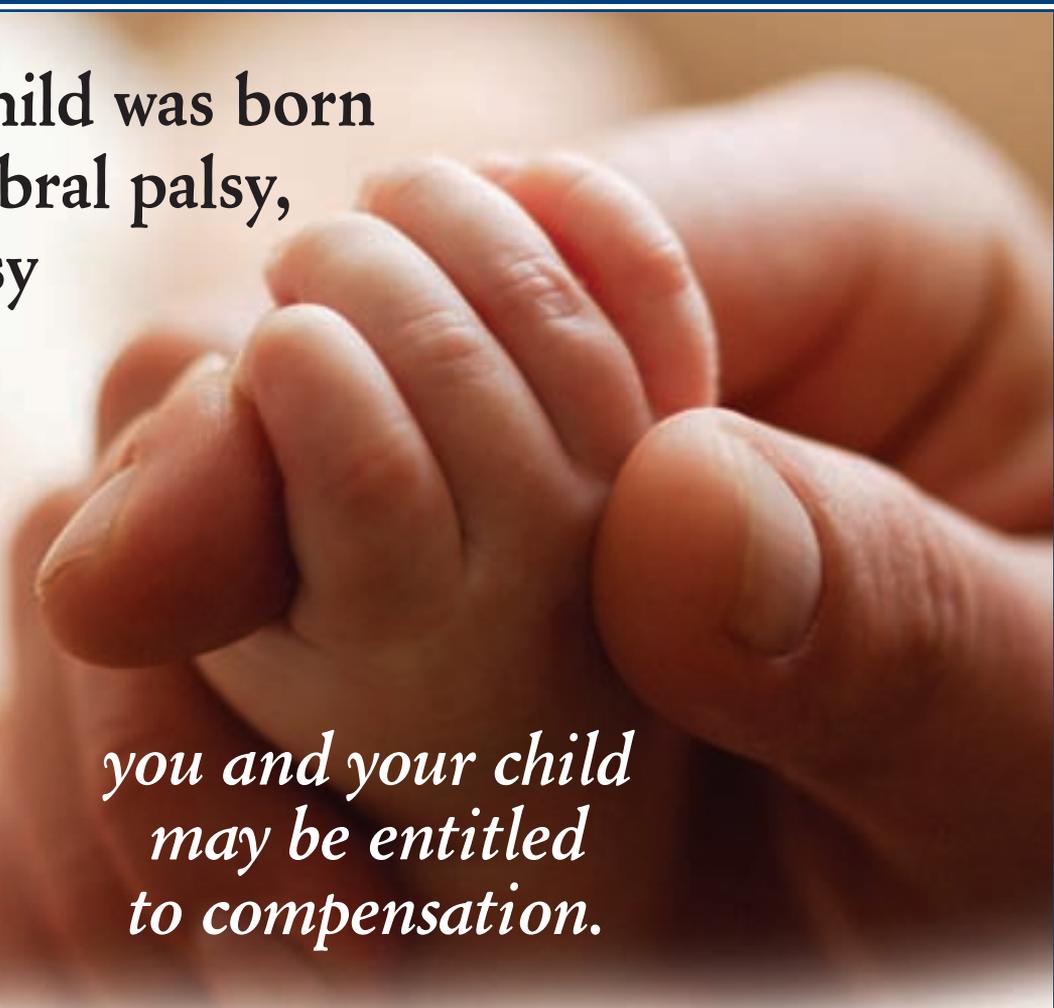
Call for a FREE Evaluation



CentiPede's O&P LLC

**4210 13th Avenue
Brooklyn, NY 11209
(718) 484-1700
www.CentiPedeNYC.com**

**16 Years Clinical Experience
ABC Accredited Facility
Medicare & Medicaid
HMO's & Private Insurance**



If your child was born
with cerebral palsy,
Erb's palsy
or other
birth
injury...

*you and your child
may be entitled
to compensation.*

Childbirth should be a joyous occasion, but sometimes things go wrong – and a baby may be injured. This birth trauma may be a natural result of being born. In other cases, it could have been avoided. At Birbrower & Beldock, P.C. we can help determine if the trauma is natural or a result of medical negligence. We use our decades of experience to investigate every possible cause of a birth

injury to ensure that you and your child receive maximum compensation for any injury your child has sustained due to medical or hospital errors. Your right to file a claim is limited. Don't let your child's right to compensation expire. If you feel your child has been

injured as a result of a birth trauma or medical negligence, please call us today – for a free consultation – to discuss your case.



For your convenience, we are available to visit you at your home or hospital.

SERVING MANHATTAN, BROOKLYN, QUEENS, BRONX AND STATEN ISLAND – CALL TOLL FREE

1-800-587-4878

www.bandbnylaw.com