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This is our 14th year of producing our Special Child magazines, and this year we’re delighted to add on Westchester/Rockland to the mix. The task of parenting a child with special issues is a daunting one. The resources needed to manage this kind of parenting deserves to be plentiful. It has always been our goal to help in what ways we can, to create a community of support that adds to the mix.

With that in mind, many generous professionals have lent their expertise and knowledge to this effort over the years and this issue is no exception.

Judy Miller gives us the seven traits/habits to make parenting special needs kids more effective, and additionally expounds on advocating for your child. She herself has four children who all have different special needs, talking about commitment. Her pieces come right from the heart.

Myrna Beth Haskell gives us insight into recognizing auditory processing disorder, and Sharon Peters answers a parent who is concerned about her other children and how parents’ attention to their autistic child may be affecting their other kids. This parent wants to make certain that all their children are getting the proper love and attention.

There is a very special camp on Staten Island for kids with pediatric cancer and our Parenting Media Award Winning writer Tammy Scileppi has presented us with a wonderful profile of the soon to be open Sunrise Day Camp.

These are just a few of the interesting articles you will find in this issue. If there’s any topic you really want us to cover and write about, please drop me a line to family@NYParenting.com and we’ll do our best.

All children are a miracle, but some require more attention, care, and patience. Children with special needs and their parents require and deserve strong systems of support and it has been and continues to be our intent to add to this equation.

Thanks for reading.

Susan Weiss-Voskidis, Publisher
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 Autism Spectrum Disorders.

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My son was assessed and diagnosed with attention deficit hyperactivity disorder last winter. After consulting with our pediatrician, we decided to medicate him. I received a lot of criticism from people in my life when we made this decision, as if we were doing something that was harmful to him, rather than choosing the best solution to help him with his health issue.

Mental health is just as important as physical health, yet there is such a stigma around mental health issues. I just wanted to shout, “People! It’s real. It’s not a made up thing that ‘lazy parents’ resort to, because they can’t discipline their child. Would you keep your child from an antibiotic that they needed? Would you withhold insulin? Of course you wouldn’t.”

Mental-health issues stem from illness in the central nervous system, and should be prioritized as high as any other health condition facing our children. As many as 20 percent of children in America have some sort of mental health issue, but according to research by ScienceDirect.com, parents remain overwhelmingly under educated about children’s health issues and resources.

Our children need access to good mental health programs across the United States. A recent study from the U.S. National Center for Health Statistics found that one in 13 school-age children is taking one or more prescription medicine for behavioral or emotional issues. The data was derived from the National Health Interview Survey, which continually collects information about U.S. health and health care. The researchers could not identify specifically what the children were being treated for, but in their expert opinions, the most likely disorders are attention-deficit and hyperactivity disorders, anxiety, and depression.

Is it possible that these medicines are being over- or improperly diagnosed? Yes. However, there are still many children who desperately need mental health attention and are not receiving the care they need. I have known from the time my son was 3 years old that he behaved differently than other children. For many years, I believed it was my fault. I thought I was failing him as a parent, and these were disciplinary issues. I was wrong.

I began to do my research. Once he reached second grade, my son was falling
He is so much more interested in school. His teacher remarked that he was “a different kid.” He is so much more interested in making Ds and Fs to As and Bs. He was really focused on his schoolwork. Within two weeks, he went from being a D to an A, which was a great improvement. His teacher explained that he was “a different kid.” He is so much more interested in school.

My husband and I agreed to have him evaluated, followed by a family meeting with his doctor and a determination that medication was the right avenue to take at that juncture.

I thought his doctor explained it to us so well. She told us to imagine that all the street lights in the city went out. It would be crazy to try to control traffic. And that, essentially, is what is happening in his brain. There are no working traffic lights, and he needs the medication to help his brain restore order. He needed to be able to focus so that he did not fall farther behind in school.

I was still nervous about the impact of the medication, but I knew it was the right thing to do. Within two weeks, he went from making Ds and Fs to As and Bs. He made the B honor roll for the first time. His teacher remarked that he was “a different kid.” He is so much more interested in school. We still have our challenges — like the morning routine in particular — but we’ve seen great improvement.

Parents and teachers need to be informed about the support resources that are available for children and teens who may be suffering from mental health issues and trauma.

When left untreated in children and adolescents, mental health problems can result in negative and sometimes tragic consequences. These may include dropping out of high school, substance abuse, juvenile detention, physical health problems, low self-esteem, and even suicide.

Associated costs, both financial and human, are wide and can impact not only the child, but his family, community, and beyond (as much as $247 billion per year, according to the Annual Report on Health Care for Children and Youth in the United States).

If you are struggling with a child that you feel may have some type of mental health issue, please don’t be afraid to seek out help. Mental health is such an important aspect of overall health.

Children suffer from mental health issues just as severely as adults, yet access to good care for children with mental health issues has been a lower priority. But these issues are real, and most of the disorders are treatable. It is time to end the stigma around mental health issues in children.

Alexa Bigwarfe is a freelance writer and the mother of three small children. She writes about children’s health issues and is passionate about bringing awareness to the need for better mental health programs.

Resources
Find more information here:
www.sciencedirect.com/science/article/pii/S1876285914002538
www.kidsmentalhealth.org/
www.ffcmb.org/awarenessweek/toolkit
Specific resources for young adults: http://archive.samhsa.gov/children/youngadult-home.asp

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The right help for your autistic child

BY JAMIE LOBER

When armed with relevant information, parents can cope and even flourish with kids with autism. The first thing to realize is that because every child with autism is different, your child's needs will be different as well. To get him the best help, explore all available options including educational, therapeutic, biomedical, nutritional, and more.

"It can be challenging to get direction and insight, and other parents are often the best first starting point to get information to help your child," said Kim Mack Rosenberg, president of the New York Metro Chapter of the National Autism Association. Do not be afraid to ask questions of early intervention therapists.

"Without violating HIPPA laws, therapists cannot name names, but may say another kid they work with is trying a gluten-free diet and he has seen great things," said Rosenberg.

By having a network or even getting involved in the New York Metro Chapter of the National Autism Association you can expose yourself to regular speakers, events, and resources including medical, biomedical, and behavioral strategies to calm your child.

There are no guarantees with treatments, but for the best prognosis, try to identify a child with a similar profile to your child.

"If you see a child that has a similar profile and seems to be doing well, talk to that parent, and ask if you can buy him a cup of coffee and talk about what he is doing for Susie that might help you with Timmy," said Rosenberg.

Whether it is a traditional or nontraditional therapy or alternative medicine approach, talk to the practitioner and make sure you are comfortable. If someone is not willing to answer your questions and you do not feel at ease, it is probably not a good match for your family. Most importantly, you want to have a speech therapist and occupational therapist on board. Some kids have more physical needs and have a physical therapist. If a child has a seizure disorder, a neurologist will be part of the team as well.

As for behavioral and educational therapy, applied behavioral analysis produces great results for some kids.

Social-based therapies
"There are other programs like floor time, sunrise, and relationship development intervention which are a little bit more social-based than traditional applied behavioral analysis, but there are a lot of hybrid programs because practitioners, schools, and parents are seeing benefits of a hybrid approach," said Rosenberg.

Art and music therapy can be beneficial to certain kids. The occupational therapist will hone in on sensory needs.

"Some are sensitive to sound or light and a noise that may not bother you, like the humming of fluorescent lights, but it can be completely distracting for kids with autism," said Rosenberg. Others may be hypersensitive or hyposensitive, meaning that a child may not be able to tolerate the small tag on the inside of his shirt, or, on the other extreme, does not feel pain, which creates its own set of dangers and concerns.

When considering all of this, know your child.

"Many children with autism have a tendency to wander or elope, so parents, caregivers, and schools need to be vigilant in monitoring," said Rosenberg. Many are drawn to water and do not know how to swim. "If at all possible, get your child swimming lessons, so that way, if he is near water, he may at least have some ability to try to save himself," said Rosenberg.

Customize their diet
Nutrition can be a challenge for kids on the autism spectrum as a lot of kids like predictable things and want to eat the same foods all the time.

"My son has benefited tremendously from dietary intervention, but I recognize that it is not the right choice and feasible for every family," said Rosenberg. Typically the diet is soy-free, gluten-free and casein-free. "Especially with removing the dairy, often families see a big change quickly, because it only takes a few weeks for the dairy proteins to get out of your system," said Rosenberg. This can be a great approach.
“With my son, we found not only behavioral changes and a calmer child, but also noticed that he had these dark circles under his eyes that the nutritionist called allergic shiners, and they went away, which made him look healthier and no longer exhausted,” said Rosenberg.

Kids with autism are more medically complex than people realize.

“Some have autoimmune issues or immunological issues so you have to find a good doctor who is not just treating it as a mental illness but as a whole body illness that manifests itself in some respects in neurological symptoms,” said Rosenberg.

Communication devices

When you treat underlying medical conditions you will observe improvements in your child’s behavior, cognitive function, and social ability. For those with limited or no verbal capacity, look into getting an augmentative communication device which can be as simple as an iPad.

“Kids are using these devices and becoming less frustrated by their inability to speak, they are calmer and more organized, and are using the device as a step up to speech,” said Rosenberg. Communication also becomes more productive.

Striking a balance

Have a positive outlook.

“Kids with autism can lead healthy and productive lives,” said Rosenberg. The options are endless, but try to strike a balance in your life. “It is important to balance everything you are doing for your child with autism with the rest of your family’s life,” said Rosenberg.

Your child with autism can still engage in sports and participate in activities with other kids. He has more in common with other children than you may realize. “You need some down time, time to relax, and to be you without constantly running, and since a lot of these kids need therapies that they get in school or outside of school, it is a balancing act for everyone,” said Rosenberg.

Jamie Lober, author of “Pink Power” (www.getpinkpower.com), is dedicated to providing information on women’s and pediatric health topics. She can be reached at jamie@getpinkpower.com.

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Parents are natural advocates for their children. We love our children, and we want the best for them.

As a mother of four children, three with special needs, I know how important it is to advocate for my children. There is no one who will be more committed to making sure my children have access to the support, treatment, and education they are guaranteed more than me.

My youngest daughter was my second child to be diagnosed with special needs, and each of my four kids have different special needs. Initially, I was overwhelmed by my lack of knowledge and intimidated by how to best advocate for what she would require in school, when I did not yet know myself. I chose to dive in. Great hope impelled me.

First steps: accept your child’s diagnosis and become the expert about it.

Gather information about your child’s diagnosis, recommended remedial techniques, and treatment. Learn all you can about your child’s special needs. Break the information into terms that you can understand. This will help others appreciate your child’s special needs when you share the information with him.

I needed to fully comprehend my daughter’s diagnosis, and the recommended care, treatments, and therapies. I felt I would be a far more effective advocate for my child if my knowledge about my child’s special need bordered on encyclopedic. I fast-tracked my education.

I purchased books, highlighted passages, and wrote in the margins where I required further clarification, discovered something I desired to learn more about, or wanted to share with others. I went online to reputable websites and printed out articles. I highlighted passages and made notes in the margins. I created an impressive section of resources in my personal library about each of my kids’ special needs.

During each visit, I asked my child’s therapists about treatment and outcomes, recommendations of what to read, what I might expect, and clarification of my questions. I did the same with my daughter’s teachers and therapists when she attended developmental preschool. I took notes, notebooks full of notes. I was driven by my love for her as well as trying to assure she was physically, emotionally, and psychologically safe.

**Become über-organized**

I purchased two three-inch, three-ring binders and index pages with pockets. One binder contained written records — sections for my child’s initial diagnosis and follow-up reports; therapy goals and therapy progress reports; copies of bills; medical paperwork; Individualized Education Plans (the original and future updates); and teacher e-mails, notes, and cards, etc. The other binder was my personal “education primer.” It held three-holed college-lined paper full of my journal entries; questions and the answers to them; definitions of terms — technical and layman; and highlighted recommended resources; and the printed articles about the diagnosis my child had been given. I made sure every paper that went into both binders was dated.

### A therapist’s take on advocating

I asked Carol Foulke, a retired Speech and Language Pathologist with more than 30 years of experience in a public school setting (who served students in elementary through high school), the following:

- From your perspective, what makes a parent an effective advocate for their child?
- What is most often overlooked?
- What gets in the way of parents’ effectiveness?

Here is Foulke’s response:

“One of the most important things that parents can do is to know the state laws regarding special education. That way they know what is within their rights, what is reasonable to ask for, and what to expect.

If parents can let school staff know that they are educated on special education law without threatening or bullying, it can set the tone for working within the legal framework. A huge factor is the parents AND school staff working together as a team for the benefit of the child, and not as adversaries. Be in communication with your teacher of record.

Let them know about significant events (both positive and negative) at home, e.g., if there are changes in medication or dosage, so that staff can help assess behavior changes.

Let the school know if there is a family member in health crisis, or if parents are separating or divorcing, etc. Although these are ‘family matters,’ they can have a major impact on the student’s performance at school. No need to get into too much detail, but let someone know that there is disruption at home.

I think a big issue that can get in the way of parents’ effectiveness is that they focus solely on what they want for their child; it is sometimes very difficult to be unbiased when dealing with our little ones! But remember that the school must take into account the welfare and educational rights of ALL of its students. [Certain] behaviors or poor work habits may be present at home, but not at school, or vice versa.

It can be a fine line to walk for parents … Demanding that their child’s educational needs are met while understanding that difficulties and differences may *not* equal disability under state and federal guidelines.

Bottom line — *work together* and respect the training and experience the school personnel have. *Communicate* with staff and play nice!”
Learn about your child’s rights

Legally, children with special needs are entitled to an “appropriate” education. Your child should have access to “specially designed instruction” (Individuals with Disabilities Education Act) to meet her unique needs. Learn what this means for your child.

Become competent about the “rules of the game.” Research and understand your state’s and the federal education laws and regulations. These federal laws apply to children with special needs:

- The Individuals with Disabilities Education Act (IDEA): http://idea.ed.gov
- Section 504 of the Rehabilitation Act of 1973: http://www2.ed.gov/about/offices/list/ocr/504faq.html

Do a search in your library or online to learn about cases similar to your child’s to answer your questions. Be informed about the procedures you must follow in your school to protect your child’s rights and yours.

Print a copy of the legal rights, regulations, and procedures. Add these to the binder that has your child’s diagnosis information.

Be prepared

Build healthy relationships with your child’s team — therapists, doctors, and school. This encompasses preparation and planning for meetings with your child’s doctors, therapist, and teachers and aides. Be polite, firm, and persistent.

Create a meeting agenda with your objectives: items such as addressing issues or test scores, clarifying treatment or goals, identifying problems, proposing solutions, or to firm up agreements. Focus on solutions. Share this ahead of time with the team members you are meeting with. This allows them to be prepared as well.

Take care of yourself

Parenting a child with special needs is challenging, sometimes downright exhausting. We moms typically give and give, until there is little to nothing left to give. And then we find we cannot be the parents we wish to be for our kids.

Give yourself permission to put yourself first for a minimum of an hour each day. Have someone you trust watch your child if she is at home while you embrace “me” time. Take a walk, sit in silence, garden, or do yoga. Do something that will replenish your mama stores and bring you back to balance.

Advocacy supplies list

In order to be an effective advocate for your child, you need supplies to help you organize the information and resources you acquire. You want to be able to access the information quickly.

Here is a list of supplies that will help you get started:

- Two three-inch, three-ring notebooks (one for your child’s file; one for information about your child’s disability and educational information).
- Index pages.
- Contact log sheet (I kept this in the front of my binder).
- Small tape recorder, or a recording app on your smartphone. Sometimes it is challenging to write when you are listening.
- Stapler and staples, to keep multiple report and update pages together.
- Calendar (I printed blank calendars off the internet and three-hole punched them).
- Loose leaf, three-hole paper, or 8-by-11-inch notebooks with perforated pages that can be added to your binders. I used this paper for journaling as well.
- Three-hole punch for medical, therapeutic, and school paperwork.
- Highlighters.
- Colored pens, if you choose to color code as I did.
- Package of sticky notes (again, multiple colors).

Judy M. Miller is a freelance writer living in the Midwest with her husband and four children. She is a Gottman Institute educator and the author of “What To Expect From Your Adopted Tween,” a guide for adoptive parents, and “Writing to Heal Adoption Grief: Making Connections & Moving Forward,” a workbook for older adopted teens and adopted adults.
The world of grandparenting can be tricky; just try to put yourself in your parents’ shoes for a minute. They have raised their kids already and think they did a pretty awesome job. Now their baby has a baby and they don’t know how to act. All of a sudden their baby, who was brought up on junk food, public school, no seat belts, and television and turned out perfectly, is telling them what to do around the grand kids (no sugar, “we are going to homeschool,” “take the booster seat” and “no screen time”).

Some grandparents turn passive aggressive and do the opposite of what they are asked; some just stop showing up. If you can find a happy medium, you are doing better than most. Check out some common issues parents have with grandparents. I’m talkin’ straight at you, grandparents!

Don’t start a tradition you can’t finish
You are the one who wanted to buy each grandchild a $50 Build-a-Bear workshop stuffed animal and started that tradition nice and early. I realize most people don’t go out and give birth to more than two children these days, but you’d better start padding your savings account, Mee-maw, because I have five kids currently and might have more! If you do something for one, you can bet the others are watching and are going to be bugging me about it constantly! I suggest starting cheaper traditions that are more about time spent together, like taking the kid out for an ice cream and to the dollar store every year for Valentine’s Day.

Don’t parent them; that’s my job
I expect you to spoil them! If I have said, “Go for it” then give them candy, let them...
“Grandparents need to remember that times have changed. Why are there endless repetitions of, ‘It was good enough for you as a baby, so it’s fine for your baby?’”

go on a cartoon binge, and by all means buy them the entire set of Harry Potter books!

Likewise, though, if I ask you to not smoke, drink, or watch “Dexter” around the kids, please respect that.

**Come to stuff! Show up!**
You don’t need an engraved invitation to a Little League baseball game; if I e-mailed you the schedule, I want you to come. If you don’t show up to any of the birthday parties because you are mad at me or too busy, that’s only hurting the relationship with your grandchild. Let’s talk it out.

**Bite your tongue**
As Jen M.L. of the popular People I Want to Punch in the Throat blog says, “You had your chance to [mess] up a kid and now it’s my turn, so pipe down with all the unwanted advice.” Michele Pfeiffer, mom of one, offers, “Don’t be a helicopter grandparent. Let the parents make the same mistakes and learn from them. We all turned out fine.”

Unless your grandchild is in serious danger, it’s best to keep your thoughts to yourself. Share those thoughts instead with your friends at work or the community center.

**Take it easy on the material junk**
Most kids have tons of random junk they never play with. May I suggest a lovely family gift of a zoo membership next Christmas? Or, if you insist on dropping $50 on each birthday, how about a $10 gift and a $40 savings account donation?

**Leave religion out of it**
This is a loaded topic for grown adults, so don’t bring it up around your kids and grand kids. Your job is to love the grand kids and just get along and help out. Asking your grand kids in private why they don’t go to church is not acceptable.

**Nothing stays the same**
Jody Kwan Jones, mom of three, says, “Grandparents need to remember that times have changed. They seem perfectly willing to accept the new technology that makes life easier, like nice cars, computers, fancy televisions, etc. Why then, are there endless repetitions of, ‘It was good enough for you as a baby, so it’s fine for your baby.’ Umnnnn, no, I will not be giving my baby whiskey in a bottle to put him to sleep!”

**Be supportive**
If your grandchild is struggling with something in school or life, it’s not always your kid’s fault. Instead of blaming or saying your grandchild never acts that way around you, ask what you can do to help. Can you watch the other kids while your grandchild goes to therapy? Come over for a while to cook or just sit and read to your grandchild? Maybe your grandchild is struggling with science and you are a chemical engineer. Think, help, instead of snark.

Kerrie McLoughlin’s five kids are very lucky to have six rockin’ grandparents who know how to strike the balance between smothering and neglect. More humor and fun at TheKerrieShow.com.

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I imagine arriving in a different destination other than that which you anticipated. Imagine that you do not have your bags packed for the appropriate activities and climate. You have no maps or knowledge of the customs or language. You do not know what information is correct or know whom to trust. Your plans have changed. Yet, as you are accepting that your destination is permanent, you realize that you have to make the best of it, or it could destroy you. We were so consumed with survival. I was blessed with a healthy child while many of these parents faced the possibility of death, long-term challenges, or disabilities stemming from their children’s premature arrivals.

I also felt thankful that we had dodged a bullet; however, Kingsley’s essay resonated with me as a mother and lodged within my heart. Fast forward years later. My oldest child was a handful and exhausting. He was happy and bright, but often without focus. We chalked this up to him being “all boy.” As his parents, we appreciated his gifts. However, his kindergarten teacher felt otherwise. Unhappily. She called us in for a conference only two weeks into the school year. She told us, “I’ve never had a child like him during my 25 years of teaching.”

We asked her to work with him, to challenge him; he was in his element when challenged. We could tell by the set expression on her face that she was not going to embrace our requests. We were in for a very long year.

Our son was clueless about what was going on. We had many parent-teacher conferences during that year. The last one was in the early spring after we had already made the decision to enroll him in another school with much smaller classes and interactive learning.

Our son thrived in this new school environment, yet his focus continued to lapse. We painfully faced that our son might have some issues, and had him evaluated by a team of professionals to make sure he was not falsely diagnosed. The testing indicated what we had long suspected, but tried to deny: our son had attention deficit hyperactivity disorder.

We chose to address his condition holistically, without medication. We stayed in daily contact with his teachers. We made changes to his diet. We put a behavioral management plan in place.

We saw no improvements. Our son’s grades went up, and then they went down. He was focused in one subject and disruptive in another. There was no pattern throughout the day or by subject matter. His behavior was just as maddening in karate — an activity we thought would help curb his impulsiveness.

Emotionally, we rode the wild roller coaster with him daily. Out of options, we began to consider the possibility of medication, something that was of great concern to us. My husband and I had many long discussions between the two of us, and with doctors, and tears often accompanied these. We continued to straddle the fence.

Our son’s behavior became more erratic as puberty set. We made the decision to go ahead and medicate him. He would take a Class CII drug, a federally controlled substance that could lead to abuse or dependence and carried the possibility of many other serious side effects. Medicating our son was one of the toughest decisions we ever made, but with the arrival of our third...
child and her severe sensory processing spectrum disorder we now underscored the importance of intervention and that earlier was better.

The medication made an immediate difference. Our son was able to focus and control his actions. He could stay on task and out of trouble. His grades moved up and stayed up. His confidence in himself, his abilities, and peer relationships grew. He graduated high school with honors, and received many merit awards to attend college.

We had countless talks about the seriousness of the drug he takes. About the need to monitor him daily and share how he feels emotionally and physically. About how kids would likely ask him for some of the medication when they were under stress — which did happen — and what those consequences could be if he were caught doing so, by us and the law.

Looking back, we put the decision to medicate our son off far longer than we should have. But, when present in the moment, there is rarely the gift of perspective. Parents of children with special needs often struggle with not having the support of others, finding reliable information about options, and moving through the grief of parenting a “less-than-perfect” child.

Dragging my feet, I arrived in Holland, only a different region than I had with my daughter. Slowly, through the years and with my son’s openness about his attention deficit hyperactivity disorder, I’ve become acculturated. Holland is not a horrible, scary place, just different. As Kingsley says in her essay, “You must go out and buy new guide books. And you must learn a new language.” I have. I have embraced being the parent of kids with special needs, thankful that Holland exists and that I can appreciate the very special, wonderful things that it offers.

Judy M. Miller savors time with her kids. She is a certified Gottman Institute educator and the author of “What To Expect From Your Adopted Tween” and “Writing to Heal Adoption Grief: Making Connections & Moving Forward.”
A government survey estimates that one out of every 45 American children has autism spectrum disorder. That 2014 National Health Interview Survey, based on parent reports, reflects a significant increase from the 2011–13 survey that estimated one out of every 80 children has autism.

Experts agree that this rise is the result of increased autism awareness and a diagnostic criteria that captures a wider range of characteristics than previously represented. It is also agreed that, most likely, a combination of environmental and genetic factors are responsible for the increased numbers.

Nonetheless, as the numbers rise, we still know very little about the cause of autism and its increased prevalence. Possible causal factors are hypothetical at best. Without an understanding of the cause, we cannot move toward finding a cure.

Although the cause remains unknown, we do know that Applied Behavior Analysis is the most effective treatment for achieving optimal outcomes for diagnosed children. This has been documented over the last 40 years through extensive, peer-reviewed and replicated research studies.

Until we understand the cause and can decrease the number of children diagnosed with autism, it is important to shift our focus away from surveys, and turn our attention toward providing access to high-quality Applied Behavior Analysis services for all children on the spectrum.

Unfortunately, high-quality services are hard to find. Many of those who claim to practice behavior therapy have very little understanding of the behavioral concepts upon which it is based. Without a solid understanding of the science behind it, these practitioners become locked into a specific protocol and are unable to achieve the flexibility that gold standard Applied Behavior Analysis requires. Blindly following an overly prescriptive treatment program is ineffectual.

In addition to the lack of standards is the problem of those who see Applied Behavior Analysis as a quick, money-making vehicle. The lack of definitive standards, along with the possibility of large profits, leads to poorly-trained staff, minimal supervision, and substandard programs. This distorts the true nature of the therapy and promotes negative myths regarding its effectiveness. Ultimately, this harms the most vulnerable members of our society.

One example of the ineffectual use can be seen by looking at a widely used teaching technique called Discrete Trial Teaching. This is viewed by many of those with limited knowledge as a rigid procedure that is only used in highly structured settings to teach very specific skills. Many view it as synonymous with Applied Behavior Analysis, when in truth, behavior analysis is comprised of dozens of procedures. Inexperienced providers typically learn to implement trial teaching as a specified series of steps without truly understanding the behavioral concepts upon which the procedure was formed and shaped over a period of many years.

Skilled practitioners, however, are able to implement trial teaching with a great deal of spontaneity and natural flexibility while remaining true to the underlying behavioral concepts. They do not need to memorize a script; they are able to respond to the child’s behavior and adapt the procedure minute by minute, depending upon the needs of the child. Children are able to progress quickly and generalize their skills more rapidly as a result of this more dynamic approach.

Those of us who have been in the field for many years are aware of the rampant nature of poor Applied Behavior Analysis programs. Parents must be informed, so that they can access, evaluate, and demand high-quality services. They need to make sure that those teaching their children have received intensive, supervised, hands-on training along with on-going education over a period of years. Yes, years are required to achieve this level of expertise! Would you hire a so-called lawyer who has had only a few workshops on practicing law?

Parents need to be wary of practitioners who claim they are certified and know Applied Behavior Analysis. Professionals must recognize just how complex it can be, and make certain that those they hire are skilled and competent. Those of us running programs must demand intensive training for our staff, and discontinue the practice of certifying those who have received limited training.

It is time for an overhaul in the field of Applied Behavior Analysis. Parents and professionals must work together to set the wheels in motion.

Ellen Barnett is the assistant director at Comprehensive Kids Developmental School.
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Many parents of special-needs children appear to parent with grace, balance, and energy. In addition, they also seem remarkably stress-free and organized. How, in the face of all of these challenges and more, do they keep it together? What habits do they embrace that allow them to be highly effective parents for their children?

They are proactive and advocate for their children and educate others
Parents become experts about their children and their needs. They conduct ongoing research; ask questions of therapists, doctors, specialists, and other professionals; and keep an organized binder full of notes and important information. They create and add to their at-home special-needs libraries. They are knowledgeable about vernacular, treatments, and services. They are well versed in the state and federal laws that regulate services for their children.

Because of their knowledge, parents are effective educators of their child’s faculty and staff. They are powerful advocates for treatment, services, and support in and outside of school.

They maintain a sense of ‘normalcy’ within the family
Effective parents realize that although everyone in the family is affected by the child’s disorder, they are not defined by it. Parents work to ensure that siblings have childhoods and do not take on adult responsibilities. They encourage siblings to spend time with their friends.

Parents are proactive about training other family members, friends, and sitters about how to care for their child so that they can have time for themselves — individually and as a couple, perhaps going out on weekly dates. They also spend time in the company of other adult friends.

They take care of themselves
Parents nurture their needs, and recognize that doing so is important for themselves as well as their children. Effective parents ad-
When parents lead lives that are stress-free and balanced, all family members, especially children, win. Effective parents reduce stress in their lives by setting time aside each day to promote calm and centering.

dress themselves holistically, meaning they take care of their physical, emotional, psychological, and spiritual needs.

They eat nutritious, unprocessed food and don’t skip meals. They make sure their bodies are properly hydrated.

They schedule time for regular exercise, by themselves or with friends. They engage in activities that offer creative or intellectual enrichment.

They manage their stress

Effective parents are intentional about reducing stress in their lives by setting time aside each day to promote calm and centering. They adopt practices such as prayer, deep breathing, and meditation to replenish their inner reserves. Rebecca, a mom of a son who has a diagnosis of autism, says, “When in doubt, I choose grace, to forgive people for letting me down, or for rejecting my son, for whatever reason.”

When parents lead lives that are stress-free and balanced, all family members, especially children, win. Research by the Gottman Institute supports that children fare better emotionally, socially, and academically when parents manage their stress properly.

They make rest a priority

While any parent can tire in her parenting responsibilities, parenting a child with special needs can elevate fatigue to a whole different level. Sometimes parents don’t realize the extent of their exhaustion. I didn’t. My child’s physical therapist pointed this out to me.

Effective parents realize the importance of getting to bed as early as possible, or taking naps to offset the sleep they lose due to their child’s irregular sleep patterns up and down throughout the night.

They surround themselves with energy givers

People are either energy zappers or energy givers. Effective parents opt to spend time in the company of people who lift them up, make them feel confident, positive, and happy. They realize energy givers help them to feel energized, inspired, and motivated. Parents of special-needs children appreciate and need this energy.

They have a support group

Parenting a child with special needs can be lonely, however, there is no need to be alone in the journey. Effective parents are part of or have created a group of parents whose parenting journeys are similar to theirs.

Christy, a single mother of a child with mental health issues shares, “I’ve found that meeting and sharing with people who have raised children with similar issues helps me. They understand what I deal with without me having to explain it. Their support helps me to be calm when I’m with my child.”

Judy M. Miller savors time with her kids. She is a certified Gottman Institute educator and the author of “What To Expect From Your Adopted Tween” and “Writing to Heal Adoption Grief: Making Connections & Moving Forward.”

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What did you say?

Recognizing auditory disabilities

BY MYRNA BETH HASKELL

A child’s difficulty with listening, following directions, interpreting oral information, and other receptive language problems could be attributed to many different disabilities. One of these is called auditory processing disorder. This disorder is also referred to as central auditory processing disorder.

Auditory processing disorder has been misunderstood and misinterpreted by many. In her article “Understanding Auditory Processing Disorders in Children,” Dr. Teri J. Bellis, assistant professor and chair of the Department of Communication Disorders at the University of South Dakota, writes, “The term auditory processing often is used loosely by individual in many different settings to mean many different things. The label APD has been applied (often incorrectly) to a wide variety of difficulties and disorders. As a result, there are some who question the existence of APD as a distinct diagnostic entity and others who assume that the term APD is applicable to any child who has difficulty listening or understanding spoken language.”

It would be counterproductive to jump to a conclusion that a child has auditory processing disorder, because he is having receptive language difficulties. These difficulties could be due to a variety of other learning disabilities such as attention deficit disorder, language processing delays, autism spectrum disorders, dyslexia, and the list goes on. Therefore, understanding the difference between auditory processing disorder and other disorders that also affect language skills is imperative.

What is APD?

According to the National Institute on Deafness and Other Communication Disorders, auditory processing is, “A term used to describe what happens when your brain recognizes and interprets the sounds around you. Children with APD often do not recognize subtle differences between sounds in words. For example, the request ‘Tell me how a chair and a couch are alike’ may be understood by the child as ‘Tell me how a cow and a hair are alike.’”

Diane Phelan, manager of St. Francis Hospital’s Center for Communication Disorders in Poughkeepsie, explains, “Auditory processing is not an issue of the sound getting into the ear or being ‘heard.’ It is really about what the brain does with that sound.”

Bellis agrees.

“In its very broadest sense, APD refers to how the central nervous system uses auditory information. To avoid confusing it with other disorders that can affect a person’s ability to attend, understand, and remember, it is important to emphasize that APD is an auditory deficit that is not the result of other higher-order cognitive or language disorders.”

In other words, the child with auditory processing disorder hears what you say, but something then goes wrong and the words and sounds are jumbled and confused in the child’s brain. On the other hand, a child with language processing difficulties hears the information correctly, but then cannot understand what the information means. This is an important distinction between auditory processing disorder and more general language processing difficulties.

Diagnosing auditory processing disorder

Usually, a child with auditory processing disorder will have severe problems with following directions, but at the same time, is not having a problem attending and sitting still. She might have difficulty understanding speech in noisy environments or being able to tell the difference between words that have similar sounds. She might behave as if she is hard of hearing. Children with the disorder may have difficulty with spelling, reading, and understanding verbal information; however, their performance in classes that don’t rely heavily on listening is much better.

Due to the subtle differences between this and other disorders, a child should be given a battery of other tests prior to a specific auditory processing disorder test.

“You really want to make sure you rule out deficits in other foundation areas of listening and understanding first,” explains Phelan. “For example, if a child has an undiagnosed hearing loss (meaning she cannot hear various sounds adequately), she would likely perform poorly on APD testing. That child could then be labeled and treated inappropriately for APD, when she really has a hearing loss which should be dealt with very differently.”

Phelan reports that children are typically not tested until they reach 7 years of age. This is because their brain function and auditory system are not mature enough before then. Phelan says that formal testing is done by an audiologist. This involves tasks such as repeating back phrases that are sent to one ear while background noise is simultaneously being sent to the other. The child with auditory processing disorder may not be able to focus on the target phrase and filter out the background noise.

The test should only be given once other problems are ruled out. First, a child is given a general audiological evaluation to see that he is able to hear sounds adequately. Then the child would be given a language evaluation. This evaluation focuses on difficulty with comprehension, retention, and expression. If these first two tests don’t show significant problems, the child is then given the auditory processing disorder test.

“If we went straight to APD testing with-
out first ruling out weaknesses in these other foundation areas, we could be over-labeling children and solving the wrong problem,” stresses Phelan.

Help in the classroom

There are a variety of treatment approaches — there is no one treatment for all children with the disorder. Many different classroom modifications are used to help children with auditory processing disorder.

“Typically, classroom modifications can include preferential seating away from hallways, radiators, and fans; tennis balls on the bottom of chairs to help reduce the environmental noise; and use of auditory trainers to improve the signal to noise ratio of classroom settings,” says Kimberly S. Terwilliger, a speech-language pathologist, vice principal at M.C.M. Middle School, and former assistant director of special education for the Kingston City School District in N.Y.

FM devices consist of a microphone for the teacher and an earpiece for the student, which blocks out the background noise so she can focus on the information coming from the teacher. Assisting technology, such as these FM devices (or auditory trainers), is not used with all students.

“Some students respond very well to the use of FM systems and others can be sensitive to the increased auditory input,” says Terwilliger.

Other classroom modifications might include altering the acoustics in the room or providing information and directions using shorter phrasing and simplified language. Therapy is frequently used in conjunction with classroom modifications. Therapy often concentrates on retraining the child to focus on verbal instruction and filter out background noise. Terwilliger says that speech therapy is also provided to “increase auditory memory skills, strengthen phonemic awareness [analyzing sounds and how they make up words], and improve auditory closure skills [children fill in or predict the information they are listening to].”

Phelan concurs that modifications given to students are very individualized. “Five different children can have five different sets of modifications, strategies, or therapy types.” Phelan says that a high percentage of children show improvement with therapy. However, the degree to which a child’s deficits will improve cannot be determined in advance.

No need to feel helpless

If either you or someone at your child’s school suspects that your child has auditory processing disorder, you should first garner as much information as possible from your child’s teachers, speech pathologist, psychologist, or any other adult who has worked in an educational setting with your child. You should also write down all of your own observations about what you’ve perceived to be difficulties with your child’s hearing and language development.

The final step is to bring your child to a communication disorders clinic or other facility where your child can be thoroughly tested by an audiologist and certified speech-language pathologist.

Myrna Beth Haskell is an award-winning author, columnist, and feature writer. Her work has appeared in national and regional publications across the U.S. as well as internationally. For more information, please visit www.myrnahaskell.com.
Great outdoors

Why open-air activity is vital for special-needs kids

BY VASILIOS TSELIOS

Spring is the perfect time to reacquaint your kids with the learning opportunities of outdoor play. Besides the benefits of fresh air, outdoor activity provides the opportunity for constant learning through unstructured and structured play. For an individual with special needs, the outdoor park is a wonderful learning environment. With supervision from a parent or caregiver, every step the child takes becomes a learning opportunity.

Amongst the problems that children with disabilities face are poor strength, coordination, and processing of external information. Children with special needs may not want to engage in play activities due to these difficulties, according to the 2004 findings of researchers J.A. Hay, R. Hawes and B.E. Faught. Yet, according to J.P. Piek and his colleagues, finding an activity that is matched to the level of development of the child can encourage participation. This is why it is important to understand the anatomy of the outdoor activity and its impact on the child.

At any given moment, all children are providing a wealth of information to their parents. They demonstrate their abilities and inabilities when trying to overcome obstacles while participating in activities. It is an indispensable skill for a parent to be able to learn to read the signs her children are providing. This serves as the pathway in providing the best way to overcome challenges that affect the child’s learning.

In an outside environment, children learn to move their bodies in a different way than they do when they are indoors. Just consider how we move our arms when outside in contrast to how we move our bodies while in a fine crystal store. In a park, a child can throw out his arms in the vast space afforded to him. Outdoors, children can yell and scream in the con-
text of play.

Outside, children are unrestricted, they can experience the feeling of inhaling deeply, expanding their lungs, and pushing the air outside through their mouths. We may take this for granted, but to an individual with special needs, all of this is an extraordinary experience.

Bring to mind the feeling of walking in your home or in a school environment. In the school, the doors are extra wide and the surface is smooth and level. In comparison, when we consider a park, this environment offers the child the opportunity to navigate across an uneven, resistive surface. This surface may have depressions, elevations, and other obstacles (rocks, twigs) that forces the child to think and problem solve. Balancing, repositioning, and making judgments about the environment is one reason that outdoor play is such a wonderful and diverse educational experience. It allows for the development of different types of muscle and coordination control while enhancing problem-solving skills.

For a child who may not get out as much, such as a child with special needs, the outdoors represents a great learning environment. Consider the park feels like: as we walk on the grass, the surface is contorted and sometimes unyielding, and at other times, it can throw us off balance. At every given instant when walking in the park, the child is provided with a problem that can be overcome. Additionally, activities allow children to gain self-confidence once a skill is practiced and achieved. In their 1968 research published in the Journal of Applied Behavior Analysis, J. Buell and colleagues demonstrated that through patience, practice, and time while outdoors, children can become independent learners. In doing so, they gain mastery over their environment and become prone to self-learning and more exploratory play.

In taking responsibility for our children, we need to be concerned about providing safe opportunities for learning. Consider several things when promoting such an opportunity: What is the skill you want your child to learn, the activity you want to play, and any safety issues that you feel could arise and hinder play? This all feeds into the child’s brain development, as well as his motor skills’ development.

Some simple outdoor activities include ball play, blowing bubbles, counting rocks, listening for birds and trying to spot them, sitting down, and just visually following a squirrel.

The amount of activities is as endless as the imagination of the adult and child, but the key is the interconnectivity that we create together.

Vasilios Tselios is an occupational therapist in independent practice with more than 10 years experience. Currently his area of focus is autism spectrum disorders and challenging behavior.

Websites to view:
• www.prokerala.com/kids/activities/benefits-of-outdoor-activities.php
• http://kidsjolly.blogspot.com/2011/01/importance-of-outdoor-activities-for.html

For a child who may not get out as much, such as a child with special needs, the outdoors represents a great learning environment.
Dear Sharon,

We have three children. One of our children, a 7-year-old boy, is on the autism spectrum. Naturally, he gets a great deal of our attention. We’re concerned that our two older children (ages 9 and 10) are feeling neglected. They’re good kids and wouldn’t admit to it, but we want to make sure we are able to give our special child the attention he needs, but not at the expense of the other two. It’s difficult, as I’m sure you can imagine.

Do you have any advice for us? Any professional thoughts would be greatly appreciated. We are trying to be good parents to all of them.

Dear parents,

Many parents with special-needs children are rightfully concerned about their ability to juggle all of their children’s needs with so many responsibilities to handle.

Here are some suggestions that can help.

One of the things that can make a real difference is scheduling regular one-on-one time with each child. Doing so often creates important moments for parent and child to strengthen their relationship. It is especially effective when parents can set up these dates on a regular basis, putting them in their calendar as a must-do event on par with an important work meeting.

If dates are planned in advance, it gives each child the opportunity to look forward to the day and think about what he or she might like to do. Letting the child choose the activity and staying away from any adult distractions (cellphone, household talks, conversation with friends, etc.) can help balance the feeling of responsibility that often comes with being the sibling of a special-needs child.

Time with each child can also improve the chances of meaningful conversations about many everyday concerns that can easily get lost in the shuffle. It can also provide opportunities to discuss the specifics of living with a special-needs sibling. Conversations might happen during a date, after school, at bedtime, or during other quiet moments. If a child can manage to communicate any of his experience, it is important for adults to listen without interruption or reassurance. It can be challenging for a child to say what is on his mind, rather than to be protective of a challenged brother or sister.

Find times to be open about the details of a special-needs child’s circumstances, making plenty of time for one or more siblings to ask questions. Again, it is important to keep your explanations concise, as children can easily become overwhelmed by too much adult perspective.

Make sure that all children in the family get to explore interests and activities that make them happy and build self-esteem. Even though scheduling can be hard, it is important to find concrete ways for all siblings to get as much praise and attention in and outside the home as a special-needs young person. Making everything equal can of course be impossible, but all concrete parental efforts in this direction can help.

Let everyone take some time to talk through the benefits of having a special-needs child. Hearing what everyone has to say on this topic can be stress reducing and illuminating for your family.

As you juggle the pressures in your life and work hard to be good parents, take time regularly to appreciate what you have accomplished. I am sure there are many things, and noticing them can help reduce the inevitable feelings of being overwhelmed and guilt that all parents juggle.
At MetLife, our focus on special needs planning is evolving with the families we serve. We recognize that caregivers and their dependents are of all ages and relationships. And while caregivers are aging, dependents are living longer as well.

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A very special CAMP

BY TAMMY SCILEPPI

When a new Sunrise Day Camp opens in Staten Island this summer, welcoming campers from the borough and beyond, children battling cancer and their siblings can experience the joy and healing power that Sunrise Association programs offer.

Childhood cancer does not discriminate; it does not spare an ethnic group, socioeconomic class, or geographic region.

When my son Brian was 16, he was misdiagnosed with advanced lymphoma. But before we found out he was actually cancer-free, the devastating news of the “C-word” sent our family into panic mode and turned our lives upside down! Suddenly, there were visits to the oncologist and surgeon, and throughout, Brian kept asking if he was going to die.

Our priorities changed in a heartbeat. All of a sudden, what seemed important just a week ago, no longer was. All that mattered was that our son would heal.

After a month of hell, a phone call from our family doctor confirmed that Brian was actually suffering from a common illness that affects many teens and young adults — mononucleosis (atypical), and his symptoms mimicked lymphoma. We celebrated the good news (and changed pediatricians, because we felt the doctor should have checked for mono first!).

Looking back, I realize there were lessons learned: about what’s really important in life, and not sweating the small stuff; about the power of hope; about how an illness brings families closer together; and about believing in a higher power.

That harrowing experience gave my family a unique glimpse into another world. A scary one, filled with pain and anguish, that so many families are forced to inhabit once a child is diagnosed with cancer.

Pediatric cancer impacts families

So, I can imagine what it’s like for a boy or girl struggling with childhood cancer — for an active kid who loves sports, or a toddler just learning about the world around him. It’s sad to think that while a child is spending so many dreary days at a clinic getting treatment, other kids are having fun — running, playing, and making new friends.

Now, imagine what it’s like for their worried siblings. They can feel ignored because mom and dad have to go to medical appointments and attend to the child who’s ill.

When a child has cancer, the entire family is affected in profound ways. Everyday life changes dramatically, and the emotional devastation — combined with the financial burden brought on by medical costs — often creates tension and havoc in the home.

Summer camp for patients and siblings

Those difficulties jump-started a dream that has become a reality: in 2006, the first Sunrise Day Camp opened on Long Island.

Over the past 10 years, Sunrise Day Camps and its year-round programs have provided wonderful camping experiences for approximately 3,200 children of all faiths and backgrounds — free of charge. There are currently camps on two sites in New York (one on Long Island and one in Pearl River) and two locations in Israel. The Jewish Community Center of Staten Island, in partnership with Catholic Charities – Staten Island, will host the newest camp location (the only one in the city). In July, this camp will welcome pediatric cancer patients and their siblings from Staten Island, lower Manhattan, Brooklyn, and central and northern New Jersey.

Brothers and sisters get a real camp experience filled with exciting activities, where they can make friends and learn how to deal with their sibling’s illness and their own feelings. And, thanks to the camp’s unique concept, children in active treatment can attend year-round, while they continue with their home doctors and sleep in their own beds each night. During school holiday breaks, campers can enjoy Sunrise Sundays and Sunrise Fun-days.

And parents have peace of mind knowing
that all activities at the camp are designed with special features to best accommodate chronically ill children, with medical personnel always available to provide expert care if needed.

According to Kevin Brosnick, head of the special needs services department at the Jewish Community Center of Staten Island, Mount Loretto is an ideal location for this kind of camp, because it has climate-controlled facilities, and a spray deck, which is especially beneficial for children who can’t be submerged in a pool while they have ports for their medical treatments.

Friendly counselors are there to make sure everyone’s having a good time.

Also new this year is a Staten Island location for SunriseWALKS — an annual fund-raising walk — on June 5 at Catholic Charities’ Mount Loretto (6581 Hylan Boulevard). Sunrise has already raised more than $25,000 from the various teams that have been formed.

Also, for children undergoing treatment who can’t make it to the camp, an inspiring program called Sunrise on Wheels makes those difficult clinic days brighter. A tie-dyed trunk filled with toys, games, and netbooks (for the parents) is rolled into the waiting room, turning a dreary day into a magical one.

**Putting joy back into childhood**

In his introductory remarks announcing the camp’s opening during a press conference held at the Jewish Community Center of Staten Island back in December, the center’s executive director David Sorkin expressed the board and staff’s enthusiasm for making the dream of Sunrise Day Camp Staten Island a reality.

“From day one, our efforts have been directed to bringing this to the children and families of Staten Island, recognizing that, unfortunately, our borough has a significantly high rate of pediatric cancer patients in New York City,” said Sorkin.

Those sentiments were echoed by Vincent Ignizio, chief executive officer of Catholic Charities – Staten Island.

“Sunrise Day Camp will make such a positive difference in the lives of children with cancer, and their families. Our partnership with the JCC can serve as a model of cooperation across New York City, New York State, and America.”

And Miss New York 2015, Jamie Lynn Macchia, whose personal platform is to join the fight against pediatric cancer noted, “As a Staten Island native, I am so excited to welcome Sunrise Day Camp to my hometown and assist the program as Miss New York. I have spent years working with families and children affected by pediatric cancer, but it wasn’t until June that my eyes were opened to Sunrise Day Camp-Sunrise Association.

“After visiting the Long Island location, I fell in love with the program. Not only were children with cancer running around and enjoying the childhood that is so often lost in this battle, but their siblings were having fun again as well! It was a beautiful sight. We are truly blessed to have found the resources to make this happen.”

Sunrise Day Camps and its year-round programs are offered free of charge to all children being treated for cancer, as well as their siblings. In addition, transportation to and from camp is free. Children are referred to the camp by their physician or hospital.

For more about Sunrise Day Camp-Staten Island, visit sunrisedaycamp.org or call (718) 475-5256.

Tammy Scileppi is a Queens-based freelance writer/journalist and parent.

—with Lisa J. Curtis
**ATTENTION DEFICIT DISORDER**

**The Child Mind Institute**  
445 Park Ave. (entrance on 56th street)  
(212) 308–3118  
www.childdmind.org  

Services Provided: Education, workshops and support groups for those with ADD, OCD and ADHD

**Children and Adults with Attention Deficit/Hyperactivity Disorders**  
New York City  
P.O. Box 133, Manhattan  
(212) 721–0007  
www.chadd.org  
parent2parent@chadd.net  
new–york–city@chadd.net  

Services Provided: Educating and support groups.

**HJD-NYU ADD Center**  
301 E. 17th St., New York, NY 10003  
(212) 598–6490  
www.hjd.med.nyu.edu  

Services Provided: Diagnostics and Treatment, and Parenting Skills Training

**AUTISM**

**AHA–Asperger Syndrome and High-Functioning Autism Association**  
303 Fifth Ave., Manhattan  
(888) 918–9198  
www.ahany.org  
pats@ahany.org  

Services Provided: educating parents of special needs children, support group.

**Association for Metro Area Autistic Children**  
25 West 17th St., 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

**Autism Science Foundation**  
419 Lafayette St., Second Floor  
New York, NY 10003  
(646) 723–3977  
www.autismsciencefoundation.org  
contactus@autismsciencefoundation.org  

Services Provided: Information and Provides Founding for Medical Research

**Autism Society of America**  
Queens Chapter  
188–83 85th Rd.  
Holliswood, NY 11423  
(718) 464–5735  
Brooklyn Chapter  
224 Ave. S

**New York Families for Autistic Children, Inc.**  
95–16 Pitkin Ave.  
Ozone Park, NY 11417  
(718) 641–3441  

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”

**North Central Bronx Hospital**  
3424 Kossuth Ave., room 15A11  
FSPDD at North Central Bronx Hospital  
(718) 519–4797  
NY–Bronx@autismsocietyofamerica.org

Services Provided: Autism support group, provides information and support.

**The McCarton Foundation and School**  
331 West 25th St.  
New York, NY 10001  
(212) 729–1711  
www.mccartonfoundation.org  

Services Provided: Education for children and Research Center

**QSAC, Quality of Life & Services for the Autistic Community**  
253 W. 35th St., New York, NY 10001  
30–10 38th St., Astoria, NY 11103  
and 2509 Broadway, Astoria, NY 11106  
(718) 728–8476  
www.QSAC.COM  
QSAync@aol.com  

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

**Thursday’s Child, Inc.**  
7676 13th Ave.  
Brooklyn, NY 11228  
(718) 630–5100  
www.thursdayschildinc.com  

Services Provided: Occupational Therapy, Physical Therapy, Speech, Special Instruction, Family Support Groups and Parent Workshops

**BLIND AND VISUALLY IMPAIRED**

**Helen Keller Service of the Blind**  
57 Willoughby St., Brooklyn  
(718) 522–2122  
www.helenkeller.org  
info@helenkeller.org  

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 30
Staten Island Pediatric Dentistry

Specializing in Dentistry and Orthodontics for Children, Adolescents & Patients with Special Needs

www.sikidsdentist.com
718-761-7316

Deborah Gries, D.M.D., M.S.
Michelle Flanigan, D.M.D.
Sara Skurnick, D.M.D.
Orthodontist

195 Bridgetown Street (Corner of Richmond Hill Road)
Staten Island, NY

Invisalign Available Digital X-Rays

Over 35 Years Of Caring For Your Children

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www.familyconnect.org
jaynynapvi@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
Email: info@lighthouse.org
Services Provided: Community Education, Information and Referral, Residential, Treatment, Vocational/Management, Community Education, Information
Individuals Served: Visual Impairments

Continued on page 32
Autism Spectrum Disorder?
TODAY THERE’S REAL HELP

Expert advocacy support. Real results.

The Autism Community of Hope is a parent advocacy and education organization helping families that receive an Autism diagnosis obtain timely and comprehensive Early Intervention services. We also advocate for families and children throughout the public school years.

We offer the following parent support:

• In person, phone, and email consultation
• Help find the right parent support group
• Pre-IFSP and IEP strategy consultation
• Help interpret evaluations and school reports
• Support accessing independent evaluators/therapists
• Help obtain speech, occupational therapy and psychological services
• Coaching to work effectively with therapists, schools, and private agencies
• Transition support from EI to CPSE and from CPSE to CSE
• Touring schools and application guidance
• Support during the Turning 5 process

The Autism Community of Hope
Real hope, real help.

Contact us for a FREE consultation.
917-414-7554 or mitch@early4autism.com

Autism Spectrum Disorder?
TODAY THERE’S REAL HELP

Expert advocacy support. Real results.

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Real hope, real help.

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917-414-7554 or mitch@early4autism.com

DOWNTOWN BROOKLYN SPEECH-LANGUAGE AND HEARING CLINIC

Providing Professional Evaluations and Therapy Services to Children and Adults

Highlights:

▲ State-of-the-art facility offering a full-range of diagnostic and therapeutic services to monolingual and bilingual individuals with communication disorders.
▲ Specialties include: delayed speech and language development, autistic spectrum disorders, language/learning disabilities, auditory processing disorders and more.
▲ Distinguished clinical faculty who are certified by the American Speech-Language-Hearing Association (ASHA) and the New York State Department of Education, and are licensed by the NY State Office of the Professions.
▲ Free hearing screening for anyone over the age of 7.

For more information or to schedule an appointment please call Bridget Dwyer, MS CCC-SLP, at 718-488-3480

LIU Brooklyn
Main Building - 2nd Floor
Corner of DeKalb & Flatbush Aves

All of our professional staff are University faculty who are licensed by the State of New York and hold ASHA certification.

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LIU Brooklyn
Main Building - 2nd Floor
Corner of DeKalb & Flatbush Aves

All of our professional staff are University faculty who are licensed by the State of New York and hold ASHA certification.

Rivendell School

Rivendell School provides a warm, creative environment where children develop independence, respect for each other, and a lifelong love of learning.

A Montessori inclusion school serving children two to six years old for more than thirty years.

277 3rd Avenue
(bet. Carroll & President Streets)

718-499-5667

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Employment
Other: Day Treatment, Day Habilitation, Early Intervention

DISABILITY GROUPS


Children’s Aid Society 150 E. 22nd St. New York, NY 10017 (212) 949–4800 www.casny.org Services Provided: Case Management, Information and Referral


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.


Elihab 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 wavers, financial assistance, care coordination.

Fisher Landau Center for the Treatment of Learning Disabilities Rousso Building, Second Floor


Gingerbread Learning Center, Inc. 80 Woodrow Rd. Staten Island, NY 10312 (718) 356–0008 www.gingerbreadlctr.com 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 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 Services Provided: Case Management, Community Education, Future Planning, Information and Referral, Residential, Treatment


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Have your doctor fax or e-scribe your prescription and we will deliver it to your home.

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Your Personal Pharmacy and More

We now carry Klare Labs, Thorne Pediatric, Nordic Naturals, Pure & other Specialty Vitamins & Supplements

- Autism, ADHD, Asthma & Allergy Medication Specialist
- Specialized baby formulas (Elecare, Neocate) covered by insurance & delivered to your home
- Born Free Products (PBA FREE)
- Custom Pediatric Compounding
  - Gluten Free
  - Casein Free
  - Lactose Free
  - Dye Free
- Your source for Nebulizers

Open 7 Days: Monday–Friday 9–8 | Saturday 9–6 | Sunday 9–3

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Independently Owned And Operated • Robert Annicharico, Rph
3833 Richmond Avenue • Staten Island, NY 10312 (Next to Eltingville train station)
Phone: 718.984.6600 • Fax: 718.984.6601 • get-it-filled@delcodrugs.com

Compounding for Autism Spectrum Disorders
- Elimination of toxic metals ie - DMSA, EDTA, Glutathione
- Non-Sterile Compounding ie - Antibiotics into suppositories
- Sterile Compounding ie - Methyl B12 injections

SPECIAL ORDERS WELCOME

STEPPINGSTONE DAY SCHOOL, INC.
A Preschool Program for Children With and Without Disabilities
Not for Profit — Established in 1983

Queens/Bronx
Preschool Programs - CPSE Evaluations
Therapies - Physical, Occupational, Speech/Language, Feeding
Family Support Services

- Preschool self-contained and integrated classrooms
- Nurturing, child-friendly learning environments
- Ongoing communication between parents and professionals
- Meeting the needs of the families through concrete and social work services

To find out more about SteppingStone Day School
For the Queens Location, call Nancy Rybacki 718-591-9093 • For the Bronx location, call Sheri Bushansky 718-554-2025

SteppingStone Day School’s Preschool Program is Funded and Regulated By The New York State Department of Education, The New York City Department of Education and Licensed by The New York City Department of Health and Mental Hygiene, Bureau of Daycare.
New York Special Needs

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Jewish Board of Family and Children’s Services, Inc.
135 West 50th St.
New York, NY 10020
(212) 582–9100
(800) 523–2769
www.jbfses.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
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
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
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
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
info@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

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) 442–2223
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
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

Manhattan Down Syndrome Society
124 W. 121st St.
New York, NY 10027
(646) 261–5334
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
www.boldsny.org
Services Provided: Education, speech therapy, occupational therapy, psychological assessments and other services.

Early Childhood Direction Center
47 Humphrey Drive
Syosset, NY 11791
(516) 921–7171 (800) 933–8779
www.boldny.org
Services Provided: Advocate for the value, acceptance and inclusion of people with Down Syndrome.

National center for Learning Disabilities
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March of Dimes

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New York Chapter
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

Southampton Fresh Air Home
A Summer Residential Camp for Physically Challenged Children and Young Adults
3 Week & 1 Week Sessions Available (Ages 8-18 Yrs)
Sailing, swimming, computers, basketball, track, horseriding, arts and crafts, off-camp trips, clubs, plus many more!
Scholarships are available.
Contact David Billingham
631-283-1594
ACA Accredited www.sfah.org

General & Specialty Pediatric Services

Pediatrics
Adolescent Medicine
Behavioral Health
Bilingual Speech Therapy
Audiology
Dentistry
Orthodontics
Physical Therapy
Occupational Therapy
Hablamos Español

The Quad Preparatory School
325 East 6th St NYC • www.quadprep.org
RSVP: agreenberg@quadprep.org or 646-648-3913

Preparing Twice-Exceptional Learners To Lead Extraordinary Lives

260 East 188th Street • 2021 Grand Concourse
470 East Fordham Rd • 4487 Third Avenue
2101 Quarry Rd • 2016 Bronxdale Avenue
718.220.2020 • www.uchcbronx.org

@UCHC_Bronx UCHCBRONX

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array of Educational and Therapeutic services to children with special need between 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

EPILEPSY

ANIBIC (Association for Neurologically Impaired Brain Injured Children)
61–35 220th St., Oakland Gardens
New York, NY 11361
(718) 423–9550
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
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
joesoll@adoptionhelining.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
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.bwcs.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: 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
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
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
mariette33@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
info@resourcesnyc.org
www.resourcesnyc.org
Services Provided: Case Management, Community Education, Information and Referral
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
www.servicesforunder.com
Services Provided: SUDS 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
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.
New York Special Needs

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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 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.chhearing.org
info@chhearing.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.lexnc.org
generalinfo@lexnc.org

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

Legal Aid Society of New York City
199 Water St.
New York, NY 10038
(212) 244–3346
(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

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
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
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) 224–2999
www.tourette–syndrome.com
Services Provided: Community education, information and referral.

Developmental Disabilities Service Offices

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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

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) 493–3006
Website: www.omr.state.ny.us

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ADVOCACY

AHRC Nassau
Nassau County
189 Wheatley Rd.
Brookville, NY 11545
(516) 626–1000
www.ahrc.org
Services Provided: Case Management, Community Education, future planning, Information and Referral, residential, treatment, vocational/employment

AHRC Suffolk
Suffolk County
2900 Veterans Memorial Highway
Bohemia, NY 11716–1193
(631) 585–0100
ahrscess Suffolk.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.
Merrick, NY 11566
(516) 571–3662
www.nassaucounty.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.nassaucounty.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
Services Provided: Information and referral

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
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 Debra Cody Center for Autism and Developmental Disabilities
Stony Brook University, 5 Medical Dr., Port Jefferson Station
(631) 632–8844
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

Quality Services for the Autism Community (QSAC)
56–37 188th St.
Fresh Meadows, NY 11365
(718) 357–4650
www.qsac.com
Services Provided: QSAC is an award winning non–profit organization dedicated to providing services to persons with autism and/or pervasive disorder (PDD) throughout New York City and Long Island.

United Supports For Autism
283 Commmack Rd.
Commack
(516) 848–8551
www.unitedsupportsforautism.org
Contact: Natalia Appenzeller, Ph. D.

CAMPS

Camp Akeela
3 New King St.
White Plains, NY 20604
(866) 680–4744 or www.campakeela.com

Camp Horizons
127 Babcock Hill Rd.
South Windham, CT 06266
(860) 456–1032 or www.camphorizons.org

Camp Horseability
238 Round Swamp Rd.,
Melville, NY 11747.
(631) 367–1646 or www.horseability.org

Camp Huntington
56 Brucive Run Rd.
High Falls, NY 12440
(866) 514–5281 or www.camphuntington.com

Camp Loyaltown
Hunter, NY 12442.
(516) 263–4242 or www.camployaltown.org

Camp Northwood
132 State Route 365
Remsen, NY 13438–5700
(315) 831–3621 or www.nwood.com

Frost Valley YMCA Camps
2000 Frost Valley Rd.
Claryville, NY 12725
(845) 985–2291 or www.frostvalley.org

Helen Keller Summer Camp
Farmingdale State University of New York.
(516) 485–1235, ext. 617 or 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

JCC Of The Greater Five Towns Camp Friendship
207 Grove Ave.,
Cedarhurst, NY 11516.
5–16–569–6733 or Gayle.fremed@fivetownsjcc.org

Kehlina Vocation Experience
Henry Kaufman Campgrounds,
75 Colonial Springs Rd.
Wheatley Heights, NY 11798
(516) 484–1455 or www.kehlina.org

Mid–Island Y Jewish Community Center Aspire Program
45 Manetto Hill Rd.,
Plainview, NY 11803
(516) 822–3555, X 332 or www.myjcc.org

My Shine Program
Sweet Hills Riding Center. West Hills Park,
Sweet Hollow Rd.,
Melville, NY 11747
(516) 551–1491 or www.myshineprogram.com

NYU Summer Program For Kids
College of New Rochelle,
New Rochelle, NY
(516) 358–1811 or donofd01@nyumc.org

Our Victory Day Camp
46 Vineyard Lane
Stamford, CT 06902
(203) 329–3394 or www.ourvictory.com

Powerpals Physical Fitness Camp
4 Cedar Swamp Rd.,
Glen Cove, NY 11542.
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

Summit Camp & Travel
322 Route 46 West, Suite 210
Parsippany, NJ 07054
(973) 323–9908 or www.summitcamp.com

Southampton Fresh Air Home
36 Barkers Island Rd
Southampton NY 11968
(631) 283–5847 or www.sfah.org

TAPA (Theresa Academy of Performing Arts) for Children with
Long Island Special Needs

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Special Needs
(516) 432–0200 or 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
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
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 development 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
2714 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 Hood Program
Variety Child Learning Center
47 Humphrey Dr.
Syosset, NY 11791
(516) 921–7171 or (800) 933–8779
www.vclc.org

Services Provided: Information and referral, Individual/Case advocacy

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

National Center for Disability Services
203 I.U. Willets Rd.
Albertson, NY 11507
(516) 747–5400
www.abilitiesonline.org

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

DOWN SYNDROME
Alexander’s Angel’s Inc.
425 North Broadway, #486, Jericho, NY 11753
(516) 361–7263
www.alexandersons.org

Association for Children with Down Syndrome Inc.
4 Fern Place, Plainview, NY 11803
(516) 933–4700
www.ACDs.org

Individuals Served: Down Syndrome, Mental Retardation

Counties Served: Nassau, Suffolk, Kings, Queens
Services Provided: Case management, community education, future planning, information and referral, Individual/Case advocacy, treatment.

Down Syndrome Advocacy Foundation (DSAF)
P.O. Box 12173
Hauppauge, NY 11788
(516) 983–7008
www.dsaonline.org

EPILEPSY
EPIC long Island
Extraordinary People in Care
1500 Hempstead Turnpike
East Meadow, NY 11554
(516) 739–7733
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
715 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

Services Provided: LDA’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
Contact: Liz Corrao

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

FINE & CULTURAL ARTS
Art without Walls, Inc.
P.O. Box 341
Satville, New York 11782
(631) 567–9418
www.artwithoutwalls.net
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
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.

SOCIAL SERVICES
Suffolk County Department of Social Services
3085 Veterans Memorial Highway,
Ronkonkoma, NY 11779
(631) 854–9930
Services Provided: Services vary by county
Suffolk County Department of Social Services, Family & Children's Services Administration
3455 Veterans Memorial Highway,
Hauppauge, NY 11779
(631) 854–9434
Services Provided: Child protective services, foster care placement

TOURETTE SYNDROME
National Tourette Syndrome Association
42–40 Bell Blvd., Bayside, NY 11361–2820
(718) 224–2999
www.tourette-syndrome.com
Services Provided: Community education, information and referral

VOCATIONAL EDUCATION
Nassau County BOCES Rosemary Kennedy School
2850 N. Jerusalem Rd.,
Wantagh, NY 11793
www.staffet@mail.nasboces.org

New York State Special Education Parent Centers

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 Manhattan Parent Center Without Walls
116 E. 16th St, Fifth floor, New York, NY 10003
(212) 677–4650
http://www.resourcesnyc.org/content/Manhattan
Region served: NYC – Manhattan

Parent to Parent NY, Inc.
Staten Island Special Education Parent Center
1050 Forest Hill Rd., Staten Island, NY 10314
(718) 494–4872
http://www.parenttoparentnys.org/Regional/statenisland.htm
Region served: NYC - Staten Island

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

(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

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
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 Yorkners City School District

See more at: http://www.parenttoparentnys.org/education/#sthash.Gm8DbPrl.dpuf
AUTISM

Arc Health Resources of Rockland, Inc.
25 Hemlock Dr.
Congers, NY 10920
(845) 267–2500
Services Provided: Physical health care, mental health services, and speech, physical, and occupational therapy for people with autism, down syndrome, and other developmental disabilities.

Cardinal McCluskey Services
115 E. Stevens Ave., Suite LL-5
Valhalla, NY 10595
(914) 997–8000
Services Provided: Group homes, service coordination program, and supported employment for adults. Therapy for people with autism.

Community Based Services, Inc.
3 Fields Lane
North Salem, NY 10560
(914) 277–4771
Services Provided: Residential and non-residential services for people with autism.

Hawthorne Foundation
5 Bradhurst Ave.
Hawthorne, NY 10532
(914) 592–8526

Rockland County Ald-Yai
2 Crosfield Ave. Suite 411
West Nyack, NY 10994
(845) 358–5700
Services Provided: Independent living, crisis intervention, social skills groups for children on the autism spectrum. Resources and supports workshops and ballet and yoga for children.

Taconic Innovations, Inc.
872 Route 376
Wappingers Falls, NY 12590
(845) 296–1042
Services Provided: Social skills development, speech and language therapy, occupational and physical therapy, handwriting programs, family therapy, and nutritional counseling for people with autism.

Westchester Co. Nysarc, Inc.
265 Saw Mill River Rd.
Hawthorne, NY 10532
(914) 428–8330
Services Provided: Family support groups and outreach, transition planning, counseling, recreation, employment services, daily living skills services, residential services, respite. Classes for children with autism.

BRAIN INJURIES

Westchester Jewish Community Services
141 N. Central Ave.
Hartsdale, NY 10530
(914) 949–7699
Services Provided: Community living, family support, respite, baseball program. Traumatic brain injury services, mental health services. Supper club for people with Asperger’s.

CEREBRAL PALSY

Cerebral Palsy of Westchester, Inc.
1186 King St.
Rye Brook, NY 10573
(914) 937–3800
Services Provided: Residency and vocational services for adults. School, animal therapy, wheel chair basketball, teen social club, and boy scouts programs for children.

EPILEPSY

Capabilities Partnership, Inc.
450 W. Nyack Rd., Suite #9
West Nyack, NY 10994
(845) 627–0627
Services Provided: Education and training, advocacy, vocational services, service coordination, and community independence training for individuals with epilepsy and other neurological, physical, and developmental disabilities and their families.

HEARING IMPAIRED

Jawonio, Inc.
260 North Little Tor Rd.
New City, NY 10956
(845) 634–4648

LEGAL SERVICES

Leake and Watts Service, Inc.
463 Hawthorne Ave.
Yonkers, NY 10705
(914) 375–8700
Services Provided: Early childhood learning center, counseling, children and family services, and juvenile justice services.

Rockland Independent Living Center, Inc.
873 Route 45, Room 108
New City, NY 10956
(845) 624–1366
Services Provided: Assistance with understanding disability rights laws and benefits. Housing, transportation, and employment resources. Help modifying housing for people with disabilities. Financial management services.

MENTAL HEALTH

AMIC, Inc.
480 Albany Post Rd.
Briarcliff Manor, NY 10510
(914) 941–9513
Services Provided: The Clear View School offers support and therapy for emotionally disturbed children and families. Amic Supportive Families provides residential services for people with developmental disabilities.

The Guidance Center, Inc.
256 Washington St.
Mount Vernon, NY 10553
(914) 613–0700
Services Provided: Training in education, work, and personal relationships. Mental health treatment, substance use, and housing advisement.

Mental Health Assoc. of Rockland Co. Inc.
140 Route 303 Suite A
Valley Cottage, NY 10989
(845) 267–2172
Services Provided: Support groups, vocational services, suicide prevention, and recovery services programs for people living with mental illness or addiction.

St. Dominics Home
500 Western Highway
Blauvelt, NY 10913
(845) 359–3400
Services Provided: Mental health programs. Community and day habilitation for people with developmental disabilities. Service coordination.

SPECIAL SERVICES

Special Care for Families & Children Svc
1421 E. 2nd St.
Brooklyn, NY 11230
(718) 252–3365
Services Provided: Child and individual counselors, community organizations, and social services.

TRUST SERVICES

Community Living Corporation
105 S. Bedford Rd., Suite 300
Mt. Kisco, NY 10549
(914) 241–2527
Services Provided: Pooled trust services for individuals to put money in. Arts instruction program.

Putnam Co. Nysarc, Inc.
Terravest Corporate Park
31 International Blvd.
Brewster, NY 10509
(845) 278–7272
Services Provided: Trust services, community and day habilitation, employment services, residential services, prescholl, Medicaid Service Coordination, recreation, and respite for people with intellectual, developmental, and other disabilities.

Dutchess Co. Nysarc, Inc.
84 Patrick Lane
Poughkeepsie, NY 12603
(845) 635–8084
Services Provided: Trust services. Employment and living services for adults. Schooling for children ages three to five.

Rockland Co. Nysarc, Inc.
25 Hemlock Dr.
Congers, NY 10920
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(845) 267–2500
Services Provided: Trust services, guardianship services designed to help people make life decisions, community and day habilitation, preschool, recreation, respite, and prevocational and employment services.

VOCA T I O N A L
E D U C A T I O N

Crystal Run Village, Inc.
601 Stony Ford Rd.
Middletown, NY 10941
(845) 692–4444
Services Provided: Personal and domestic skills training for home, service, and work opportunities.

GENERAL–MULTIPLE SERVICES PROVIDED

Abbott House
100 N. Broadway
Irvington, NY 10533
(914) 591–7300
Services Provided: Self-advocacy program, day habilitation, and service projects. Recreational and social activities.

Ability Beyond Disability, Inc.
480 Bedford Rd.
Chappaqua, NY 10514
(914) 242–8720
Services Provided: Aging specialties, psychological and behavioral support, social and community integration, vocational services, school to community transitional services for youth, transportation services, service coordination.

Another Step, Inc.
706 Executive Blvd.
Valley Cottage, NY 10989
(845) 268–8200
Services Provided: Residential, employment, self-help, and service opportunities.

Behavioral Solutions of NY, Inc.
167 Darin Rd.
Warwick, NY 10990
(845) 263–9169
Services Provided: In-home services including Medicaid Service Coordination and HCBS waiver services. Strives to support individuals by decreasing social stereotypes.

Child Care Resources of Rockland
235 N. Main St., Suite 11
Spring Valley, NY 10977
(845) 425–0009
Services Provided: Support parents in searching for child care. Provide development services for families.

Children of Promise Stable, Inc.
135 Convent Rd.
Nanuet, NY 10954
(845) 304–9657
Services Provided: Horse-riding activities and therapies for children and adults.

Compass Case Management
77 Sundrop Court
Riverhead, NY 11901
(631) 886–2332
Services Provided: Assists families through the application process of the Care at Home Program.

Devereux Foundation
40 Devereux Way
Red Hook, NY 12571
(845) 758–1899
Services Provided: Family education and professional training, transition to independent life training.

Ferncliff Manor for the Retarded
1154 Saw Mill River Rd.
Yonkers, NY 10710
(914) 968–4854
Services Provided: Education program teaches children skills to prepare them for societal living.

Hamaspik of Rockland County, Inc
58 Route 59, Suite 1
Monsey, NY 10952
(845) 356–5400
Services Provided: Service coordination, parental retreats, family support for people of Rockland.

Handicapped Children’s Assn.
18 Broad St.
Johnson City, NY 13790
(607) 798–7117
Services Provided: Children’s services, residential services, family support groups, therapy.

Health Care Advocacy
33 Beach Rd.
Ossining, NY 10562
(914) 762–8815
Services Provided: Help families find resources to maintain medically fragile children at home and work with insurance companies. Medicaid assistance, help finding and working with nursing agencies, getting medical equipment, working with school districts to accommodate children.

Hero, Inc.
2975 Westchester Ave.
Purchase, NY 10577
(914) 725–2481
Services Provided: Adaptive tennis, creative arts. Pup program in which certified animals visit children with disabilities in group homes.

Inclusive Links, Inc.
95–117 Ravine Ave., Suite 6A
Yonkers, NY 10701
(914) 643–3217
Services Provided: Respite, community activities, arts and creative dramatics, music and dance, sports, education, and day camps.

Jewish Community Center
371 S. Broadway
Tarrytown, NY 10591
(914) 366–7898
Services Provided: Preschool, camp, arts and cultural events, and health and fitness centers.

The Keon Center, Inc.
2 John Walsh Blvd.
Peekskill, NY 10566
(914) 737–5890
Services Provided: Supported employment, group day habilitation, Medicaid Service Coordination, and vocational services.

Mount Vernon Recreation Dept.
City Hall Room 3
Mount Vernon, NY 10550
(914) 665–2437
Services Provided: City parks, juvenile delinquency prevention, and developmental youth programs.

63 Bradhurst Ave.
Hawthorne, NY 10532
(914) 347–4409
Services Provided: Aquatics, Special Olympics training, social activities, weekend trips, and daily outings.

Other: Summer camps, winter group and community programs.

Opengate, Inc.
357 Main St.
Armonk, NY 10504
(914) 277–5350
Services Provided: Day habilitation programs including computer time and hiking. Medicaid Service Coordination.

Progressive Social Services, Inc.
41 Livingston Ave.
Yonkers, NY 10705
(914) 434–5532
Services Provided: Medicaid Service Coordination and respite.

Rayim Of Hudson Valley, Inc.
149 Elm St.
Monroe, NY 10950
(845) 782–7700
Services Provided: Community, residential, and day habilitation. Community transition services, family care, and housing subsidy assistance.

SE Consortium for Special Services
740 West Boston Post Rd., Suite 301
Mamaroneck, NY 10543
(914) 696–5232
Services Provided: Physical recreation and sports such as karate or a fit club, expressive and fine arts activities, and daily living experiences such as lunch and a movie or a Friday travel club.

YWCA of White Plains
515 North St.
White Plains, NY 10605
(914) 949–6227
Services Provided: Swim classes and piano or guitar lessons. Friday night pizza, movies, and games. Special Olympics training and competition. Dance night, Friday night pizza and Bingo for adults.

Other: Holiday camps and summer camps for youth.
If you like the magazines, you’ll love the site.

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NYPARENTING.COM

Where every child matters and where New York parents find help, info and support.
MID-ISLAND Y JCC
ADLER CENTER FOR SPECIAL NEEDS
Summer Camp

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Camp Adler Assistant Supervisor
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CAMP ADLER
Our goal is to create a fun, nurturing and supportive environment with typical day camp activities both in-building and at the Henry Kaufmann Campgrounds (HKC) to build self-confidence and make lasting friendships.

An intake is preferred prior to registration to ensure the best fit between campers and programs.

Camp Adler Includes...
- Full Inclusion or Shared Camp placement options determined by Director and Parent
- Camp placement based on social, emotional and cognitive abilities
- Specialized counselors trained by qualified staff, including special education teachers
- Progress reports with evaluations
- Low child-to-counselor ratio
- Consultations with related service providers
- Camp activities including sports, rock wall, zip line, day trips, music, art, nature hikes and more
- Special education swim instruction led by Red Cross certified instructors
- Daily lunch is nutritious, kid-friendly, kosher, peanut/tree nut-free and includes pizza Fridays

ASPIRE INCLUSION PROGRAM
Designed for campers who have had success in a partial or full-inclusion environment with shared support.

Preschool Inclusion - 3-5 year olds
In-Building • Various schedules

School Age Inclusion - Entering Grades K-6
At Campgrounds • Mon.-Fri. • 9:00 am-4:00 pm

Tween Inclusion Travel Camp - Entering Grades 7 & 8
Mon.-Fri. • 9:00 am-4:00 pm

ACES (Adler Camp for Enrichment Services)
Entering Grades K-6
A self-contained program within a shared camp environment. Includes visual schedules, fewer transitions and smaller group sizes than Aspire. For campers who need a structured setting, but would like to be a part of a true camp experience.
- Academic support available
- Social skills enrichment
- PT, OT and speech therapy
- Inclusion opportunities throughout the day

Mon. - Fri. • 9:00 am-4:00 pm
At the Henry Kaufmann Campgrounds

ACES — TEENS AT CAMP Entering Grades 7-12
Designed to foster peer interaction, communication, and relationships. Campers develop essential self-advocacy and vocational skills, and focus on health, fitness and nutrition. Includes swim, day and overnight trips*, community service and inclusion opportunities.
- Academic support available
- Social skills enrichment
- PT, OT and speech therapy
- Inclusion opportunities throughout the day

Mon. - Fri. • 9:00 am-4:00 pm
At the Henry Kaufmann Campgrounds
* Additional overnight trip fees may apply

AUGUST GAP CAMP Grades PreK-10
Fun in the sun at the Henry Kaufmann Campgrounds! HKC has a large swim area with four pools, various outdoor fields, multiple playgrounds, and a nature center. Some camp activities may include: swimming, arts and crafts, sensory activities, zip line, low ropes courses, music, rock wall and much more.
- A Kosher peanut/tree nut-free lunch will be provided daily.
- Transportation is included from the JCC to the campgrounds and back to the JCC.
- Low child-to-staff ratio.

Mon., August 15 - Fri., August 19 • 9:00 am-4:00 pm
M: $835   NM: $975  •  AU16-AGAP

SUNDAY SUMMER SELECTIONS Grades PreK-10
Your children will love this social/recreational program designed to build self-esteem and language skills while fostering friendships. Activities include art, adaptive sports and music.

Sundays 10:00 am-1:00 pm • At the Mid-Island Y JCC
6 Weeks: July 10, 17, 24, 31 • August 7, 14
M: $290   NM: $330  Lunch is included.

Schedule Your Summer Camp TOUR!
Contact Jen Wambser, Camp Adler Supervisor
(516) 822-3535, x356  |  jwambser@miyjcc.org

Mid-Island Y JCC  |  45 Manetto Hill Road, Plainview  |  www.miyjccsummercamp.org