



Children's Mental Health Advocacy, Training and Support Services

The ABCs of Advocacy for Children with Special Needs

Parents, teachers and children working together as partners will enable children with special needs to access the appropriate services. This article aims to advance knowledge of the procedures and principles of the law and its recent changes and presents advocacy strategies to insure that all children receive a free, appropriate education.

Know the Federal Law

The IDEA (Individuals with Disabilities Education Act) passed in 1997 insures that all children with disabilities receive a free, appropriate public education. The law provides for:

- ❖ An appropriate evaluation by the school district
- ❖ An Individual Education Plan to be implemented in the least restrictive environment
- ❖ Parent participation in decision making due process safeguards.

In 2004 Congress renewed the IDEA by passing IDEA04, to take effect by July 2005. A main goal of the new law is to reduce paperwork requirements, thereby enabling special education teachers to spend more time with students. States have been directed to minimize the number of rules and regulations they require of local school districts and to identify any state-imposed rule, regulation or policy that is not required by federal regulations.

The first step for parents: If you suspect your child has a disability, you should:

- ❖ Meet with teacher and/or principal and discuss ways to assist the child
- ❖ Request in writing from the appropriate committee listed below that your child be evaluated to determine what services would be appropriate. Be sure to keep copies of all of your correspondence and notes from all meetings and phone calls.

Setting the process in motion

1. Individual evaluations are provided by districts free to charge.
2. Written consent from parents is needed.
3. Evaluation results helps determine if your child has specific learning disabilities or other classified weakness so that special education services or programs can be provided.

What does a comprehensive evaluation consist of?

1. Developmental history—birth, medical, family, social
2. Classroom observation
3. Other assessments—language, occupational therapy, physical therapy
4. Psychological evaluation—intellectual functioning, memory, planning, organization, attention, visual vs. auditory skills, emotional functioning
5. Educational evaluation – all academic areas, process-oriented measures that review underlying skills and abilities that may affect functional school performance



Our Mission

Mid-Iowa Family Therapy Clinic, Inc., strives to ensure positive outcomes for families, utilizing the unique resources of the family and their community.

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To contact Mid-Iowa
Family Therapy Clinic,
Inc.

☺ Visit our website at:
www.midiowafamilytherapy.org

☺ Call our toll free number:
1-800-649-5423

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Next steps—putting the evaluation results in place

Results of the evaluation must be provided to parents via a meeting with the evaluators, a written report that documents the test results and test scores, and a meeting with the Committee at which time all the scores and tests are explained and classification and necessary services are recommended.

Note: IDEA04 encourages the use of alternative ways of meeting, such as conference calls. The new law allows changes to the IEP without the need for the entire IEP team to reconvene for a formal meeting.

Eligibility for services

In order to be eligible for an Individual Education Plan (IEP) a child must have a disability that affects his/her ability to learn. A child must be classified in one of the following categories of disability: Autism, blindness, deafness, emotional disturbance, hearing impairment, mental retardation, multiple disabilities, orthopedic disabilities, other health impairments, specific learning, speech/language, traumatic brain injury, or visual impairment. The IEP must take into account the results of the evaluation, including the child's strengths and weaknesses, results of state or district wide tests, the unique needs and/or special equipment, long and short-term goals and the least restrictive environment. The IEP must be reviewed at least once a year. Every 3–5 years a new evaluation must be completed to determine eligibility and classification.

Note: IDEA04 requires that states develop and implement policies that would prevent school personnel from requiring children to take prescription medication, such as those commonly prescribed for children with Attention-Deficit/Hyperactivity Disorder (ADHD), as a condition for attending school, undergoing an evaluation for special services or receiving special services.

The effect of the No Child Left Behind (NCLB) and IDEA04

All children with disabilities are included in the annual statewide assessments required by NCLB. IDEA04 allows states and school districts to use funds earmarked for special education to assist students who have not been found eligible for special education but who may need additional assistance to succeed in general education. IDEA04 also requires all special education teachers to be certified in special education.

What if parents don't agree with the school? Options to resolve disputes

1. **Mediation**—Parent and school district meet with neutral third party who tries to help them come to an agreement.
2. **Due process hearing**—Parent and school district present written and oral testimony of disputed issue to a judge.

Children should be assured that their parents are their allies.

Enhancing advocacy skills of parents

Parents must know when to advocate for their child and when not to step in. At times it may be preferable to let a child learn from failure. For example, a child who forgets to complete his homework, may be able to discuss and arrange a make-up assignment with the teacher on his own. However a child who forgets assignments repeatedly may need parental intervention to determine the source of the problem and ways to rectify it.

Children should be assured that their parents are their allies. Parents should openly communicate to their children that they are advocating for their educational needs. Parents should ask, listen and answer questions about their child's concerns during this process, and create an atmosphere of respect and affection. Parents may need to select teachers and supportive assistance agents through face-to-face meetings to discuss shared goals. It is important to document dates, long and short-term goals and other points made during the meeting. Establish and document at least a tentative time frame for goals to be achieved, make specific plans for follow-up meetings, and obtain contact information. Local and national advocacy groups should be supported when possible.



Helping your child to self-advocate

Children should be at least eight years old and able to self-observe, self-record, self-cue, self-reinforce, and relax. Help them to learn when they are in a difficult or overwhelming situation through discussion, and provide practice in learning how to make decisions. For example, if your child recognizes that she does not understand a classroom discussion, teach her to ask the teacher for clarification, during the lecture or after the class. Your child can also, during appropriate times, ask for peer assistance. A child that is aware of her own strengths and weaknesses can also ask for breaks, extra review materials, or advances assignments to help her overcome weaknesses in some areas. It is easier for a child to advocate for herself when she knows she will be supported by her teacher. Make your child aware that the teacher understands her needs and is there to help.

Rehearse possible situations; role-play possible scenarios (such as "what if").

Model and explain your actions.

Help children learn how to be assertive in asking for assistance and their designated assistance tools.



Family Ties: Tips for a Stress-Reduced Holiday Season

While holidays are supposed to be a time of joy and celebration, for many they can be a source of anxiety and even dread. Expectations about what should happen around the holidays often collide with the harsh reality of what actually does happen, causing disappointment, anger, and sadness. Families can find themselves repeating patterns of behavior that result in awkward, difficult, and even painful family dramas year after year. Family gatherings at holiday times may not fit the picture usually seen on a holiday greeting card. Fortunately, something can be done to change patterns that don't work.

Be proactive, not reactive: Have reasonable expectations

Old maxims often carry truth. *An ounce of prevention is worth a pound of cure.* Family members can reduce stress around the holidays by being proactive rather than reactive.

- **First Step:** Have reasonable expectations. Start by creating two categories. The first category contains what you *think should happen* and what you *wish would happen*. The second category will contain *what can happen*. This takes a bit more thinking.
- **Second Step:** Fill in the category of *what can happen*, starting with a careful examination of *what has happened* in past holiday gatherings. For example: imagine a family that gets together every New Year's Day for dinner and soon after sitting down to eat they begin to have the same kind of argument they have every year. Perhaps one member has strong political views that he/she decides should be shared, and another member finds this discussion objectionable. Perhaps a third member drinks too much eggnog and recounts old stories whether or not anyone else wants to hear them. . Another example: A husband and wife have a familiar argument every year about whose family to spend the holiday with. Take the time in advance with your spouse/partner to think about some possible situations that might occur in your family around the holidays. Figure out what you *wish to happen* and *what can happen*.
- **Third Step:** After identifying possible pitfalls that might occur, develop a strategy for dealing with them. Roughly speaking, the choices are a) either stay with existing traditions but alter how they go, or b) create new traditions that work better.

Changing preexisting patterns and traditions means dealing with typical situations differently so that they go more smoothly for your family and, hopefully, for everyone involved. For example, parents who find that their extended family members give too many or inappropriate gifts can talk ahead of time to these members and develop guidelines about gift-giving.

Don't forget that traditions should evolve over time or else they become empty rituals. Despite what we often expect, many family members welcome change. Creating new traditions can be an enlivening process that respects what's come before but generates new forms of celebration reflecting the needs of the present. Families who find themselves exhausted and feeling overextended can scale back the traditions they've been valiantly trying to keep alive. For example, a family may feel relieved after they decide not to have the same tired old dinner menu each year just because it was a tradition.

Perhaps most importantly, families should strive to clarify what is most important to them about the holidays. Not everyone has to agree on everything—usually there are sufficient areas of agreement about what's important. If compromise is not possible, the central areas of disagreement may be a clue to important issues that require attention. For example, interfaith couples may find holidays particularly stressful, not always because of their personal feelings but because of guilt, loyalty and allegiance to their original families and traditions. Issues unearthed by holiday stress may need extra and perhaps professional attention.

Here are some keys to reducing stress during the holidays:

Be proactive rather than reactive

Have reasonable expectations and be clear about what is really important to you.

Be flexible and willing to change: In addition to making your life it is a great example to set for your children.

Keep your sense of humor!

Families should strive to clarify what is most important to them about the holidays.

“The Explosive Child” Conference

Presented by Dr. Ross Greene

October 13th 2006

Cedar Rapids Marriott Hotel

Based on his New Book

Treating Explosive Kids The Collaborative Problem Solving Approach

What This Conference Will Address:

- * Children Do Well if They Can
- * Your Explanation Guides Your Intervention
- * Limits of Conventional Reward and Punishment Approaches
- * Pathways to Explosive/Noncompliant Behavior
- * Collaborative Problem Solving (CPS): Overview of General Model
- * Collaborative Problem Solving: Overview of Plan B
- * Skills Training Using Plan B
- * Implementation of Collaborative Problem Solving in Systems
- * CPS in Therapeutic/Restrictive Settings

For more information contact:

St. Luke's Staff Development
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1026 A Avenue NE
PO BOX 3026
Cedar Rapids, IA 52406-3026

Caring for Every Child's Mental Health Campaign

The Caring for Every Child's Mental Health communications campaign is a national public information and education campaign to:

- Increase public awareness about the importance of protecting and nurturing the mental health of young people.
- Foster recognition that many children have mental health problems that are real, painful, and sometimes severe.
- Encourage caregivers to seek early, appropriate treatment and services.

The campaign helps families, educators, health care providers, and young people recognize mental health problems and to seek or recommend appropriate services. It also strives to reduce the stigma associated with mental health problems. The campaign is a technical assistance program for the Comprehensive Community Mental Health Services Program for Children and Their Families. Its fundamental messages are:

- Every child's mental health is important.
- Many children have mental health problems.
- These problems are real, painful, and can be severe.
- Mental health problems can be recognized and successfully treated.
- By working together, caring families and communities can help.
- Information is available from SAMHSA's National Mental Health Information Center by calling 1-800-789-2647.

PARENT ADVOCACY TRAINING ON THE WEB

Everyone can now access the Parent Advocacy Training materials that were offered across the state over the past year by going to our website: midiowafamilytherapy.org.

Any questions, please contact Heather Pickart at 319-390-5500 or at our toll-free telephone number at 1-800-649-5423.

Remedial Services Information

The Department of Human Services is making changes to improve the quality of service and assure compliance with federal Medicaid rules. These changes will be established in Remedial Services. Remedial Services are skill building interventions that ameliorate behaviors and symptoms associated with a psychological disorder that has been assessed and diagnosed by a Licensed Practitioner of the Healing Arts (LPHA). The Remedial Service Provider develops an implementation treatment plan outlining interventions consistent with the treatment recommended by the LPHA. Remedial Services is available to both children and adults. Remedial Services will take over the existing RTSS and ARO services by June 30, 2007. Remedial Services are beginning in counties across the state starting in October 2006.

For more information, questions or comments:

Please send them to: fdhs@dhs.state.ia.us or call your local DHS office.

Questions and Answers will be posted on the DHS website: http://www.dhs.state.ia.us/Remedial_Services/Remedial_Services_Intro.html