



Parent Mentor News

Parent Mentor Office

Board of Education Building
Third Floor
9370 Olde Eight Road
Northfield Center, OH 44067

Parent Mentor
Kitty Boylan

Phone & Voice Mail
330-908-6219
Days, Evenings and Weekends

Email
Parent.mentors@
nordoniaschools.org

Director of Pupil Services
Margo Gibson-Costello, Ph.D.
330-468-4600
Email: Margo.Costello@
nordoniaschools.org

Parent Mentor Resource Library

Call the Parent Mentor office for a book and video list or find it on the Nardonias School District website. There is also a collection of books in each building.

There are many books for children, teens, on parenting, special education and specific disabilities including LD and ADHD

Reach Us On The Web

on
The Nardonias Hills School District
web site at:

www.nordoniaschools.org
Click on Pupil Services on the left.
On the right side under Pupil Services click on Parent Mentor.

There you will find current listings and updates on upcoming events in the area, the parent mentor newsletter and complete resource library list.



We hope you enjoy this newsletter, but if you would like your name removed from this mailing list, please call and leave your name and address on our voice mail at 330-908-6219.

Spring 2008

Parent Gathering—May 6th @7:00.

Please join us at Panera—The Crossings at Golden Link (near Target) for coffee and conversation.



Annual Picnic for students with special needs and their families and friends

Friday, May 30th ~ 5:00—8:00PM

at Sagamore Hills Park—Valley View Road.

Bring a dessert or side dish to share. Hot dogs and beverage will be supplied.
(The ROCKET car will be there again this year!!)



The All-Star Training Club (ATC) is a non-profit organization established for the purpose of providing integrated sports programs for the special and regular needs individuals where physical and mental limitations are not considered. ATC allows each athlete the opportunity to excel at their own pace and to achieve personal accomplishments while sharing in a team experience.

For more information contact: **Dan Lancianese** 3108 Sparrows Crest, Akron, OH 44319,
Phone: 330-352-5602, Fax: 330-622-4015 or visit www.allstartrainingclub.org



Easter Seals of Northern Ohio Provides Two Summer Programs:

Summer Speech-Language Therapy and Social Skills: A Lesson in Life.

Both groups are held at different locations in Northeastern Ohio.

The therapy services are provided by speech-language pathologists experienced in pediatrics and are licensed by the State of Ohio. The social skills groups are designed to enhance social skill development and speech-language skills.

For further information contact Easter Seals Northern Ohio at 888-325-8532.



Family Orientation Training Series sponsored by Summit County Board MRDD
If you hope to have your family member receive residential services in the coming years, and/or they are on the waiting list for residential or Medicaid Waiver Services, these courses are designed to help families prepare for the future and learn about the services CSBMRDD has to offer. Courses held on the 4th Monday of each month from 10:00 AM -12:00 PM or 5:00 -7:00 PM. For information contact Beth Loeffler at 330-634-8810



BLOOM WHERE YOU ARE PLANTEDNo matter what the circumstances, we can choose to be *alive*, to *thrive*, and to *survive*. Choose to grow and bloom where you are planted, as the saying goes. Throughout it all, it is important to always keep your sense of humor. Laughter gets the blood bubbling, swells the chest, jolts the nerves, sweeps the cobwebs from the brain, and cleans out the whole system. Laughter is physical therapy for the soul. You've come a long way when you can laugh at some of life's predicaments. It's good that we can laugh. And it's healthy for us to cry now and then. (from *The Rett Syndrome Handbook* by Kathy Hunter)

Evaluating Products & Services for Your Child with LD or AD/HD

An expert explains how to be an informed consumer when selecting services and products for your child with learning or attention problems

From GreatSchools.net . Originally created by SchwabLearning.org By Marshall Raskind, Ph.D.

As public awareness and understanding of learning and attention problems have increased in recent years, so have the number of therapies, treatments, programs, and products aimed at alleviating these difficulties. Unfortunately, not all of these interventions are effective, and in some cases they provide little or no benefit to children struggling with learning and/or attention problems. Regardless, many are widely marketed to the public before there is any scientific evidence about their effectiveness.

What to Watch For

- Terms like "Research-based" and "scientifically proven" might be used to describe a service or product, when there's no science to back up the claim. Such products can be a waste of your precious time and money and may even hurt your child's learning and self-esteem.
- Testimonials from customers who claim satisfaction with a particular product or service are not enough to tell you if a product is effective.

Interventions that are scientifically based may prove effective for one child, but be of little value to another. Each child has his own strengths, weakness, interests, and experiences that must be taken into consideration when choosing an intervention.

With all this in mind, we strongly encourage you to be an informed consumer when selecting services and products for your child. Remember, there are no "magic bullets", cures, or quick fixes for learning and attention difficulties. You'll do well to approach potential interventions for your child with a critical, skeptical, and cautious eye. Keep in mind that old saying, "Buyer beware!"

Marshall H. Raskind, Ph.D. is a learning disability researcher. He is a frequent presenter at international learning disability conferences and is the author of numerous professional publications on learning disabilities. He is well-known for his research in assistive technology and longitudinal studies tracing LD across the lifespan.

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Controversial Therapies: Why Do Some Unproven Therapies Become Popular?

To be **controversial** a therapy must have something about it that attracts supporters. I have tried over the years to identify those ingredients that permit some ideas to have a significant number of believers in spite of limited research-based evidence of being meaningful and effective.

Intuitively appealing. "Our preference for intuitively appealing explanations of any complex phenomenon might lead them to appear to be simpler and hence, intuitively appealing . . ." (Michel, G.F.) In other words, we are attracted by simple answers to hard questions.

Anecdotal record of success. Success is anecdotal (personal success stories) and not research based. There are many influences that must be recognized before you can attribute a particular outcome to a specific cause. For instance, parents and the child become vested in being rewarded for their effort or expenditure (you get what you pay for). I call one variation of this phenomenon "private school syndrome." The private school may even offer inferior services and opportunities as compared to the public school, however, since the parent had to pay or fight for it, it is assumed to be better. This "ownership" promotes the perception of value and effectiveness. The "placebo effect" of sugar pills, and the "Hawthorne effect" (the tendency to work harder when experiencing a sense of participation in something new or special) are common examples of variables that influence outcomes unrelated to the therapy that seeks to take the credit.

Guru factor. The proponent of the therapy is knowledgeable, charismatic, and knows your child. He or she offers to assume the parent's burden, clear up the parent's confusion, and assure the parents that they will never have to look back and experience guilt for what could have been.

Continued.....

No unexplained failures. The failure of the therapy to achieve expected outcomes is often explained in terms of:

The parent misunderstanding the goal of the therapy,

The therapy providing the groundwork for future (not immediate) growth,

The parent not believing or following through sufficiently for the program to be successful, or

The **child** being lazy and unmotivated.

In other words, failure is attributed to influences external to the therapy itself.

The lack of research-based support is due to professional jealousy. The therapy is said to be so good it threatens a profession, entrenched ideas and theories, and challenges the life's work of many respected leaders in the field. The proponents of the therapy claim to "think out of the box" and since they "challenge the status quo" they are rejected by a mainstream that is shackled by old ideas and rigid paradigms. Anyone who stands alone claiming to be better than the group should have a Surgeon General's warning taped to his back.

All forward progress is related to the therapy. Maturization, exposure to other educational opportunities, the suggestive effect of a placebo and the Hawthorne effect are all variables that often result in significant progress unrelated to the therapy.

Most of the foregoing comments can be explained in terms of well meaning and charismatic individuals or ideas that fall victim to the **self-serving bias** inherent in human nature. **Self-serving bias** is perhaps the most powerful and certainly the most researched of all attributional biases. **Self-serving bias** is the tendency of people to attribute successes to internal personal strengths and abilities and failures to external factors beyond their control.

There is also the need and vulnerability of the parent to consider. When the search for answers becomes desperate, the possible becomes plausible, and the plausible becomes credible. After 15 minutes of discussion the experienced clinician can often describe characteristics about a child that the parent has not even disclosed. The parent often sits back in awe of the accuracy of the picture that the clinician has drawn and says, "You know my child." The assumption, the hope, and the need is for the clinician to also know what to do to help the child. Unfortunately, the answers are often conclusions based on the unique personal experience of the clinician rather than a reflection of a research-based consensus of opinion across disciplines. For instance, in an attempt to find help for a child, a difficult child with no friends, parents would probably relate equally well to the concept of "Hyperlexia," "Right Hemisphere Dysfunction," "Semantic Pragmatically Learning Disability," "Nonverbal Right Hemisphere Learning Disability," "Social Communications Spectrum Disorder," "Social Perception Disability," "Nonverbal Perceptual Organization Output Disability," "Left Hemi Syndrome," "Right Parietal Lobe Classification," "Nonverbal Social Learning Difficulties," or "Social Emotional Learning Disability." Dr. Crook, who wrote *Solving the Puzzle of Your Hard to Raise Child*, blames pollution, antibiotics, and yeast! A parent with such a child may even resonate to the concept of Asperger Syndrome or early onset Bipolar Disorder. The point is that any one of these labels has the potential of initially garnering the support and commitment of a caring and desperate parent. It is important to become an educated consumer of information that appears logical and charismatic. Just because someone recognizes your child it doesn't mean that he knows your child. In other words, just because someone knows the question, it doesn't mean that he knows the answer.

About the Contributors

Emerson Dickman is an attorney with 25 years of experience representing children with disabilities. He is President Elect of the International Dyslexia Association and a former member of the Professional Advisory Board for the National Center for Learning Disabilities.

HOUSE PASSES MENTAL HEALTH PARITY LEGISLATION March 6, 2008

Last night, the U.S. House of Representatives passed legislation requiring full parity in health insurance plans. The legislation is known as the "Paul Wellstone Mental Health and Addiction Equity Act" (HR 1424).

The legislation would expand the Mental Health Parity Act of 1996 by prohibiting group health plans from imposing treatment or financial limitations on mental health benefits that are different from those applied to medical/surgical services. The legislation closes the loopholes from the 1996 law (known as "partial parity") that allowed discrimination in the co-payment, coinsurance, deductible, maximum out-of-pocket limit and day and visit limits. It applies only to group health plans already providing mental health benefits, and excludes (as does current law) health plans sponsored by employers of fewer than 50 people.

The House vote was 268 to 148, with 47 Republicans joining 221 Democrats in support of the measure. The Senate version of the bill passed the Senate by unanimous consent on September 18, 2007. Next, both the House and Senate will convene a conference committee to negotiate the differences between the two bills

Teach LD Students to Write Well

Children with learning disabilities can learn to write well when they are taught well. The Writing Road: Reinvalidate Your Students' Enthusiasm for Writing provides multiple tools for this important task.

Here are some tips from the article:

- Before the student begins to write, provide background information for the assignment. Try a KWL chart. Have three columns: K for "What do you know? "; W for "What do you want to know?"; and L for a "What have you learned?" The L column is completed after discussion or research.
- Use definitions and context to teach vocabulary. Have the child think about each word and connect the word to what he or she already knows.
- Teach words in clusters. Learning similar words together will help the student understand them because they can be compared and contrasted.
- Graphic organizers are effective for students, particularly those who have executive function difficulties. The article gives numerous examples.
- Use mnemonics to help with proofreading. One example in the article is COPS (Capitalization, Organization, Punctuation, Spelling).

Whether you are a parent, a veteran teacher, or a newly graduated professional, you will find helpful and interesting information in this article.

To read the entire article, visit www.ldonline.org/article/5608.

Report: Support, Comfort Key to Children with ADHD

Children with ADHD feel different and isolated but are comforted by supportive teachers and parents, according to a new report in the Journal of Pediatric Nursing based on interviews with college students who have been diagnosed with the disorder. "She just held me and I just cried and cried. And she said, 'You are not different. You are beautiful and sweet,'" one student said of her mother. "It didn't take away the problem, but it affirmed to me that she cared.

No matter how much I went to school and felt like ... nobody liked me ... when I went home, I knew it wasn't fake.

And it was a good place. There I was loved; I fit in and I was fine." The New York Times (2/1)

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www.help4adhd.org

The **National Resource Center on AD/HD: A Program of CHADD** is the nation's clearinghouse for science-based information about all aspects of attention-deficit/hyperactivity disorder (AD/HD). Funded through a cooperative agreement with the Centers for Disease Control and Prevention, the NRC provides information on this disorder which affects how millions of children and adults function on a daily basis.

Ohio Children's Buy-In Program

Ohio's Children's Buy-In (CBI) program is a state-funded health care program for certain uninsured children in families with income over 300 percent of the federal poverty level.

Applications for CBI will be accepted starting April 1, 2008. The program was created as part of Governor Strickland's plan to "Turnaround Ohio", to provide more uninsured Ohioans with access to affordable health care.

To qualify, children must be:
Younger than age 19, a US citizen and resident of Ohio, uninsured for at least six months and not eligible for Ohio Medicaid.

Other restrictions apply.
Applications are accepted online only.

Visit: www.jfs.ohio.gov/ohp/cbi.

For questions contact the Ohio Department of Job and Family Services

SUMMERTIME FOCUS

Sponsored by Project All Reading Children
9810 Ravenna Road—Twinsburg, OH

A 4-week program where children going into grades 2—6 reinforce reading and math skills and participate in arts, crafts and games.
Contact Rachel or Jacque at 330-487-0272.

PEERS Project

(Parent, Education, Empowerment, Resources, Supports) ... For parents of children with severe emotional and behavioral disorders.

PEERS is a free program of Mental Health America of Summit County designed to assist parents of children with severe emotional and behavioral disorders. They offer support groups in Barberton and Cuyahoga Falls, education, referrals and also advocate services for individuals and families.

For information visit www.mhasc.net
or call 330-923-0688

From the National Center for Learning Disabilities.....We'd like to announce the upcoming launch of *Parent News* — the newest addition to NCLD's FREE email newsletter subscription options. This newsletter is designed especially for parents of children who are struggling in school or who have an identified learning disability (LD).

To subscribe go to www.ncl.org and click on "e-newsletters" on the right side.

Students with Disabilities Preparing for Postsecondary Education: Know Your Rights and Responsibilities

U.S. Department of Education
Office for Civil Rights
Washington, D.C. 20202
March 2007

More and more high school students with disabilities are planning to continue their education in postsecondary schools, including vocational and career schools, two- and four- year colleges, and universities. As a student with a disability, you need to be well informed about your rights and responsibilities as well as the responsibilities postsecondary schools have toward you. Being well informed will help ensure you have a full opportunity to enjoy the benefits of the postsecondary education experience without confusion or delay.

The information in this pamphlet, provided by the Office for Civil Rights (OCR) in the U. S. Department of Education, explains the rights and responsibilities of students with disabilities who are preparing to attend postsecondary schools. This pamphlet also explains the obligations of a postsecondary school to provide academic adjustments, including auxiliary aids and services, to ensure the school does not discriminate on the basis of disability.

OCR enforces Section 504 of the Rehabilitation Act of 1973 (Section 504) and Title II of the Americans with Disabilities Act of 1990 (Title II), which prohibit discrimination on the basis of disability. Practically every school district and postsecondary school in the United States is subject to one or both of these laws, which have similar requirements.^{*/} Although both school districts and postsecondary schools must comply with these same laws, the responsibilities of postsecondary schools are significantly different from those of school districts.

Moreover, you will have responsibilities as a postsecondary student that you do not have as a high school student. OCR strongly encourages you to know your responsibilities and those of postsecondary schools under Section 504 and Title II. Doing so will improve your opportunity to succeed as you enter postsecondary education.

As a student with a disability leaving high school and entering postsecondary education, will I see differences in my rights and how they are addressed?

Yes. Section 504 and Title II protect elementary, secondary and postsecondary students from discrimination. Nevertheless, several of the requirements that apply through high school are different from the requirements that apply beyond high school. For instance, Section 504 requires a school district to provide a free appropriate public education (FAPE) to each child with a disability in the district's jurisdiction. Whatever the disability, a school district must identify an individual's education needs and provide any regular or special education and related aids and services necessary to meet those needs as well as it is meeting the needs of students without disabilities.

Unlike your high school, your postsecondary school is not required to provide FAPE. Rather, your postsecondary school is required to provide appropriate academic adjustments as necessary to ensure that it does not discriminate on the basis of disability. In addition, if your postsecondary school provides housing to nondisabled students, it must provide comparable, convenient and accessible housing to students with disabilities at the same cost.

What academic adjustments must a postsecondary school provide?

The appropriate academic adjustment must be determined based on your disability and individual needs. Academic adjustments may include auxiliary aids and modifications to academic requirements as are necessary to ensure equal educational opportunity. Examples of such adjustments are arranging for priority registration; reducing a course load; substituting one course for another; providing note takers, recording devices, sign language interpreters, extended time for testing and, if telephones are provided in dorm rooms, a TTY in your dorm room; and equipping school computers with screen-reading, voice recognition or other adaptive software or hardware.

In providing an academic adjustment, your postsecondary school is not required to lower or effect substantial modifications to essential requirements. For example, although your school may be required to provide extended testing time, it is not required to change the substantive content of the test. In addition, your postsecondary school does not have to make modifications that would fundamentally alter the nature of a service, program or activity or would result in undue financial or administrative burdens. Finally, your postsecondary school does not have to provide personal attendants, individually prescribed devices, readers for personal use or study, or other devices or services of a personal nature, such as tutoring and typing.

You can get a copy of this entire pamphlet at :
<http://www.ed.gov/about/offices/list/ocr/transition.html>
Or call the parent mentor office at 330-908-6219

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Northfield, Oh 44067



Summer Reading

Please call the parent mentor office if you would like to borrow a book or video for the summer. Check the parent mentor page (under pupil services) on the Nordonia School District web site for a complete listing of available resources!

Summer Camp Information

Call the parent mentor office for camp information.