

P A R E N T N E T W O R K

Idaho Parents Unlimited, Inc. Serving Idaho Families for 20 years



Healthy Beginnings

You've heard it over and over. With good reason. The first few years of a child's life are the most critical in terms of healthy brain and emotional functioning. The following addresses some basic questions around this most vital issue.

Sometimes, due to post partum depression or to mental health problems of their own, parents can't always give children the nurturing that they need. What can happen if children don't have healthy early relationships?

- Some children seem sad, rejected and lethargic because they lack a role model for smiling or happiness. They imitate a flat, expressionless countenance, a lack of joy.
- Some babies may become depressed or develop eating problems.
- Some children try to meet their own needs. They "self-stimulate" or rock back and forth trying to nurture themselves. They may be so starved for affection that they seek hugs from any willing adult. The potential for danger here is clear.
- Some children get angry. They are aggressive and hostile without provocation. They won't allow comforting, even when they are hurt, because past relationships have not been nurturing.

SUGGESTIONS AND TOOLS FOR PARENTS AND CAREGIVERS TO ENHANCE NURTURING CHILDREN'S MENTAL HEALTH:

- Surround children and yourself with nurturing relationships.
- Create a nurturing environment.
- Provide stable and consistent caregivers at home and in childcare settings.
- Learn about and respond to children's cues.
- Spend unhurried time together.
- Learn about child development and have realistic expectations.
- Comfort and reassure children when they are scared, angry or hurt.

- Develop routines to promote predictability and security.
- Model good relationships and healthy ways to manage conflicts.
- Consider how whatever you're doing or going through may affect a child.
- Identify early signs of emotional or mental problems and take appropriate action to address them.
- Understand that children exposed to a traumatic event (death or prolonged illness of a loved one, natural disaster, accident, or suicide) can develop long-term mental health concerns unless treatment is obtained early in life.

WHAT ARE POTENTIAL SIGNS THAT A CHILD MAY NEED SOME HELP?

The intensity and frequency of the following signs may indicate that a child needs assistance. They do not indicate definite mental health concerns and are to be used only as "red flags."

INFANTS (BIRTH TO 12 MONTHS):

- Are unusually difficult to soothe or console
- Have limited interest in things or people
- Are always fearful or on guard
- Consistently react very strongly toward touch, sounds or movements
- React strongly for no reason
- Show evidence of abuse or neglect

TODDLERS:

- Display very little emotion
- Are unable to comfort or calm themselves

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- Have limited interest in things or people
- Do not turn to familiar adults for comfort or help
- Have inconsistent sleep patterns

PRESCHOOL CHILDREN:

- Consistently prefer to not play with either toys or with other children
- Go with strangers easily
- Are destructive to self or others
- Hurt animals
- Have limited use of words to express feelings

PARENTS:

- Have known mental illness
- Have substance abuse
- Have limited coping skills
- Have a history of traumatic events
- Frequent moves or lack of friends and support

WHERE TO GO FOR HELP

Childcare providers, foster parents, clergy, health care providers and others can support children in a variety of ways:

- Join your local Idaho Infant and Early Childhood Mental Health System or Care team. Contact your local Infant Toddler Program office for information about regional meetings. Look in the phone book under "State of Idaho, then look under "Children's Mental Health".
- Attend trainings on emotional and social development to learn more and implement relationship-based services. Check the state training website at www.idahotc.com; and
- Check out websites with developmental and infant and early childhood mental health information: www.talaris.org; www.idahochild.org; www.zerotothree.org; www.teach-morelovemore.org; www.isu/irh/bettertoday

SHOULD I WAIT UNTIL THE CHILD CAN TALK BEFORE CONSIDERING MENTAL HEALTH SERVICES?

No. Research on brain development shows that the first three years of life are critical. During the first few months of life, pathways multiply in the brain. As the infant develops trust and attachment, the foundation for lifelong success in relationships and school is established. It is important to get help as soon as you have concerns that it might be needed.

The above information was developed from the Idaho Infant and Early Childhood Infant Mental Health System of Care, Boise State University's Early Childhood Studies, the Florida State University Center for Prevention and Early Intervention Policy and a variety of other sources.

Letter from the Executive Director

This edition of the newsletter will provide follow-up information on IPUL and information on topics discussed in our April issue. You'll find the second article in a series on mediation as well as information on No Child Left Behind and how it impacts children with disabilities.

Be sure to read exciting news about the creation of the Idaho Hispanic Resource Center, formerly known as the Community Parent Resource Center (CPRC).

You will also find the second in a series of articles on "People First Language" and attitudes about people with disabilities. This article, written by Susan Valiquette, looks at how words affect our children. This series of articles is intended to educate the public and improve the ways in which society views and interacts with our children and families.

IPUL continues to be involved in efforts to assist families struggling with health care issues. IPUL staff has recently attended meetings with several agencies, including the Department of Health and Welfare, to discuss the health system for children with extreme health challenges. IPUL recently applied for the Family to Family Health Care Information and Education Center grant from the US Department of Health and Human Services. The goal of this project is to build an information infrastructure in Idaho to assist families in navigating the complex system of private insurance, Chip A and Chip B programs, Medicaid, and the vast array of home and community based services. News of the grant will be out in early fall.

If you would like copies of the previous issue of the newsletter, or any issues in Spanish, call our office or visit our web page at <http://www.ipulidaho.org/newsletters>.

*Sincerely, Evelyn Mason
Executive Director*



Input Needed on Children's Special Health Needs

Children's Special Health Program (CSHP) is a federally funded, state administered program designed to fill the unmet needs of children with certain health conditions, such as cleft lip and palate, neurological disorders, cardiac disorders, orthopedic disorders, cystic fibrosis (CF), Phenylketonuria (PKU). Traditionally, these children were diagnosed and followed by pediatric specialists through clinics sponsored by local Public Health Districts. The health districts provided additional services including building space and staff time. Over the last few years some of these clinics were moved out of the Health Districts. The clinics in Boise were turned over to St. Luke's about five years ago. In addition to the clinic visits by pediatric specialists, the program provided health-related "case management" giving parents assistance with navigating insurance claims, locating medical supplies and equipment, arranging transportation for treatment, etc.

The Division of Health has ended its contracts with Health Districts and no longer sponsors clinics. Some of the clinic services are still provided through physicians' offices and through St. Luke's. IPUL has not been able to get a definitive list of what clinics or clinic-like services are still being provided through private entities around the state. CSHP also provided payment for treatments, therapies, drugs, equipment and supplies when these were not covered by Medicaid or health insurance, or when there were large deductibles or co-pays.

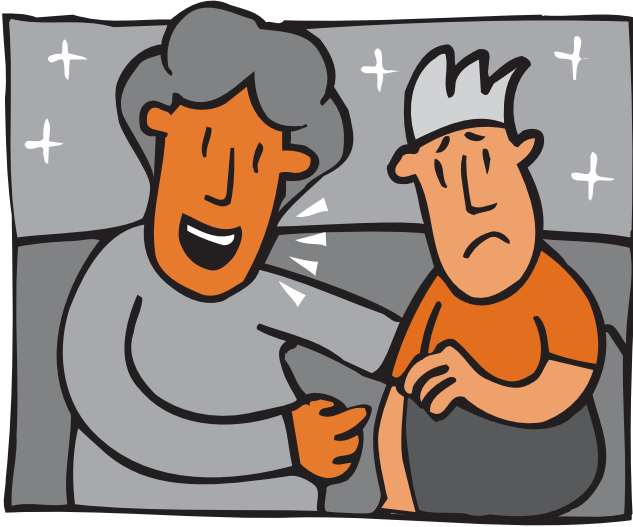
On October 1, 2004 the Department of Health and Welfare, Division of Health issued new rules which change the eligibility for Children's Special Health Program (CSHP). Under the new rules children with Medicaid or private health insurance coverage are

excluded from coverage for CSHP, except for children with Cystic Fibrosis, or PKU. It will not matter if the medical services the child needs are excluded by their insurance or whether they have high deductibles or co-pays. It does not matter if they have prescription drug coverage or not. It does not matter if their condition is excluded from coverage as a pre-existing condition.

The "case management" function is mostly gone from the program, although we have been told that there is one staff person at St. Luke's who provides statewide information and referral by telephone, and may provide some of the case management services to children in the St. Luke's program.

We are trying to assess the impact of this change. We would like to hear from anyone who would have qualified under the old rules but now faces a hardship due to the changes. These are likely to be children with high deductibles and co-pays or children who need services excluded by insurance policies. Some may be children on Medicaid whose needs are not met or covered. We also need information on what "clinic" services are still functioning and how they compare to the old clinic services. If you have such information or know a parent in these circumstances, please have them contact IPUL at 342-5884, or Tracy Warren at the DD Council 334-2178.

We will continue meeting with a host of major stakeholders this fall to look for solutions to these problems. This information will help us be more effective in addressing Idaho families' needs.



Sticks and Stones...

By Susan Valiquette

In a society where we no longer refer to people in derogatory terms, why is it acceptable to refer to someone who may have made a mistake, or done something that one may consider stupid, as a “retard”?

I don't consider myself to be one of those parents who get offended by any term other than “a person with special needs” used to describe a person who functions lower than the norm. I know my son has mental retardation (he has Down Syndrome); he knows it too. It's not something we see as a negative. In fact, his dad and I are extremely proud of him. However, he is painfully aware that others may think of him as different.

For all the social changes of the last generation, it seems to be socially acceptable to refer to people like our son as a “retard.” I'm not blaming popular culture for all the ills of the world, but I do believe that the people making movies and TV shows, for example, have a social responsibility and the ability to be a positive influence on our children. Some of Hollywood's biggest stars have used the term “retard.” It's heard time and again in “teenage” movies. What is the message being sent to people in audiences if not that it's bad to have a developmental disability or that you're less than human or less worthy of respect and equal treatment if you have mental retardation?

Reuben is an avid film-goer. He was even lucky enough to land a speaking part in “House of Cards,” which starred Kathleen Turner and Tommy Lee Jones. This experience heightened his love and knowledge of movies. He was treated like a star with his own trailer and a stand-in and got lots of respect from the crew. However, even though the movie was about a child with a communication disorder, the writer still found it necessary to use the “R” word.

Try to imagine how confusing it is for him to hear the “R” word used so casually by entertainers that he puts so much faith in. I can tell you there is nothing more painful than sitting next to your child watching a movie that he has waited months to see and hearing one of his and, yes your favorite stars refer

to someone as a “retard.” I've seen the look of hurt and sadness on his face too many times.

I wonder if the writers, directors, and actors think of children like my son when they are making their movies. I doubt it, or why would they do something so hurtful? Hollywood needs to get with this century. Not that it should have ever been okay to use the term “retard” any more than “nigger” should have been used in everyday life, but hey, wake up. We are witnessing the closing of state institutions that used to house persons with special needs. My son and others like him are staying in our communities. They are taking money that they earn bagging your groceries or folding your laundry or making your bread and they are paying to see your movies. Popular culture in general and “Hollywood” specifically have such a great opportunity to be a force for good, such a great opportunity to portray positive, life-affirming role models. I don't mean to say that films have to have a G rating or take a Pollyanna view of life or ignore the painful aspects of life in the creation of their art. But I do mean that all of us could do a lot better than the gratuitous use of words like “retard” and “nigger” that serve no purpose but to demean others.

I would like to end with a story that I hope readers will carry with them and think about the next time they see a person with a disability. Reuben has been asked by a university professor to speak to graduate students each semester at one of our universities, something which makes him very proud. Recently one of my sisters asked him what he talked to them about. He said he tells them about having Down Syndrome and mental retardation. He went on to say that he wanted the students to know that people with mental retardation are smart and have feelings. When she asked him to explain, he asked if she knew the saying “Sticks and stones will break bones, and names will not hurt you.” Then he put his hand over his heart and said, “That's not true; names hurt deep inside my heart.”

MEDIATION

Part Two

IDEA 2004:

1. Requires that mediation is available whether or not there is a due process hearing request
2. Provides parents and school the opportunity to meet with a disinterested party to try to find a mutually acceptable solution
3. Adds mediation requirements



In the IDEA 2004 reauthorization mediation plays a more prominent role in the dispute resolution process. In response to the increased importance of mediation the Parent Network is continuing our series with some case examples of the mediation process. We will continue the series with mediation stories from the publication titled Families and Schools: Resolving Disputes through Mediation from the Consortium for Appropriate Dispute Resolution in Special Education (CADRE). You will find many similarities in the stories. You will also see differences in how each scenario or process unfolds. The stories show how experienced mediators use a variety of methods to help participants work through their differences and come to an agreement.

OVERVIEW

In this situation, the challenge is to reach agreement on an educational placement for the upcoming school year for Michael, an eight-year-old who has a severe learning disability and ADHD. Michael's mother, Doris Collins, and an advocate, Rueben Marsh, attend the meeting to offer the parent perspective. The Director of Special Education, Dr. Alice McCall, attends for the school system.

PARENT CONCERNS

Mrs. Collins begins by saying that Michael was found to have ADHD and a severe learning disability when he was four. So far, Michael has gotten all of his education and related services at home. Mrs. Collins doesn't feel he is ready for an education that is not home-based, and she is worried that he will not be successful if he is mainstreamed with other students. Up to now, the school district has provided one-on-one tutoring at Michael's home. Mrs. Collins wants this to continue and does not want to "experiment" by putting Michael in a regular school setting.

SCHOOL CONCERNS

Dr. McCall states that Michael does need intense special education services and that the district is willing to continue to provide them – but only in a school setting. Dr. McCall is concerned that if Michael continues to be educated

with one-on-one tutoring at home, he will miss important social learning that can only happen by being with other students. The district believes Michael is ready to be in school with his peers.

THE PROCESS

After each side speaks, the mediator invites Mrs. Collins and Dr. McCall to ask questions of each other and to talk about each other's concerns. This leads to more direct sharing of information between them, but each side still feels that their ideas are best for Michael. With each side holding so strongly to their beliefs, the mediator decides it is time for a caucus.

In a caucus, the mediator meets with each side privately. This is a time to explore sensitive areas and to help each participant move beyond their tightly held positions. When a mediator does caucus, she typically does so with each side. These discussions are confidential and information is not shared with the other participants without permission.

During the caucus with the school, Dr. McCall has little more to add. She

restates the school's belief that it is in Michael's best interest to be in a school environment and that he will suffer if he doesn't spend time with other children his age. Dr. McCall says she is open to any ideas that might address the school district's desires and also respond to Mrs. Collins' concerns.

The caucus with Mrs. Collins is tense. After some time, Mrs. Collins' advocate, Mr. Marsh, raises a question that ends up helping the mother and school district move toward an agreement. "Do you just expect this kid to go from 5 days a week of home schooling into a regular classroom without any problems?!" Clearly this question brings to light an important concern that needs to be discussed. The mediator invites Mr. Marsh and Michael's mother to discuss this between them. Then it is agreed to share this concern with the district.

The mediator again meets privately with the district and relays the concern about the effect of an abrupt and extreme change in Michael's services. Dr. McCall understands this is an important issue and suggests that a trial period - with a

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Mediation continued from previous page

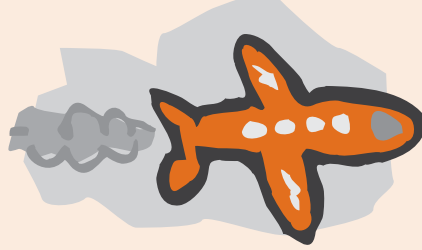
mix of in-home tutoring and regular classroom placement with appropriate supports - might be worth trying. In this way, Michael will have the benefit not only of the learning at home that he is used to, but also the benefits of being at school with other children his age. Progress could be monitored and changes made over time with the end goal of Michael being educated at school, in the least restrictive environment available and appropriate for him. When Mrs. Collins is given this option, she indicates she is still worried, but is willing to try as long as the change is not going to be too extreme.

The mediator brings the participants back together and shares with the school district the mother's thinking about Michael's transition from in-home to school-based services. The district is willing to try school services three hours a day, five days a week for a trial period of at least eight weeks. Mrs. Collins agrees to this schedule. The mediator then asks several questions to be sure that, as much as possible, any potential problems with the agreement have been addressed.

A final agreement is then written that includes a detailed calendar of Michael's services — when he will be educated at home, when he will be educated at school, the nature of his services and supports in each location, and a set time every two weeks for the mother and school to discuss his progress. They agree to take the agreement back to Michael's IEP team with a goal of having the agreements incorporated into the IEP. They also agree to meet with the mediator again at the end of the eight-week trial period to discuss any issues that need attention at that time. At the end of the meeting, the mother and school district each leave with copies of their signed mediation agreement.



Air Carrier Access Act and Travel Hotline



By Julie Cathers

A toll free hotline is available to assist passengers with disabilities who travel by air. These travelers have rights under The Air Carrier Access Act of 1986 (ACAA). This Act prevents airlines from discriminating against people with disabilities. The ACAA affects all domestic air carriers and airport facilities, including terminals, parking and ground transportation, within the United States and its territories, possessions, and commonwealths. It was amended in 2000 to cover foreign air carriers operating in the United States.

Primary ticketing areas must be accessible and baggage areas must be free of barriers such as turnstiles. At least one telecommunications device for the deaf (TDD) must be provided in a clearly marked and accessible location in each terminal.

In general, airlines can not require advance notice for persons with disabilities to fly, although some accommodations do require 48 hours advance notice. Even if notice is not given, the carrier must provide the accommodation or service if it can be done with reasonable effort and without delaying the flight.

Customers with mobility impairments cannot be required to sign waivers of liability for damage to, or loss of, wheelchairs or assistive devices. The compensation for this type of incident is based on original price of device. Security personnel may examine assistive devices they believe may hide a weapon or other prohibited items.

The airlines require a medical certification for passengers traveling in an incubator or on a stretcher, for someone who may require medical assistance during the flight, for a passenger with a communicable disease, or for a passenger requiring medical oxygen during flight. An oxygen supply may not be brought on board, but passengers may use the aircraft's supply and a reasonable fee may be assessed. Airplanes with more than one aisle and any number of bathrooms must have at least one bathroom that is accessible. Carriers

do not have to retrofit their airplanes to ensure accessibility. When a plane that does not have the accessible features, such as movable aisle armrests and accessible lavatories, is renovated or lavatories are replaced, these sections must be refitted with equipment for ACAA compliance.

Individuals assisting passengers with disabilities should check in at the ticket counter to get a security pass. Airlines may not require a person with a disability to pre-board and may not segregate passengers with disabilities. The Federal Aviation Administration (FAA) requires air carriers to determine if a passenger can perform the duties that accompany sitting in an exit row. Medical supplies and/or assistive devices do not count toward the limit of one carry-on bag and one personal bag.

Airline personnel must assist passengers with disabilities in boarding and exiting the plane. This assistance must include the necessary personnel, wheelchairs, ramps, or mechanical lifts. If a lift is required, the passenger must check in one hour before departure.

We hope you will not have any disability-related air travel problems, but if you do, they can be resolved through the Hotline: 1-800-778-4838 or (TTY) 1-800-455-9880. The hours of operation are 7:00 a.m. to 11:00 p.m. EST, seven days a week. The purpose of this phone number is for education and to offer assistance in resolving disability-related air travel problems.

U.S. Department of Transportation
Aviation Consumer Protection Division,
C-25
400 7th Street, SW
Washington, DC 20590
202-366-2220 / (TTY)202-366-0511
airconsumer@ost.dot.gov

For more information on the above, please call the Hotline or visit the following links:
<http://www.unitedspinal.org>
<http://www.abilitycenter.org>

RESOURCES AND WEBSITES

The Idaho State Independent Living Council (SILC) has completed the 2004-2005 statewide survey regarding Idahoans with disabilities and provides lots of interesting statistical information about the people of our state. <http://www2.state.id.us/silc/index.htm>

The National High School Alliance recently released “**A Call to Action: Transforming High School for All Youth,**” a framework of six core principles and recommended strategies for preparing all of our nation’s youth for college, careers, and active civic participation. It provides a common framework for building public will, developing supportive policies, and actually implementing the practices needed to radically change the traditional American high school. Available in PDF (13 pages, 141 KB). <http://www.hsalliance.org/>

The National Collaborative on Workforce and Disability has published an Information Brief on “**Breaking Down Technological Barriers.**” The Brief describes assistive technology and accessible information and gives policymakers information on federal and state accessibility legislation, laws, and requirements. <http://ncwd-youth.info/resources & Publications/information Briefs/issue14.html>

The Institute for Community Inclusion, University of Massachusetts-Boston, produced “**Job Networking in Diverse Communities**” (April 2005), which describes a project to introduce and broaden personal and professional networking techniques among job seekers with disabilities from African-American, Haitian, and Latino backgrounds. The project formed a unique partnership with four community-based immigrant organizations. The brief offers insights and a broad perspective on how enhanced networking strategies can be used in diverse communities to help people with disabilities find better jobs and increase their integration into their communities. <http://www.communityinclusion.org/publications/pub.php?page=rp37>

People with disabilities may feel uncomfortable networking for a number of reasons, including fear of the unknown, cultural issues, family concerns about safety, and barriers related to their disability. **The Institute for Community Inclusion**, University of Massachusetts-Boston, produced “**Make Networking Easier for Job Seekers: A Guide**” (April 2005) to address the common reasons why people

with disabilities may not be comfortable networking and to provide some possible solutions. It is geared toward anyone who is helping someone they know find a job.

<http://www.communityinclusion.org/publications/pub.php?page=ib20>

The Substance Abuse & Mental Health Services Administration, (SAMHSA) U.S. Department of Health and Human Services, has made available their Web cast, “**Models of Self-Direction in Mental Health: What’s Out There?**,” which aired March 16, 2005. The Web cast itself is available in RealPlayer, WindowsMedia, and captioned versions. In addition, you can download presenter biographies, presenters’ PowerPoint presentations, and discussion questions in PDF format.

<http://www.connectlive.com/events/samhsa040605/>

A myriad of programs across federal and state agencies provide health, education, workforce, and human services for people with disabilities. However, the placement of these programs within government varies from state to state. This can lead to confusion for consumers and families not knowing where to turn for these services. **The National Collaborative on Workforce and Disability** has created a brief that describes new federal and state programs and agencies that provide services to help people with disabilities live independent and productive lives.

<http://ncwd-youth.info/resources & Publications/information Briefs/issue15.html>

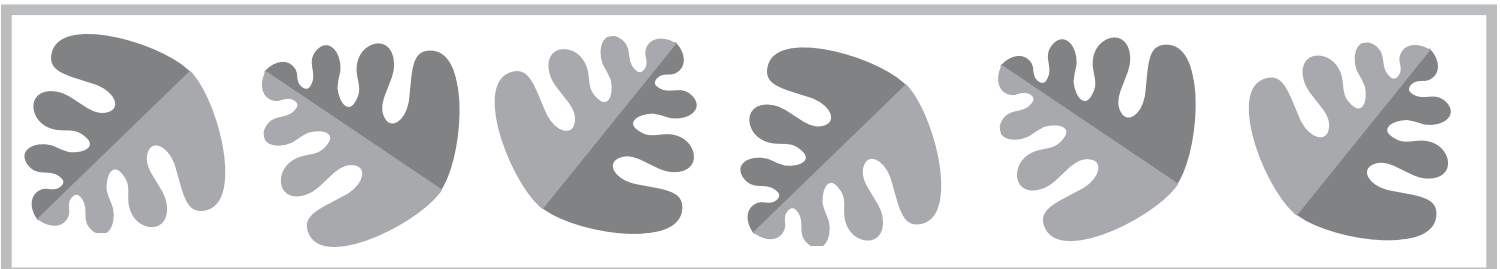
DO-IT, Disabilities, Opportunities, Internetworking, and Technology was developed by the University of Minnesota to stay on the cutting edge (not the bleeding edge) of technology in the delivery of resources that are accessible to people with disabilities. The website at <http://www.washington.edu/doi> will link you to a wide variety of websites. The AT link finds publications and videos such as:

[_Working Together: People with Disabilities and Computer Technology](#) - an overview of adaptive technology.

[_Working Together: Computers and People with Learning Disabilities](#) - an overview of computer-based tools for people with learning disabilities.

[_Working Together: Computers and People With Mobility Impairments](#) - an overview of computer-based accommodations for people with mobility impairments.

[_Working Together: Computers and People with Sensory Impairments](#) - an overview of accommodations for people with sensory impairments.



Idaho Assistive Technology Project is SEEKING YOUR INPUT

The Idaho Assistive Technology Project (IATP) is currently preparing its application for renewing its federal funding available under the new Assistive Technology Act of 2004 and is seeking comments from the public about the quality of our services and activities. If your child is an assistive technology user please contact us with your comments at 1-800-IDA-TECH, (432-8324).

In passing the AT Act, the Congress has reaffirmed its commitment to supporting the use of assistive technology (AT) devices and services for Americans with disabilities. Since 1988, the AT Act has placed a special emphasis on increasing the availability of AT for children eligible for IDEA and Section 504 services. Emerging research demonstrates that using AT can be the difference between success and failure for many children.

Since its inception in 1992, the project has collaborated with the Idaho Department of Education, Special Services Bureau, to increase the awareness and expertise of educators and parents about the benefits of using AT. This has included statewide training for IEP

teams related to AT and the provision of specialized on-site AT assessments for children with disabilities. These services are conducted by practitioners who have extensive experience in the field of assistive technology.

The focus of the project is child-centered and team-based. To emphasize the importance of building the capacity of district personnel, teams are encouraged to participate in the state-wide "Tools for Life" Secondary Transition and Assistive Technology Fair. The Fair is conducted in conjunction with the IATP, SDE, and the Idaho Interagency Council on Secondary Transition. Training sessions are offered to help develop the skills of the teams in the area of AT. It is our hope that teams will be able to take the information learned during the Fair and generalize it to support other students.

In addition to seeking your comments, the project would like to thank IPUL and all of the other groups and individuals across Idaho who have supported our activities over the years.

IATP Opens New North Idaho ASSISTIVE TECHNOLOGY CENTER

The IATP has moved its north Idaho Assistive Technology (AT) center from Kootenai Medical Center to the newly constructed Coeur d'Alene Hand Therapy and Healing Center. The goal of this collaboration is to increase the availability of assistive technology devices and services in north Idaho. The AT Center will provide assistive technology demonstrations, training, and assessment services that are readily available to individuals living in north Idaho regardless of ability to pay, age, or disability category. The AT Center will maintain a wide array of devices that are typically used by individuals with disabilities. The AT Center is located at:

Coeur d'Alene Hand Therapy and Healing Center
2448 Merritt Creek Loop
Coeur d'Alene, Idaho
208-664-2901

Our other AT Center is at
United Cerebral Palsy
5420 W. Franklin St, Suite A
Boise, ID
208-377-8070





No Child Left Behind and Students with Disabilities

Public Law 107-110, the No Child Left Behind Act (NCLB—pronounced nicklebee) amends Title I (Improving the Academic Achievement of the Disadvantaged) of the Elementary and Secondary Education Act. The US Department of Education lists four themes:

- Accountability for results
- Proven educational methods
- More options for parents
- More local control and flexibility

The Individuals with Disabilities Education Improvement Act (IDEA) of 2004 attempts to align IDEA with NCLB.

Some of the issues raised in NCLB, as they relate to children with disabilities, are listed below. This will, of necessity, be a brief list. For more information please look for IPUL trainings in your area on No Child Left Behind.

Each State must implement yearly academic assessments, which are to be valid and accessible for all students, including those with disabilities or limited English proficiency. The ISAT, or Idaho Standards Achievement Test, is Idaho's approved assessment tool.

Performance results from these assessments in each state are to be disaggregated, or separated, so that the progress in six areas or populations can be looked at:

1. Gender
2. Major ethnic and racial groups
3. English proficiency
4. Migrants
5. Students with disabilities
6. Economically disadvantaged

Reasonable adaptations and accommodations, as determined by the IEP team, must be provided for students with disabilities to measure their academic achievement related to state standards. The IEP team also determines when a student cannot participate in all or part of the State assessments, even with accommodations.

For students with the most significant cognitive disabilities, assessments measure

their achievement relative to alternate academic achievement standards. Idaho Alternative Assessment, or IAA, is Idaho's approved alternate assessment tool. The state must have clear guidelines to determine a child's need for alternate standards. Parents must be informed when their child's achievement is based on alternate standards. Each State must report on how many students take alternate assessments based on alternate standards, alternate assessments on grade level, and regular assessments.

States that use alternate assessments must promote appropriate accommodations so that more students are tested against grade-level achievement standards, and must assure that staff is trained in doing the testing and in applying accommodations. To find out more about Idaho's assessment tools and results, visit the Idaho State Department of Education website at www.sde.state.id.us/dept/ and click on "Assessments and Accountability" on the left side of the page.

National Assessment of Educational Progress (NAEP) measures each State's progress in having students make adequate yearly progress (AYP). AYP is a State's measure of progress in meeting its academic standards. AYP applies the same goals to students in the six groups listed previously and looks at their progress each year in reading/language arts and in mathematics. AYP must also look at high school graduation rates, and

in elementary schools AYP must look at some other indication of achievement, such as attendance rates or grade-to-grade retention.

All States that receive Title I, Part A funds must prepare and distribute annual report cards showing how well students have done in each school, each grade, and each subject, as a whole and separated into the six subgroups, and including information on whether teachers of core subjects are highly qualified. This includes special education teachers who teach core subjects. (There are also standards for paraprofessionals, such as teachers' aides)

Schools whose students do not make adequate yearly progress for two years in a row must put in place a school improvement process to improve students' achievement and must also provide public school choice to all students in the school. These schools must offer supplemental educational services (SES)—tutoring or other supplemental academic enrichment services—to eligible low-income students who remain in the school.

Supplemental Educational Services must be consistent with a student's IEP, but are not considered part of the IEP. Parental consent is required before developing the supplemental services agreement, and the providers used must be able to serve students with disabilities, including the provision of accommodations in providing services.

This is just the bare bones of NCLB. For more information look for IPUL workshops on No Child Left Behind in your area.

Changes for CPRC

In 2002 Idaho Parents Unlimited applied for and received a three-year grant for the Community Parent Resource Center for Spanish-speaking families of Idaho. That grant is to end September 30, 2005.

Many exciting things happened that first year. The CPRC Advisory Council held its first meeting July 22, 2003. One new staff, Maria Hines, was added to the program in Burley. The "Parent Network" was translated into Spanish, as were all of the IPUL brochures. The IPUL conference had sessions in Spanish

During a conference in Washington D.C. for Parent Centers, it was announced that grant requirements had changed. Any agency applying for a grant needs to be a 501 c (3) (non-profit organization) with a governing board. For CPRC's, the governing board has to have 51% of its members be parents in that targeted population. We would have to separate from IPUL if we were to apply for the next CPRC grant. Hearing the news, IPUL's board of directors came to the rescue. The IPUL board graciously voted to assist the CPRC program financially by hiring an attorney and paying for filing fees. So, from February to May, the CPRC program wrote and applied for the new grant and started a new organization. It is with great pleasure that I announce that the Articles of Incorporation were filed on May 16, 2005 to create the new **Idaho Hispanic Resource Center**. The new board of directors - Rudy Peña, Chair; Manuel Guerra, IPUL Liaison; Elva Villareal, Secretary; Lourdes Ortiz, past Chair; Maria Barajas; Jorge Rivas and Miriam Flores—has met, and is moving forward.

IPUL and IHRC have agreed to remain together connected for the next three grant years. IHRC will continue to assist parents of children with disabilities and to collaborate and support Idaho Parents Unlimited. The Idaho Hispanic Resource Center Director and staff wish to thank IPUL board and staff for their support. It has been a great learning experience working with Evelyn Mason and Susan Valiquette. They both have taught me a lot and I am very grateful to them.

Socorro C. Sanchez
IHRC Director

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 Jerry Todd Miller, Nampa, Vice President
 Manuel Guerra, Boise, Treasurer
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Evelyn Mason, Executive Director
 Susan Valiquette, PTI Program Director
 Socorro Sanchez, CPRC Program Director
 Nancy Thiessen, VSA Program Director
 Kathy Hall, Bookkeeper, Secretary
 Dylan Stark, Tech. Support

CONTACT US:

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 1-800-242-IPUL (4785)
 FAX/TDD (208) 342-1408
 Email: parents@ipulidaho.org
 HTTP://www.ipulidaho.org

REGIONAL STAFF NORTHERN REGION Position Open

REGIONAL STAFF SOUTHWESTERN REGION

Julie Cathers - Ext. 105
 Email – julie@ipulidaho.org
 600 N. Curtis Rd., Ste. 145, Boise, ID 83706
 Jennifer White – Ext. 107
 Email – Jennifer@ipulidaho.org
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 FAX/TDD (208) 342-1408
 Yolanda deLeon
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 Ph: (208) 284-3855
 Email – yolanda@ipulidaho.org

REGIONAL STAFF SOUTHWESTERN REGION One Position Open

Maria Hines - Extension: 133
 Bilingual Parent Education Coordinator
 Burley, ID 83318
 Ph/Fax: (208) 219-0300
 Email: Maria@ipulidaho.org

IPUL SEEKS BOARD MEMBER NOMINATIONS



The IPUL Nominating Committee is on the look out for highly motivated individuals to serve on the IPUL Board of Directors. Board member elections will be held in October at the IPUL Annual Membership meeting. In analyzing potential board nominees, the Nominating Committee will look to maintain a majority of IPUL board members who are parents or guardians of children with disabilities; professionals who have expertise in serving children with disabilities and their families are also needed. The Committee is seeking representation of interests in all age groups, birth through 26, and across disabilities. Each of the seven regions, as defined by the Idaho Department of Health and Welfare, must also be represented by at least one board member. In order to be considered by the Nominating Committee, board member nominee applications must be received by **September 14, 2005**.

Board member terms are for two years. Members are expected to attend the annual meeting, board member orientation, quarterly board meetings, monthly committee meetings, and board retreats, as scheduled.

OBLIGATIONS OF THE BOARD INCLUDE:

- Establish and maintain written policies.
- Adopt an annual budget and review financial reports.
- Approve or ratify the expenditures of IPUL.
- Maintain, update and monitor mission statement, principles of operation, procedures and goals and objectives of IPUL.
- Secure adequate funds. Participate in fund-raising activities, including making an annual personal gift.

SPECIFIC DUTIES:

- Familiarize yourself with other board members and develop a mutually respectful rapport in order to reach a consensus to meet the goals of the organization.
- Listen respectfully to other members' opinions.
- Attend board meetings throughout the year and other related meetings as requested. It's important to be prompt, be informed prior to the meeting, contribute information, and provide constructive feedback on key issues.
- Actively participate on at least one committee to which you are appointed and thoroughly complete assignments within designated timelines.
- Participate in recruitment of new board members by providing names of potential candidates to the Nominating Committee.
- Represent IPUL to the public in accordance with IPUL policies.
- Educate yourself about the needs of the people IPUL serves.
- Allow approximately 5 or more hours per month to fulfill your duties as a board member.
- Maintain IPUL membership.

"It is an exciting time at IPUL and we really need people willing to commit their time and energy to IPUL," states Board President Martha Gilgen. If you, or someone you know, are interested in seeking a board position, please check the IPUL website for the board member application form. If you have questions, please call the IPUL office (208) 342-5884 or 1(800) 242-IPUL(4785).

IPUL Departing Staff

Virginia Henderson, who joined the IPUL team in February 2005 as parent education coordinator for Regions 1 & 2, moved on at the end of June. "I've loved every minute of my work with IPUL, but an opportunity has been presented that would greatly benefit my family and I've made the extremely difficult decision to leave my position," she said.



"Working with families to enhance their knowledge and ability to relate to and advocate for their children is incredibly rewarding," Virginia said. "It's hard for me to digest the fact that I've only been working with families for four months. I've made some connections that will stay with me the rest of my life."

The determination and love behind almost every phone call, every parent at a workshop, is a humbling reflection of what the human spirit is capable of, she said. "I think IPUL, and the work we do, is a microcosm of what the disability advocacy community can be and do — as individuals supporting each other, and as a group with a common vision," she said. "It's been an honor. I sincerely thank every parent and family member and all of the fine agency staffers I've worked with throughout the state. I know I will be a better parent and community member thanks to my experiences with you."

New IPUL Staff



Jennifer D. White joins us as the new Southwestern Region Parent Education Coordinator. She is a St. Louis native, and moved to Boise in November with her husband, Jeff. She is a graduate of the University of Missouri – Columbia, where she earned a B.A. in Spanish. She has spent the last few years teaching Spanish to children of all ages, but is thrilled to be working with IPUL!

Her family began providing respite care when she was five, and she has helped care for over 50 different children over the years. In 1991, her family became permanent caregivers for her foster sister, Laura, who had been a respite care client since 1985. "I often forget that she's not my biological sister. Our lives have been forever changed by her and our other 'kids.' I'm so thankful for the things they have taught me and the experiences I've had because of them."

Jennifer enjoys English smocking and sewing in her free time, as well as building websites and spending time with her husband and friends. "I look forward to being a part of this team!"

Dylan Stark, our new tech guru, was born in Nampa and graduated from Capital High in Boise. He went on to receive a BS in science from the University of Oregon. He spends as much time as possible hiking or camping near Stanley, ID.



After moving back to Boise, Dylan taught Junior High mathematics for several months. During that time he taught several students with disabilities, and participated in the pre-IEP evaluation process. He has a younger brother with ADHD and a childhood friend who uses a wheelchair.

A SPECIAL THANK YOU TO OUR IPUL DONOR CONTRIBUTORS:

VICKIE BURNET
BOISE, ID.

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AUDREY NUMBERS,
BOISE, ID

WE COULDN'T DO IT WITHOUT YOU ALL!



Farewell to Beth Eloë-Reep

Editor's Note: As Beth Eloë-Reep moves on to tackle new challenges as a developmental specialist at Transitions, Inc., and as a contractor for other disability-related agencies and entities, IPUL takes this opportunity to say farewell and thank you to one of our oldest and dearest associates.

Reach out. That's what Beth Eloë-Reep does. When people reach out to her, Beth listens. It sounds simple. It's not. It takes a unique blend of intelligence, empathy, and compassion to effectively serve families of children with disabilities as a Parent Education Coordinator for Idaho Parents Unlimited. For 16 years, Beth has brought her own special blend of service to families in Region 7.

Although she was trained as an elementary education major and she has earned a master's degree in education of the deaf, the arrival of her son led to a change in her plans. "The birth of my son with a cleft lip and palate plunged me into the world of being a parent... and like many people in the helping professions, I was motivated by some anger and a desire to help other families avoid the cracks into which our family had fallen," Beth said.

Beth believes becoming and staying informed while being a vigilant advocate in regard to the wide-sweeping school reform movement, with No Child Left Behind (NCLB) at the forefront, is one of the biggest challenges facing families and children with disabilities today. That, and the struggle involved in navigating the often confusing and difficult maze of private services and providers available to families, adds quite a load to families already stressed. IPUL can help here. With targeted resources and referral via phone and workshops focusing on both NCLB and the Individuals with Disabilities Act, among others, families have the tools they need to be vigilant and informed regarding these vital forces dramatically affecting education of children with disabilities. To request a workshop, just call IPUL at 1-800-242-4785.

For families of children just diagnosed, Beth's many years as a parent, educator and advocate lead her to offer the following thoughts for grounding and goal-setting:

Reach out to other parents. Your family and friends will love and help you, but no one can understand or support you the way another parent with a child in similar circumstances can.

Educate yourself. It is your responsibility to be your child's advocate. Wonderful professionals may come into your world, and it may be tempting to just put yourself in their hands. Professionals transition in and out of your lives, however. You, the parent, are the constant in your child's life, and you must understand your child's condition, disability law, and services.

Do what you need to do to keep yourself and your family healthy. You have been given great challenges and responsibilities, and you will need to be strong to meet them. Events may be taking you in unexpected directions, but you can dream new dreams and build a good life for your family.

Reaching out to families through her IPUL position has brought Beth closer to meeting those goals for her family and has enhanced her life on a very personal level. "I feel blessed and lucky that my family situation permitted me to work in this position," she said. "I am grateful and honored to have been touched and taught by so many good, smart, caring and dedicated people."

VSA ARTS OF IDAHO

VSA arts of Idaho congratulates Brooklyn Hathaway of Post Falls on her selection to represent Idaho at the "Discover What Art Is..." exhibit in Washington, D.C. Brooklyn's artwork, "Dreaming in Art," was included in the exhibit that was displayed at the historic Union Station from June 6 through June 26.

VSA arts of Idaho will be offering the Creative Access program this fall. This program places a local artist in the classroom to work with students with special needs and their non-disabled peers, to give them hands-on art

experiences in an integrated setting. The school is encouraged to provide something extra that the students typically would not be able to have during regular school programming. The Creative Access program offers funding of up to \$1000.00 to support these projects. Applications may be obtained by contacting the VSA arts of Idaho program director, Nancy Thiessen, by phone at 208-342-5884, by mail at 600 N. Curtis Rd., Ste. 145, Boise, ID 83706, or by email at nancy@ipulidaho.org. The application deadline is January 31, 2006.

IPUL Workshops

Although we are in the process of scheduling workshops in all areas of the state, due to staff vacancies at the moment it seems that it would be more helpful to let you know what workshops IPUL is prepared to present and ask that you contact the IPUL office if you would like a specific one in your area this year. It would be especially helpful if you are a member of a group that would like to help sponsor a particular presentation. Call (208) 342-5884, or 1-800-242-IPUL(4785) to request a presentation or for more information.

THE PRESENTATIONS THAT WE CAN OFFER ARE:

1. Individuals with Disabilities Education Act (IDEA)
 - A. IDEA and Special Education: A Parent's Toolbox (IPUL produced)
 - B. Success with the IEP
2. No Child Left Behind and Students with Disabilities
3. Understanding ADHD
5. Is Your Child the Target of Bullying?
6. From IFSP to IEP: Early Childhood Transition
7. Parent and Professional Collaboration: A Cultural Perspective
8. Positive Behavior Interventions
9. Preparing for Success after High School
10. Guardianship and Other Options

IT'S FINALLY HERE!

SAVE THE DATE!

**Brain Injury Association of Idaho's
Family and Professional Brain Injury Conference
October 7th & 8th, 2005
Boise Centre on the Grove
Boise, Idaho**

**Keynote Speaker: Claudia Osborn
www.claudiaosborn.com**

Sponsorship and Exhibit Information available upon request.

For more information, please contact us at:
Brain Injury Association of Idaho
P.O. Box 414, Boise, ID 83701
Office Ph/Fax: 208.342.0999
Office email: info@biaid.org
Website: www.biaid.org

"The Brain Injury Association of Idaho promotes awareness, understanding and prevention of brain injury through support, advocacy and education based on the expressed needs of persons affected by brain injury."

IPUL Membership Meeting We want YOU there!

The Idaho Parents Unlimited (IPUL) Annual Membership Meeting will be held at 7:00 p.m. on October 13th via teleconference across the state. This will make it easier for people from all parts of the state to participate. At this meeting participants will vote on new board members and learn about what has been going on with IPUL. In order to attend, members must call IPUL at 342-5884 or 1-800-242-4785 by October 6th, so that we will know where to arrange the teleconference sites.



Center on Disabilities
and Human Development



University of Idaho
College of Education



MARK YOUR CALENDARS

FEBRUARY 27 AND 28, 2006

The Idaho Interagency Council on Secondary Transition would like to invite you to attend the Tools for Life: Secondary Transition and Technology Fair, scheduled for February 27 and 28, 2006, at the Doubletree Riverside Hotel, in Boise, Idaho. The Tools for Life Fair is sponsored in part by the Idaho State Department of Education and the Idaho Assistive Technology Project.

Tools for Life is for anyone who has an interest in supporting individuals with disabilities as they transition from school to life. Throughout the two-day event there will be presentations by regional and national experts on issues surrounding secondary transition and assistive technology.

An Exhibitor Hall will be open both days to allow agencies and vendors the opportunity to promote their organizations, present resources, or demonstrate their newest products.

Last year's conference was a huge success!! Please join us next February 2006, at the Tools for Life: Secondary Transition and Technology Fair in Boise! For further information or questions contact Sue House or Yvonne Wright with the Idaho Assistive Technology Project at 800-432-8324 v/tt, 208-885-3628 fax.

More Information and Registration Form can be found at the Idaho Assistive Technology Project Website: www.educ.uidaho.edu/idatech or Register by Calling 1-800-432-8324

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This newsletter is also available in Spanish, by calling the IPUL office.

Our Mission

*Idaho Parents Unlimited, Inc. supports, empowers,
educates and advocates to enhance the quality of life
for Idahoans with disabilities and their families.*