Why are they Picking on Him?  
Identifying Nonverbal Learning Disorder

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Given all the available literature and media  
attention regarding dyslexia, attention deficit  
disorder, and other learning disorders, par-  
ents and caregivers have a general knowledge  
of what constitutes a learning disability.  
However, these categories don’t fit all chil-  
dren.

What about the child who seems to have  
behavioral issues, who doesn’t seem to “fit in”  
with his peers, and appears to be an easy tar-  
get for bullying? This child displays gross  
and fine motor skill difficulty, has a tendency  
to be clumsy, bump into other children and  
frequently falls down in the playground and  
in the classroom. The child may avoid col-  
oring, painting and picture drawing alto-  
gether. He is slow in learning to walk, riding  
a bike, tying shoelaces, and brushing teeth -  
anything that requires a coordination of  
motor skills. Because the child’s deficits are  
nonverbal, this child cannot read facial  
expressions, does not generally make direct  
eye contact with other people, and has great  
difficulty interpreting social cues.

This child’s strengths are talking, listening,  

From the editor...

We selected the theme, “Enhancing  
Opportunities for Children with Special  
Needs” to assist child care providers as  
they create and maintain environments  
that are productive and appropriate for  
ALL children, whether or not they have an  
identified special need or disability. Since  
all children have different learning styles  
and abilities, when they are all treated in  
the same manner, those abilities and dis-  
abilities may not be well served.

The term “special needs” refers to any  
attributes that require some kind of  
accommodation for the child. These mod-  
ifications may involve changes in the phys-  
ical environment, the educational program,  
or the nature of our interactions with that  
child. This issue includes articles that will  
help you to decide whether a child has a  
particular “special need” and how you  
might meet it.

In addition, information on advocating for  
children, managing the behavior of school  
age children, and understanding the role of  
prevention and intervention are also  
included. Items of interest from the  
Departments of Social Services and Public  
Health can be found in the State Agency  
Update. Lastly, be sure to check the  
Caregivers Resource Corner, where we  
have listed a reference on mandatory  
requirements for child care centers that  
relates to inclusion of children with dis-  
abilities.

Please let us know if these articles have  
helped you grow in your knowledge of the  
opportunities you can provide your chil-  
dren and their parents, and don’t forget to  
check our website at  
http://www.canr.uconn.edu/ces/acc/ to  
access past issues of the newsletter.
and memorizing words and facts. Children with this learning difference have an unusually large vocabulary and normal to superior intelligence. They tend to be very articulate at an early age, excelling in activities that involve reading and computer use, especially when assisting devices such as special software are employed to help with spelling and sentence structure.

If a child in your care displays some of these deficits and strengths, it is very possible that the child has a nonverbal learning disorder (NVLD or NLD). This learning disability was discovered over twenty years ago, yet it is still unknown to many educators, health care professionals, and parents. The symptoms are similar to those exhibited by children with Asperger's Syndrome which has also been described as high-functioning autism.

These children benefit from occupational therapy, psychological counseling, help with organizational and social skills, extra compassion and consideration from caregivers and educators, and special attention in regard to their safety. Extra measures should be taken to keep them safe on the playground and in the classroom. Clutter and extraneous equipment should be excluded from the entire program and play areas. A child with NVLD can become easily overwhelmed and confused by multiple wall displays and artwork. Structure, uncomplicated room design and a consistent routine are important components in creating a beneficial learning environment for these children. Animal care and pet therapy can be used as a valuable learning tool for the child with NVLD. A pet's...

(Continued on page 6)
Managing Challenging Behaviors in Young Children

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Managing challenging behaviors in young children is an area that has many early childhood providers concerned. Families of children with challenging behaviors often do not know how to navigate the system to find early childhood programs and services. The state of Connecticut has a unique opportunity for early childhood caregivers, families, and providers known as the Early Childhood Consultation Program (ECCP). Editor's Note: See related article below.

The ECCP is a free service provided to licensed child care centers and includes a relationship-based model that focuses on collaboration between directors, teachers, parents, and an Early Childhood Consultant (ECC). The services are provided on site with the goal of supporting the social and emotional development of children through either individual child or classroom-based services.

These consultants are masters level professionals with backgrounds in education, behavior, and mental health who focus on the healthy social and emotional development of young children in early care and education centers. They offer:

1. Connecticut-Charts- A Course approved trainings and workshops for caregivers as well as for families and other community providers.

2. Pre- and post-assessments/screenings for specific children.

3. Classroom and Child Action Plans based on information from the assessment tools for directors, teachers, support staff, and parents. The Action Plans are a collaborative effort between the caregivers in a child's life and the ECC.

4. Phone consultation services to centers, providers, parents, and any other provider involved in the child's life.

5. Information and referrals to other community resources on an “as needed” basis.

Programs who have utilized this service have these things to say about the program: “The Early Childhood Consultant has been a wonderful resource to our center. The teachers have found her suggestions viable and valuable for managing their classrooms and their scheduled activities.” – Director, Greenwich, CT

“The Early Childhood Consultant has provided us with constructive guidance that has enhanced the social and emotional growth in our classroom. In addition, the data she has provided allows us to see areas where we can provide activities that will elevate the children's learning experiences.” – Teacher, Bloomfield

To access the Early Childhood Consultation Program, call “Help Me Grow” Child Development Infoline at 800.505.7000.

Meeting Special Needs through Prevention and Early Intervention

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The number of hours a child spends in preschool or child care continues to rise, some remaining there close to forty hours per week. It is crucial that children pass this time in a warm, nurturing environment that promotes learning as well as social and emotional growth. The National Association for the Education of Young Children (NAEYC) provides guidelines for quality care and guides participating centers through the process of achieving these standards. Programs that adhere to the standards achieve accreditation.

Since the accreditation process occurs only once every five years, where can early childhood caregivers look for ongoing assistance to prepare their children for continued growth and learning opportunities? One place is the “Early Childhood Consultation Program” (ECCP), which provides free, center-based consultation services for licensed programs serving children ages zero through five. Consultants throughout the state deliver both classroom and child specific assessments geared toward prevention and early intervention of special needs and other problems. The mutual goal of both the consultants and early childhood caregivers is to promote the social and emotional growth of the children while supporting healthy behavioral development.

To assist with prevention and early intervention, consultants provide initial screenings for children with social, emotional, or behavioral concerns, working with parents and teachers in the classroom to create interventions supporting both healthy environments and interactions. When necessary, consultants offer community based referrals to support the specific needs of the child and family.

While ECCP services are available in licensed child care centers for all children ages zero to five, those who are in foster care or have an Individualized Education Program (IEP) are eligible for specialized services by the early childhood consultants. Bringing together the families, educators, and social workers (for foster children), the consultants complete assessments and work with all adults involved with the child, therefore streamlining interventions to support the child in the child care program and the home.

Children need adults to work together to provide environments and interactions that encourage physical, academic, and emotional growth. Through prevention and early intervention, teachers and parents address present day concerns in order to prevent future problems.

To access this service, offered by the Early Childhood Consultation Partnership, please contact Elizabeth Bicio, Program Manager, at 860.704.6198 or call the “Help Me Grow” Child Development Infoline at 800.505.7000.
Approximately 20,000 children are adopted each year in the United States. Many prospective parents in the United States have sought international adoptions in increasing numbers over the last decade. As more and more American families travel to Asia or South America to adopt children, differences in cultural and health beliefs have a great impact on caregivers here in the United States. Many of these children have physical, developmental, or emotional handicaps, which require specialized knowledge on the part of parents and care givers. The long delays and legal processes of the adoption process itself may affect even those children with unidentifiable special needs.

Differences in language, culture, and health care, frequent disparities between the countries’ medical terminology, and differences in professional education and current health care practices may pose further challenges for caregivers. Normal development issues such as separation anxiety, difficulty bonding with a new sibling, and the need for social adjustments as they enter child care settings may be more pronounced and cause stress for the children. In addition, some children may exhibit behavioral and emotional issues due to the unique variations in adjustment and differences in acclimation and acculturation.

The preschool period is a formative time in the development of children’s perceptions about themselves, the world around them, and the interface between the two.

Preschoolers who have experienced separation anxiety or adjustment issues may feel they are the cause of this stress and incorporate this information into their developing notion of how good they are as a person and their expectations of the world. Some children may be psychologically but not physically affected. Even toddlers and preschoolers may exhibit signs of stress.

Signs of Post Traumatic Stress Disorder (PTSD):

- Diminished ability to concentrate
- Persistent disturbances in sleep
- Flashback memories
- Disordered attachment behaviors
- Hyperarousal
- Hypertability
- Feelings of hopelessness
- Eating disorders
- Increased risk taking

Child care and health care professionals have an obligation to respect and understand the diversity of families’ health care needs and child-rearing practices. They need useful information to assist with the challenges of transition in caring for these children. They need to be aware of what signs children give when they need help. Information on resources and support for parents and primary care providers must include strategies for preserving the children’s heritage as they acclimate to Western culture. Simply put, we need to assess the child’s individual risk, recognize warning behaviors, provide transitional guidelines, design strategies to assist in optimal development, and provide support.

Important helpful suggestions: know what’s normal and what’s not, give these children plenty of love, time and attention, help build healthy self-esteem, talk with these children about stresses and concerns, know what type of temperament the child has, help them to minimize and manage stress, teach self-control and conflict/anger management, foster tolerance, and enforce family values. Parents of children who have been internationally adopted need a lot of support and assistance in meeting the normal developmental needs of their child as well as some of these unique needs.

Ongoing communication with the parents and understanding the needs of the child is key in terms of working with this population. Parents can join support groups, and Yale New Haven Hospital has an international adoption clinic. Caregivers may want to call a local adoption agency in the area to see if they would be willing to offer workshops to caregivers.

Special Needs of International Adoptions

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www.canr.uconn.edu/ces/acc
Does this Child Have Special Needs? --- How Do I Know?

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As a child care provider, one of the most important jobs you have is to support and advise parents when a child in your care shows signs of either a possible developmental delay or behavioral problems. Do you know how to give them information on referral, assessment, and evaluation? How do you talk to them about what they should expect if their child requires intervention? If parents are unaware of your concern, how do you approach the subject sensitively so that you don’t elicit a negative response from them such as anger or flat out denial that a problem exists.

Luckily, calling “Help Me Grow” can be of assistance to you as it can connect you to services and supports. This service is a comprehensive, statewide, coordinated system of early identification and referral of children at risk for developmental delays and behavioral problems. A program of the Connecticut Children’s Trust Fund, “Help Me Grow” works in collaboration with United Way of Connecticut/Infoline (the state’s telephone information and referral service).

You just need to call one number (800.505.7000), the Child Development Infoline, which provides information to anyone who has a concern about a child (birth through 5) at risk for developmental or behavioral problems. A trained telephone care coordinator helps both families and providers identify appropriate referrals and supports. Depending on the identified need, a family can be connected to any of the following programs: “Help Me Grow,” the Connecticut Birth to Three System, Preschool Special Education, or Children with Special Health Care Needs.

If the family does not qualify for any of the eligibility programs, they become a “Help Me Grow” family. A Child Development Community liaison (CDL) with “Help Me Grow” will research appropriate services and resources for the family and find up-to-date services that are available. Follow-up with the family ensures that they have been successfully connected to the resources provided.

In addition, “Help Me Grow” provides a free service for screening, the Ages & Stages Monitoring Questionnaires (ASQ), which can help identify whether a child age 4 to 60 months is experiencing delays that warrant further referral and/or evaluation. As a provider you can choose to offer the ASQ at your center or suggest that parents call “Help Me Grow” to sign-up for the Statewide Ages & Stages system. When parents sign up for Ages & Stages, they will receive questionnaires and information to assist in answering their questions about their child.

Since January 2002, “Help Me Grow” has connected over 7,000 families to services and supports. The type of services delivered include: parent education, child guidance, screening for developmental delays, domestic violence support, maternal and child health outreach, home visiting, parent aid, preschool special education, parent-to-parent support, and advocacy. For more information on any of the services described above, contact the numbers provided in this article.

“Help Me Grow” also holds bi-monthly regional Networking Breakfasts that bring together community-based agencies to share information and to develop solutions to challenging cases. The networking breakfasts have been successful in furthering the program’s goal of connecting children to services. If you would like to attend a breakfast, call 800.505.7000 to find the breakfast closest to you.

Advocating for Children with Special Needs

Adapted from www.cpacinc.org
Connecticut Parent Advocacy Center, Inc.

Advocate: To speak, plead, or argue in favor of.

As a caregiver or parent of a child with special needs, it is important to learn as much about the particular need and the resources for meeting the needs of the child. Resources exist to help you, such as Child care Infoline, the public schools, and organizations such as the Parent Advocacy Center, which is referenced at the end of this article. Here are hints on how to be a child’s advocate as a caregiver or parent.

1. Start with the assumption that you are an equal partner in the child’s education – You, as the parent, know the child best and it is important that you know about the educational decisions made for your child.

2. Deal with your perceptions or feelings about yourself as a parent of a child with special needs – Don’t let your feelings of anger or denial get in the way of working with those who provide support for your child.

3. Acquire knowledge – Know enough about your child’s needs to be able to ask questions. Find out about the resources that are available to answer your questions. Know the laws and state regulations that guide the school systems decisions.

4. Improve your skills – Learn to communicate with others to become a better advocate for the child. Learn who to call and what questions to ask. Learn to write letters to state your needs and interests and ask for specific supports. Read about issues related to the needs of the child.

5. Participate – Attend conferences, parent meetings, and school functions.

For more information about parent advocacy support and materials, contact Connecticut Parent Advocacy Center, Inc. 800.445.2722 or www.cpacinc.org. Services are free for parents.
Meeting Special Health Needs with Individual Plans of Care

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With the efforts made to accommodate special needs children in child day care, it has been recognized that child day care providers may be required to go beyond the realm of their expertise in early childhood education and development. One tool to assist providers in meeting special health needs is the “Individual Plan of Care.” This plan, required under Department of Public Health regulations, as explained below, helps providers by organizing all the components of their special health care needs and clarifying the tasks and responsibilities of child day care providers. Child day care personnel should review the plan with parents and health consultants, discuss any element of the plan that may be unclear, and implement the plan into the daily activities of the child. Doing this should give everyone involved a great sense of confidence that the child’s needs are being met.

Individual plans of care come in many different forms. The Asthma Action Plan developed by the Department of Public Health is commonly used for managing asthma and can be found on our web site at www.dph.state.ct.us. Some child day care health consultants have developed their own forms that can be individualized to meet the specific needs of a child, and there are published works available, too. An individual plan of care may be as simple as stating that a child will receive speech therapy once a week at a center or as complex as listing action steps as in the case of exposure to a known allergen. There is a great deal of flexibility in developing individual plans but they are required to be created as a collaborative effort between the parent(s) and health care providers and should provide child day care staff with a clear picture of what tasks or accommodations are expected of the child day care center or group day care home in order to provide a child with special health problems the best possible care in an emergency as well as throughout the course of their day-to-day activities.

In April 2004, the Department of Public Health’s Child Day Care program sent out a supplement to Connecticut regulations that addressed changes and additions to regulations for licensed child day care centers and group day care homes. Among other things, the use of automatic injectables (more commonly referred to as Epipens) was addressed and, hopefully, child day care staff members have had the opportunity to review and familiarize themselves with the recent amendments and have incorporated them into practices and policies that affect their child day care centers and group day care homes.

As the Department’s nurse consultant for child day care, I am finding the change requiring individual care plans has been increasingly valuable to anyone involved with a child with special needs including parents, healthcare providers, and child day care providers alike. The regulation can be found on page 4 of 11 of the supplement under Section 19a-79-5a (a) (2) (F) Record keeping. The addition to the existing regulation reads (2) a health record that shall include but not necessarily be limited to: (F) “Information regarding special health problems such as, allergies, special dietary needs, dental problems, hearing or visual impairments, chronic illness, developmental variations, or history of contagious disease, and an individual plan of care for a child with special health care needs, developed with the child’s parent(s) and health care provider and updated, as necessary. Such plan shall include appropriate care of the child in the event of a medical emergency.”

Source: To learn more about NVLD, access the Nonverbal Learning Disorders Association website at www.nlda.org.
Mandatory Requirements for the Inclusion of Children with Disabilities in Child Care Programs

The United States Department of Justice website at http://www.usdoj.gov/crt/ada/adahom1.htm is a good resource for the “why and how” of making your child care programs welcoming for children with disabilities and special needs. The Americans with Disabilities Act (ADA) of 1990 is the legal basis for these requirements. The U.S. Department of Justice provides free ADA materials, which may be ordered by calling the ADA Information Line [800.514.0301 (Voice) or 800.514.0383 (TDD)]. An automated service is available 24 hours a day for recorded information and to order publications.

The Use of Automatic Injectables in Child Day Care Centers and Group Day Care Homes

Connecticut General Statutes, Section 19a-79, required the Department of Public Health to adopt regulations specifying that child day care centers and group day care homes shall not deny services to a child on the basis of a child’s known or suspected allergy or because a child has a prescription for an automatic pre-filled cartridge injector or similar automatic injectable equipment used to treat an allergic reaction. For additional information, contact the CT Child Day Care Licensing HELP DESK at 800.282.6063, 800.439.0437, or 860.509.8045.

Because the brochure includes no state specific information, the Connecticut DSS-Child Care Team is in the process of including local contact information in the brochure. After that, the Child Care Team will distribute the brochure. Distribution plans are set for early spring 2005.

For more information, contact Amparo Garcia by phone or by e-mail at amparo.garcia@po.state.ct.us.

Caregivers Resource Corner

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Community-Based Early Childhood Mental Health Consultation Groups

In response to the growing number of requests for Early Childhood Mental Health Consultation Services from child care program directors, educators, and child care providers, the Early Childhood Consultation Program (ECCP) recently began piloting monthly mental health consultation groups. The consultation groups are designed to offer information on early childhood social and emotional issues and to help facilitate networking among directors, teachers, and providers. To find out if there is a consultation group in your area, or if you are interested in developing one, please feel free to contact Liz Bicio LCSW, the ECCP Manager at Advanced Behavioral Health 860.704.6198.

Resource for Parent Advocacy

Contact the Connecticut Parent Advocacy Center, Inc. www.cpacinc.org."
Question:
I am the mother of three older children and was fortunate to have been able to stay at home when my children were young. I am presently expecting, and the new baby will be born in about three months. Due to changes in our family finances, I have decided that I will need to go back to work once the baby is six months old. It has taken me some time to accept this decision, as I am very concerned about the quality of care my baby will receive outside the home. I have recently contacted various providers. Though most appeared competent and informed, I am still concerned that there may be issues I am unaware of. Is there any way to do a background check on providers? It is important that I feel my child is safe.

Answer:
A safe child care environment is important for each child. Measures have been taken to address this issue, while aiding parent empowerment. The Department of Public Health (DPH), the state licensing agency, requires that all providers in either home or center based settings receive a federal background check and fingerprinting, which is administered locally through the police department. Additionally, DPH also maintains a “Complaint line” through which inquiries can be made as to whether complaints have been filed against individual providers. This is a valuable resource when making your child care decisions.

2-11 Child Care can also provide you with contacts in the Department of Public Health. In addition, specific information regarding other child care resources, professional organizations, educational workshops and trainings, business loans, food program, and medication administration training can be received. Our website at http://www.211infoline.org/ also provides information on quality child care tips. For more information, please contact us at 800.505.1000 or just 2-1-1.

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Please share the newsletter with all staff.