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LECTURES

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resilience**

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'cause parenting is a trip!

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Apple Pie Morning Oatmeal

Hearty and healthy steel-cut oats are cooked with almond milk and served with sweet, caramelized apples.

SERVES 4

1 1/2 cups water

1 1/2 cups almond milk

1 cup steel-cut oats

1/4 teaspoon salt

1 tablespoon butter

2 apples – peeled, cored and sliced into wedges

3 tablespoons brown sugar, divided

1 tablespoon flax or chia seeds (optional)

1 teaspoon vanilla extract

1/4 teaspoon ground cinnamon

Bring water and almond milk to a boil in a medium pot. Stir in oats and salt. Reduce heat to low and simmer, uncovered, for 20 to 25 minutes.

Meanwhile, melt butter in a large skillet over medium heat. Add apple slices and cook, stirring occasionally, for 5 minutes. Stir in 1 tablespoon sugar. Reduce heat to low and cook until apples are soft and caramelized, about 10 minutes.

When oats are creamy and tender, stir in remaining sugar, flax or chia seeds, vanilla and cinnamon. Divide between four bowls, top with caramelized apples and serve immediately.

RECIPE BY JACKIE FREEMAN, PCC CHEF

EACH SERVING: 240cal, 7g fat (2.5g sat), 10mg chol, 220mg sodium, 43g carb, 5g fiber, 13g sugars, 7g protein



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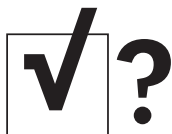
plus: Family Adventure Guide!

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Universal preschool



Are you confused about the competing preschool initiatives on the November ballot?

Learn how to sort through the different perspectives on bringing universal, high-quality preschool to Seattle:

parentmap.com/preschoolplans.

Sick season signs, symptoms and safety

The cold and flu season is already upon us, ushered in by enterovirus D68, a nasty respiratory virus. To minimize exposure to germs, doctors recommend frequent hand washing, staying home sick from school or work when contagious, getting flu shots plus enough rest, and putting family members with asthma on a daily management plan *before* illness strikes. For more information about enterovirus D68, managing germs, and other family health issues, check out parentmap.com/health.



Fall-color fun

We asked the experts — you, our readers! — for the best nature parks, hikes and other flora-and-fauna-filled spots around the Sound to jump in a pile of crackly leaves and get a hit of autumn color. parentmap.com/fall

Extra-special outings

From children's museums with sensory hours and autism-friendly exhibits to new playgrounds with features such as a wheelchair-accessible lookout tower, we round up the best local outings for kids with special needs.

parentmap.com/specialoutings

Win big in our photo contest!

Enter your family's pumpkin patch, fall and Halloween-themed photos in our Harvest & Halloween Photo Contest for the chance to win awesome prizes! Pipsqueak pumpkins, outdoor adventures, awkward family costume photos — we want 'em all! Visit parentmap.com/harvestphotos.

Do you want to be a snowmaaaaaan for Halloween?

Are your kids begging to dress up as Olaf, Elsa, Emmet, R2D2 or other favorite animated characters? Check out our new round-up of ideas for how to pull off the most wanted Halloween costumes of 2014, without breaking the bank or your sanity. parentmap.com/moviecostumes



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dear reader

To advance our village, it takes a village

Every mother and father prays that their child will be born healthy and "normal." Of course we do. Life, when it's rosy on all fronts, is simply challenging enough.

We pride ourselves on getting our pride and joy off to school without any emotional breakdowns (us, not them!). We congratulate ourselves and enjoy immense satisfaction when a healthy dinner is cooked and makes it to a table before the lovelies run off for screen time ... I mean homework.

We get caught up in that false image of Facebook family life perfection. Guilty.

But it's when we're in the thick of challenge and strife and then, somehow, make it to the other side that our humanity and humanness is elevated. Those moments are seldom shared with the public.

If you've been there, then you know what I am talking about. It may sound cliché, but what does not kill us (or break apart our marriages and families) makes us stronger.

No doubt, becoming a parent of a child with special needs — whether it is autism ("Aging up with autism," p.14), ADHD ("Paying attention," p. 48) or any number of other physical or developmental challenges — changes everything. We repeatedly hear from parents of kids with special needs that despite the struggle they are taught magical lessons and feel, ultimately, that they are better people for their experience.

This issue explores the collaborations between parents, grade schools, corporations and colleges to get kids to "interdependence, not complete independence."

Our story "Taking flight: Traveling with a child who has special needs" (p. 23) demonstrates how popular destinations are now adding long-awaited accommodations. Why? Because there is no force greater than parents uniting and advocating for their kids.

Beyond these pages, we are bringing you live and essential parenting guidance this season! If you're the parent of a tween or teen, I urge you to experience the dynamic duo of Marsha Linehan, Ph.D., and Laura Kastner, Ph.D., as they present Teen Extremes: Regulating Moods in the Age of Anxiety on Oct. 27!

And Glee's anti-bullying activist Lauren Potter joins us Nov. 15 for Living a Glee-ful Life: Possibilities and Potential for Families and Young People Growing Up with Special Needs (p. 18).

We hope you'll join us as we kick off our exciting fall event season!



Alana

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Let's create autism-friendly schools

By Laura McKenna, Ph.D.

Public schools are struggling to keep up with the growing number of students with autism. Nationwide, one in 68 individuals is diagnosed with an autistic spectrum disorder. The rate of autism is particularly high in the Northeast and on the West Coast. The recent hike in rates is probably due to increased recognition and professional diagnosis of high-functioning autism.

Kids with severe autism need specialized environments that can only be provided by private schools. But kids with high-functioning autism can and should be folded into the public schools. Keeping these kids in the local schools is good for the autistic kids, for the typical kids and for the bottom line.

Through interactions with typical kids, mildly autistic kids can learn appropriate social skills and expand their pragmatic language skills. Quirky kids can gain more from a natural, normal environment than an isolated, lonely, understimulating one in a special education school. They may even make real friends.

Blending autistic kids into local schools benefits mainstream kids, too. They can see that people come in all shapes and sizes. Autistic kids have unique talents along with their weaknesses. In a world that puts too much emphasis on perfection, these kids show us beauty in imperfection. It's also nice for mainstream kids to have their autistic brothers and sisters in the same school.

Keeping these kids in the local schools saves school districts a great deal of money. Tuition at private schools for autism can cost as much as \$100,000 per child, per year. Small changes in an existing school system can reap huge savings.

Public schools can absorb the new cohort of kids with high-functioning autism. It will take some flexibility and coordination, but it can be done. ■

Laura McKenna, Ph.D., is an academic and a writer who contributes regularly to The Atlantic and Pacific Standard. She is a mom of two awesome boys, one of whom is on the autistic spectrum. She blogs at apt11d.com.

5 easy ideas for making autism-friendly schools

1 ADAPT AFTER-SCHOOL ACTIVITIES

Traditional public schools and local communities offer a huge assortment of activities for typical children. Parents of children on the autistic spectrum often complain that these activities are not appropriate for their children. Many of these activities have high language and attention expectations. Sports are out of the question for most kids with mild autism. Often, teachers and parents run these programs without any training or preparation for dealing with kids with special needs. These activities need some alterations to become accessible for kids on the autistic spectrum.

Autistic kids need activities that are hands-on, rather than social. They need aides to help guide them or make adjustments. Simple modifications, like opening up the computer lab for Minecraft during school dances, can include autistic people into the life of the school. Noncompetitive sports activities can lessen the stress that autistic kids face on a ball field.

2 BRING BACK SHOP CLASS

In the past 20 years, public schools have moved away from the traditional shop class and home economics toward curriculum aimed at improving schools' test scores. We need a return to fun, hands-on special classes, like sewing, cooking, woodworking, technology, art, music and car repair.

Kids with mild autism need these hands-on, nonacademic classes. They would rather do things than hear about them. Home economics and shop class let them tinker and touch, mix and spill. They can overcome their language deficits in classrooms that encourage creativity and building. Some autistic kids may even outshine the typical kids in classes about technology.

3 TEACH WITH TECHNOLOGY

The special-education classroom should have more technology than a typical classroom. Most kids with autism are visual learners. They can learn math and social studies faster when the information is presented on a screen rather

than from a teacher's lecture. Keyboard instruction can help the kids with poor fine motor skills. They enjoy self-directed educational software.

Access to technology also helps autistic kids develop their strengths. Many kids with high-functioning autism have excellent computer skills and will later find work in a technical field. Why not give them a head start?

4 COLLABORATE WITH NEIGHBORS

Traditional public schools usually operate like little islands and rarely interact with schools even a few miles away. This island mentality is a huge barrier to creating autism-friendly schools. To fully serve kids on the spectrum, neighboring districts must work together to pool resources.

Three separate middle school autism classrooms in three nearby towns, each with their own teachers, aides and administrators, can be combined into one classroom in one school. This would mean a huge savings for those three school districts. It would mean greater resources for the kids in the classroom and more opportunities to meet like-minded kids.

5 FORM A PARENT/SCHOOL COMMITTEE

Fostering autism-friendly schools requires a great deal of parental involvement. In many cases, parents of autistic kids know more than school professionals about how to guide their children. After all, they have been in the trenches of autism education for years. They network with parents in other school districts and may have experiences in private schools that can benefit their public school district.

A formal parent/school administration oversight committee can provide the necessary dialogue between parents and administration. This committee can guide PTAs to provide modifications for their children. They can discuss problems and create solutions before tensions lead to litigation. They can steer special-needs families toward appropriate clubs and after-school therapists. They can fundraise to provide special programs for this population.

— Laura McKenna

Cultural competency

Creating true connections for kids

By Hilary Benson

Holy Chea grew up in an area of south Tacoma that was marked by poverty and gang activity. And while there were caring adults in his life, “There was an attitude [around the school environment] of ‘Let’s just get the students through,’” Chea says. After-school programs, while offering safe havens, lacked focus on learning or academics, nor was there an expectation of success in school.

Now, as a program associate for the **Greater Tacoma Community Foundation** (GTCF; gtcf.org), Chea is helping to raise the bar for students like the one he once was, kids from a wide variety of cultural backgrounds and economic circumstances. He is part of a movement in Washington state to transform after-school hours from wasted time to engaging programming. For many existing extracurricular programs, that means learning how to better understand kids’ cultural and community framework in order to connect meaningfully with them.

“When there is staff of color interacting with students [of color], just by physically looking at them, kids can remove that barrier and see staff as role models,” Chea says. “It’s about mentorship, and even respect, where kids will learn, for instance, to shake one another’s hand — things like that that a lot of young men struggle with.”

In 2011, the GTCF partnered with Seattle-based **Raikes Foundation** on a broad project to help organizations in Washington state implement new standards for after-school programs. Called the **Youth Program Quality Initiative** (YPQI), the effort offers training and support for organizations that serve students outside of school hours.

The voluntary standards are divided into nine domains, one of which is “cultural competency and responsiveness.” In programs that are strong in this area, students are encouraged to express their own cultural identity, and administrators hire and develop qualified staff that reflects the diversity and culture(s) of the community being served. One goal is “to get programs to want to meet these

standards, aiming high to meet the bar of quality and sustaining it,” says David Bowermaster, a spokesperson for Raikes.

The effects spill over far beyond after-school hours.

Research by the Afterschool Alliance shows that students who regularly attend high-quality after-school programs are less likely to be involved in teacher-reported misconduct and use drugs and alcohol.

Safe Streets, one of the GTCF’s partner organizations in implementing quality initiatives, turned around the life of a young man named Justin Huey.



On a recent visit to his former school, Washington High School in the Franklin Pierce school district, to talk with this reporter, Huey sat outside the imposing building and spoke of how he nearly didn’t make it out of his junior year.

“I was struggling. I felt like I didn’t have a voice.” With a lot of negative behaviors and choices going on around him, the now 21-year-old

says he did not see much of a future for himself. His after-school time was spent hanging out at friends’ houses, at risk of playing into cultural stereotypes and a self-fulfilling prophecy.

But as it turns out, **Safe Streets’ Youth Leading Change** program, which he began attending two afternoons each week, elevated Huey, drawing out leadership qualities that also positively influenced others at his school.

“This was a breath of fresh air, when you’re told, ‘We see you being a leader at your school,’” Huey says. “I found a group of friends that are actual friends, and I realized how much I was missing from my other so-called ‘friends,’ who were going a different direction.”

Now a student at Tacoma Community College, Huey also works as a Starbucks barista, a job that he hopes to parlay into a bachelor’s degree from Arizona State University.



The YMCA of Greater Seattle’s Aaron Norikane oversees five after-school programs at the elementary school level. With younger students, Norikane says, the role modeling and trust with staffers is no less important than with older kids.

“Kids sometimes download if they’ve had a bad day. The staff may problem solve or tackle the issue as a group,” Norikane says. And that is where good after-school programs, whose staffs are trained to be sensitive to kids’ challenges and respond productively to them, can also boost the student’s attitude and performance in the classroom.

Anyone who works with teenagers knows force is not often the best course of action.

Safe Streets’ Hector Farias says that before his group adopted the YPQI during the 2011–2012 school year, “We didn’t understand why we didn’t have big numbers of kids attending our program. But what we learned is that we hadn’t been approaching them in a way where they felt like they belonged.”

“Before [the program went through this process], there was a sense of telling [the kids] what to do, that there was only one way. Now there are two ways, us and them, and actually it’s more them since they are the ones taking the lead, making the changes in their schools,” Farias says.

Now, “I feel great because kids come to our program because they want to come.” ■

Hilary Benson is a veteran award-winning journalist and mother of three active children. She and her family live in the Seattle area.

Editor’s note: In this series, we explore how new voluntary standards developed in Washington state are impacting the quality of after-school programs that serve about 134,000 youths. We explain what parents should seek in a program, look at research on the impact of quality care on kids’ development and academics, and visit with programs and kids. After-School Special’s independently reported content is funded by a journalism grant in partnership with the Raikes Foundation and School’s Out Washington.



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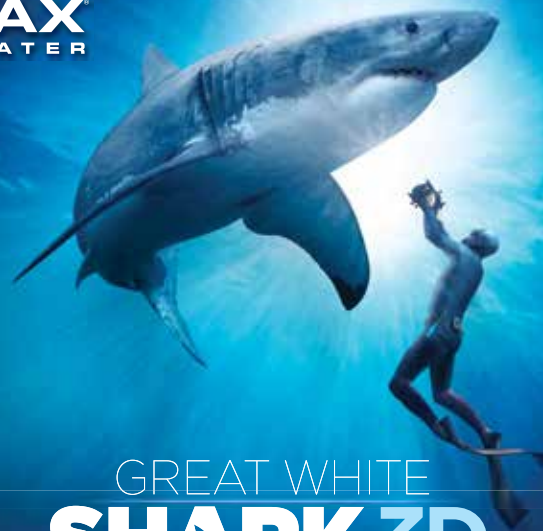
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Aging up with autism

Navigating the transition from childhood to beyond

BY MALIA JACOBSON

At first glance, Alex Brenner looks like any other University of Washington student, sharing a crowded Seattle apartment with a roommate and using a smartphone to stay organized as he juggles homework, exercise and socializing. Alex isn't a typical student, though. Diagnosed with Asperger's syndrome as a young teen, he finished high school with severe academic deficits and an uncertain future.

Alex is now on track to graduate in 2015 with a bachelor's degree in geography, but it hasn't been an easy road. He's part of an unprecedented boom

of teens and young adults with autism spectrum disorders (ASDs) navigating, or preparing to navigate, the world beyond high school.

Rising tide

According to a 2014 Centers for Disease Control and Prevention report, one in 68 8-year-olds has been identified as having an autism spectrum disorder, a 30 percent increase over 2012 estimates. But this uptick is nothing compared to the surge seen two decades ago. Between 1993 and 2003, the number of new autism diagnoses ballooned 500 percent.

Although Alex was diagnosed at the tail end of this bubble, at 14, the symptoms of autism — avoidance of eye contact, social ineptitude, inflexibility, preoccupation with repetition — often appear as young as age 2, and autism is commonly diagnosed around age 4. That means that the kids diagnosed in the wave of the 1990s are now washing up on the shore of young adulthood, or, like Alex, are already there. Approximately 50,000 youths with autism turn 18 each year, according to the A.J. Drexel Autism Institute.

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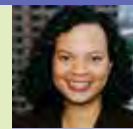
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The world is scrambling to keep up with the needs of this swelling population, but it may not be changing fast enough, says Benjamin Wahl, MSW, program director for Seattle-based Ryther's Aspiring Youth Program, a 9-year-old initiative offering social skills and leadership development for spectrum youths ages 8–18.

Many kids were left without programming during the critical stage that follows high school. “We saw our 8- to 18-year-olds having success, then kind of dropping off after graduation,” Wahl says. So five years ago, the Delphi Young Adult Program was created to offer transition support for spectrum individuals ages 18–28.

“Half of spectrum individuals have zero structured activities in the two years post high school. There’s a steep decline in support,” Wahl says.

Case in point: Many people don’t realize that most students’ IEPs (individualized education program, a plan created for special-education students) end when high school does, says Jenni Sandler, M.Ed., director of access services for Highline Community College’s Achieve program. Designed to help a student succeed in K–12 schooling, an IEP pulls together an array of specialized services, from speech therapy to occupational therapy to support for regular classwork.

The IEP exists to ensure adequate assistance through high school, and it does that, says Julie Jine, Achieve’s educational services coordinator.

But once students have that hard-won diploma in hand, they’re on their own.

Support services, once assembled for each individual student by a team of professionals, must be coordinated piecemeal by shell-shocked parents accustomed to person-based support.

When it comes to support for autism and other developmental differences, “the K–12 system is not adequately preparing these students for college,” Jine says.

Legislators see the need for more support. To address these issues, a statewide Disability Task Force was created by Senate Bill 5180 (sponsored by Sen. Paull Shin, D-Edmonds, in 2013). And while the state does provide a plan for transition, because the K–12 and higher-ed systems are largely independent, parents have to engineer and direct the process independently. And because each diagnosis of autism is unique, there isn’t a set course that any parent can follow.

The Achieve program coordinates resources and transition planning on a local level for students, Jine says. “Too many students are falling through the cracks.”

Often, “falling through the cracks” translates to newly minted high school graduates with ASDs spending years sitting on the couch, playing video games or surfing the Internet without a road map for the future. Parents, on the other hand, are suddenly thrust into the role of full-time schedule engineer or chauffeur for a nearly grown child while they try to balance competing demands — their own career, other children and aging parents.

Social savvy

While many students with spectrum disorders, particularly Asperger’s, don’t have an intellectual disability, they experience unique social challenges that make college life difficult. (In 2013, the American Psychiatric Association removed the diagnosis of Asperger’s syndrome from the *Diagnostic and Statistical Manual of Mental Disorders*; it is now recognized as a form of high-functioning autism. But many so-called “Aspies” continue to identify with the term.)

Classic ASD symptoms, such as avoidance of eye contact, difficulty reading social cues and inflexibility, make it hard to socially navigate the young adult’s world, Wahl says. And the executive function deficits familiar to many ASD students render making and carrying out social plans extremely challenging, if not impossible.

Navigating a conversation is daunting for someone who can’t read cues such as facial expression, body language and vocal inflection. Add in the complexities of socializing and dating in the hyperconnected world of social media and it’s a formidable challenge.

“It’s a myth that those with ASDs are antisocial. They want to socialize, but they need to actively learn the skills they’ll need,” Wahl says.

Compounding the challenge: As many as 65 percent of people with ASD have a coexisting mental health problem, such as depression or anxiety. These issues commonly surface during the teen and young adult years and can feed the crippling loneliness and isolation, Wahl says. >>



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feature

Aging up with autism

continued from page 15

Young adults with ASDs find social connection online — interacting on a message board may be easier than navigating face-to-face conversation — but struggle with finding the same connection locally, says Lisa Iland Hilbert, M.S., founder of Social Bridge Seattle, a social skills and life coaching service for teens and adults with spectrum disorders or other developmental differences.

College core

Academically speaking, a college education is a realistic goal for many students with ASDs; many can

intellectually handle the material just fine, Wahl says. But students with ASDs who thrive on predictability and routine can struggle with the ever-changing slate of professors, shifting class formats and discussion-based classes.

All college campuses have a disability resource center and allow accommodations for students with learning disabilities, including quiet study spots and extra time to complete exams. But colleges are just beginning to grapple with the needs of a growing ASD student population, says Sara Gardner,

program manager for Bellevue College's 4-year-old Autism Spectrum Navigators program.

Like Ryther's Delphi program, Autism Spectrum Navigators arose to meet a burgeoning need. "We saw that students with spectrum disorders had this roller coaster experience in college," she says. "They would enroll, maybe do well for a while, then fail and withdraw. We wanted to see if providing some extra support could smooth out that roller coaster."

It did. During the program's pilot year, students in the test group had access to "translators," support personnel who replicated some of the person-based support provided through a K-12 IEP. Students in the test group completed 85 percent of classes they attempted with an overall

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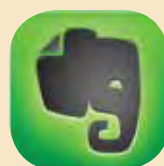
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"It was clear that we needed to keep providing these types of supports to students," Gardner says.

Work woes

For most, a good job is the endgame for college, and employment is a precursor to any type of independence. Youths and young adults with ASD can thrive in the working world but often struggle to first get a foot in the door, says Seattle-based Patty Pacelli, author of *Six-Word Lessons for Autism Friendly Workplaces* (2014) and mom to a grown autistic son.

One of the biggest challenges is interviewing, she says. "Most individuals on the spectrum simply don't interview well, because they find it more difficult to quickly form responses to verbal questions and thus don't communicate very well about their skills and suitability for the job."

On the job, young adults with ASD may struggle to understand "work culture" and fit in. Work chitchat, jargon and small talk don't come naturally. It's also difficult to deal with physical and sensory issues at work, such as noise and bright lighting, Pacelli says.

These challenges don't mean that young adults with ASDs should opt for a life on mom and dad's couch, though. "Parents should know that there are agencies that work with companies to help place adults with autism in good jobs (such as Seattle's Mainstay employment services), and there are job coaches and other consultants who can help train and

prepare them for interviewing and what to expect on the job," Pacelli says.

Under the ADA, individuals with ASDs have a right to certain accommodations, even having a job coach at work, Pacelli says. And a growing number of companies, including Walgreens, Lowe's, Microsoft and SAP, are seeking candidates with autism.

That's because individuals with autism bring unique, often desirable traits to the workplace, including passion, integrity and intense focus.

Less is more

Parents of kids with autism should start thinking about transition as soon as they get a spectrum diagnosis, even in early childhood, Sandler says.

Planning for independence from day one runs counter to most parents' thinking, Jine admits. As soon as parents get a diagnosis for their young child, they want as much support as they can get: a dedicated aide at school and maybe at home, extra help with schoolwork, and accommodations for tests and assignments — the works.

She proposes the opposite: Instead, use the least amount of support possible. Providing students with the support they need to succeed, and no more, builds skills they'll desperately need later on, skills such as time management, self-advocacy and self-care. (Because coverage on parents' insurance plans ends at age 26, most young adults with ASDs will need to learn to manage at least some of their own medical care, calling on organizational and communication skills that can take years, if not decades, to master.)

Valerie Brenner, mom to Alex, agrees. By the time a student with

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feature

Aging up with autism

continued from page 17

ASD reaches high school, it's time to start “weaning off” some of those strong supports in place, including full-time behavioral aides, she says. Students should start learning to self-manage school deadlines, planning enough time to complete schoolwork and learning how to ask for help if needed.

That means some assignments will get turned in late. That's OK, Sandler says. “Allowing for safe failures allows for growth.”

Valerie carried this concept through to Alex's home life, too. As a way to prepare him for college living, she turned his home bedroom into an apartment of sorts, complete with a “mailbox” outside the door, a fridge and a personal calendar. After high school, she had Alex start handling his own mail, laundry, meal planning and schedule.

This approach forced Alex to learn

skills he still uses: To this day, he keeps track of his daily schedule and assignments on a large white-board calendar in his apartment.

That doesn't mean Valerie isn't in the picture. “We're always there in his life. After college, he may need to move back home while he looks for a job. We'll face another transition soon. We don't know what the next thing is.”

For young adults on the spectrum, it's about interdependence, not complete independence, Gardner says. “We want parents to understand that their young adult may always depend on them for certain things, but that everyone has strengths they can bring to work and life. We help students learn to build on those strengths.” ■

Malia Jacobson is an award-winning health and parenting journalist based in Tacoma. Her adult sister was diagnosed with Asperger's syndrome as a toddler.

resources

Division of Vocational Rehabilitation

dshs.wa.gov/dvr

Ryther's Aspiring Youth Program

ryther.org/aspiring-youth

Autism Spectrum Navigators, Bellevue College

bellevuecollege.edu/autismspectrumnavigators

Achieve, Highline Community College

achieve.highline.edu

PAVE

wapave.org

The Center on Secondary Education for Students with Autism Spectrum Disorders (CSESA)

csesa.fpg.unc.edu/resources

Mainstay

mainstay.org

Autism Speaks Transition Tool Kit

autismspeaks.org/family-services/tool-kits/transition-tool-kit

Center for Change in Transition Services

seattleu.edu/ccts

Thrive Housing

thrivehousing.com

Social Bridge Seattle

socialbridgeseattle.com

Seattle Children's Alyssa Burnett Adult Life Center

seattlechildrens.org/contact/alyssa-burnett-adult-life-center

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GRANDPA IN SPACE. Space is fascinating as it is, but throw an endearing grandpa in a rocket up there, and you've got an app that will keep kids coming back for more. Pick a planet, build your own rocket ship, and blast off into learning. Recommended for ages 6-8; on iPhone/iPad.



TOCA LAB. Kids can experiment on over 100 "elements" with heat, ice and more to create something new to examine in the lab. While the game isn't scientifically accurate, it does encourage experimentation and discovery. Recommended for ages 6-8; on iPhone/iPad and Android.



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The following weekend brings the annual Kelsey Creek Farm Fair, where kids can choose and decorate their very own pumpkin. Tons of entertainment, tractor-pulled wagon rides, and more await you on Saturday, October 11 from 11am-4pm! No entrance fee, but cost varies by activity. No pets, please. Call 425-452-7688 for info.

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TAKING FLIGHT

Traveling with a child who has special needs

BY LAUREN BRADEN

When you have a child with special needs, the prospect of planning a real family vacation can be so overwhelming, it seems easier and more relaxing to just stay close to home. But in spite of the formidable challenges, the benefits of expanding your family's perspective through travel and creating memories together are often worth it.

Two years ago, when my son, Isaac, was diagnosed with autism at age 3, I had to make a choice as his mother and a travel writer: Find new ways to meet his special needs on family trips, or find a new occupation that would allow us to stay home in our comfort zone. We take fewer getaways these days, and our trips require much more effort to plan, but every time Isaac spots a dragonfly on a trail or feels sand between his toes at the beach, I am reminded of how much travel enriches his life.

The "special needs" label spans a range of issues in children, from

autism or hearing impairment to those who have physical disabilities and depend on wheelchairs for mobility. All children are different; therefore, each family's challenges when traveling will be unique. If your kid is autistic with sensory issues, a scenic road trip may trump crowded airplanes and theme parks. A child who depends on a wheelchair would have little to do at a Wyoming dude ranch, but he may love the wide boardwalk trail through a field of geysers at nearby Yellowstone National Park.

As daunting as planning a family vacation appears, take heart in the positive trends emerging. Popular destinations such as theme parks, museums and even beach resorts are adding accommodations, from better wheelchair accessibility to sensory hours to allergy-friendly restaurants. Planning special-needs family travel is not simple, but it's getting easier all the time.

continued on page 31

October PICKS



Tools to Help Teens: ParentMap Fall Lectures

Our three October lectures bring you real tools to help you help your kids. **Rob Evans, Ed.D.**, offers strategies for **fostering resilience and other key traits** that will aid your child in life, in Kirkland (Oct. 14) and Tacoma (Oct. 15). **Marsha Linehan, Ph.D.**, and **Laura Kastner, Ph.D.**, shed light on helping teens and tweens manage intense emotions and build mindfulness, in Seattle (Oct. 27). \$15-\$25. parentmap.com/lectures



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Toddler Time at the Aquarium. Marine science activities engage little minds at this drop-in program. Select Mondays and Tuesdays, 9:30 a.m.-noon. Included with admission. Ages 0-5 with caregiver. Seattle Aquarium. seattleaquarium.org

7

Do You Know Bruce? Visit Wing Luke Museum to learn more about Bruce Lee, Seattle icon and martial arts legend. Open Tuesday-Sunday from Oct. 4. Included with admission. Seattle. wingluke.org
Top Ten Toys Story Hour. As if you need another reason to visit the fantastic TTT, bring the tots for Tuesday story time; two sessions available. 11 a.m. and 1 p.m. Tuesdays. **FREE**. All ages. Top Ten Toys, Seattle. toptentoy.com **ONGOING EVENT**

12

Seattle Children's Festival. Northwest Folklife's new multicultural family fest showcases performance and activities from Brazilian capoeira to breakdancing to cooking. 11 a.m.-6 p.m. **FREE**. All ages. Seattle Center, Seattle. nwfolklife.org
GeekGirlCon. This female-friendly geek/science fest is designed to inspire and entertain, from a panel on women in science to games galore. Saturday-Sunday, Oct. 11-12. \$10-\$30; ages 5 and under free. Washington State Convention Center, Seattle. geekgirlcon.com

13

Cedar River Salmon Journey. View salmon on their spawning journey daily through Oct., and learn from naturalists on Saturdays and Sundays, Oct. 4-26. **FREE**. Jones Park, Cedar River Park, Cavanaugh Pond Natural Area, Renton, and Landsburg Park, Ravensdale. cedarriver.org
Play to Learn. Gather for play, stories and learning time together. 1:30-3 p.m. Mondays. **FREE**. Ages 0-6 with caregiver. Pierce County Library System, South Hill Branch. piercecountylibrary.org **ONGOING EVENT**

14

Raising Resilience: How to Build Character, Confidence and Grit. Rob Evans, Ed.D. offers strategies for parents to help kids develop key qualities of resilience, perseverance and optimism. 7 p.m. \$15-\$20. Adults. Kirkland Performance Center, Kirkland, on Oct. 14 and Annie Wright Schools, Tacoma, on Oct. 15. parentmap.com/lectures

19

Camp Korey Fall Festival. Hay rides, pick-your-pumpkin, animals and s'mores. 10 a.m.-4 p.m., Friday-Sunday, Oct. 17-19. **FREE**; some activities have fee. All ages. Carnation Farm, Carnation. campkorey.org
The Haunted Theatre: Backstage Tour & Eerie Dances. Come in costume for this spooky but kid-friendly haunted tour, followed by Halloween-themed ballets. Friday-Sunday, Oct. 18-26. \$5-\$6. All ages. Tacoma City Ballet at The Merlino Art Center, Tacoma. tacomacityballet.com

20

Lil' Diggers Playtime. A sandbox bigger than your whole backyard with lots of toys and wi-fi for grown-ups. Monday, Wednesday, Thursday, 9:30-11 a.m. or 11:30 a.m.-1 p.m. \$7. Ages 5 and under. Sandbox Sports, Seattle. sandboxsports.net **ONGOING EVENT**
Dr. Maze's Farm. Visit the farmyard and wend your way through the sunflower-cornfield maze; pumpkins for purchase and \$2 hayrides on weekends. Daily through Oct. 31. \$6-\$9. All ages. Dr. Maze's Farm, Redmond. drmaze'sfarm.com

21

PEPS Lecture: You Really Are Your Child's First Teacher! I-LABS researchers share latest insights on early relationships and how they lead to learning. 7 p.m. \$15 or pay-what-you-can. Caregivers of ages 0-5. Verity Credit Union, Seattle. peps.org
Disney's Beauty and the Beast. Spectacular sets, lavish music and a story every little princess will love. Oct. 21-26. \$25 and up. Ages 5 and up. Paramount Theatre, Seattle. stgpresents.com

26

Sunday Untuxed: Baroque. This affordable, family-oriented series of one-hour concerts takes listeners through 300 years of musical history, starting with the Baroque era. 2 p.m. \$17 and up. Benaroya Hall, Seattle. seattlesymphony.org
The Great Pumpkin Glow. Get your free pumpkin and carve a face to have it lit for a (friendly) Harvest Witch's story telling. 4-7:30 p.m. **FREE**; additional activities \$8. All ages. Craven Farm, Snohomish. cravenfarm.com

27

Teen Extremes: Regulating Moods in the Age of Anxiety. Marsha Linehan, Ph.D. and Laura Kastner, Ph.D. share tools to help teens learn manage overwhelming emotions, stay mindful and maintain relationships. 7 p.m. \$25. Adults. Town Hall, Seattle. parentmap.com/lectures
Baby Jam. A multi-lingual, drop-in musical exploration. Mondays, Wednesdays, Fridays 11-11:30 a.m. \$10-\$12. Ages 0-5 with caregiver. Balance Studio, Seattle. babyjam.org **ONGOING EVENT**

28

Hallo-wee! Story Time. Preschoolers are invited to wear their costumes for not-so-scary stories, songs and rhymes. 11-11:45 a.m. **FREE**. Ages 3-6 with families. King County Library System, Shoreline Branch. kcls.org
Conservatory Pumpkin Patch. Decorated pumpkins and lovely flowers make for a super seasonal photo backdrop. 10 a.m.-4:30 p.m., Tuesday-Sunday, Oct. 14-31. \$3; ages 11 and under free. W.W. Seymour Conservatory, Tacoma. seymourconservatory.org

Good Growing

A Seattle Children's Publication | **Fall 2014**

Parents Can Help Kids Find the Right Balance

We all strive for balance in our lives. It's an ongoing, sometimes tricky challenge to balance work with play, and being busy with down-time. Kids must learn to balance school, homework, sports, lessons, time with friends, family activities and free time — plus, of course, enough sleep each night! Parents can help kids discover and maintain the right mix to keep their minds and bodies healthy and happy.

Some kids are by nature happiest when they are busy. They seek out new activities, and may even push their parents to let them take on more. This is usually okay as long as the child is happy and well-rested — and not anxious or struggling with homework or grades. If a child seems over-scheduled, then parents can step in and help them decide if



they need to drop an activity, or simply get better organized to make it all work.

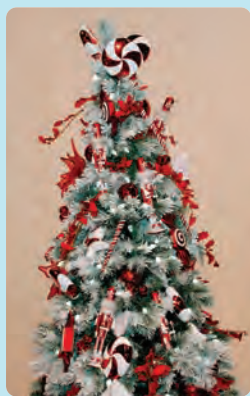
Other kids seem to crave lots of down-time, or would rather make their own fun rather than having it provided for them. For example, some love nothing better than to read all the time, and others will happily build with Lego for hours on end. These kids may need a little push or structure to get enough physical exercise; parents can help them find a sport or activity they really enjoy. And keep in mind that no child should have more than two hours of recreational screen time a day.

Leading a balanced life means making thoughtful choices each day. We can model this decision-making to our kids from a young age. For example: "I need to pay some bills and organize this paperwork, and I know you have homework. Let's set a timer for 60 minutes for our work, then we can take the dog for a walk." Or: "You had a long day at school and a tough soccer practice. Would you like to take a shower and then we can snuggle on the couch and I'll read to you?"

Show your kids that family time is a priority. If you are often going in opposite directions, make a point to come together for regular dinners, game nights or movie nights. At any age, family is one of the biggest keys for a balanced life!

TO LEARN MORE:

Visit www.seattlechildrens.org/goodgrowing.



37th Annual Festival of Trees

Sunday, Nov. 23, 2 to 5 p.m.
The Fairmont Olympic Hotel
411 University Street, Seattle

Mark the beginning of the holiday season by viewing a display of 21 designer Christmas trees. Each tree is dedicated to a courageous Seattle Children's Hospital patient and is available

for pre-purchase or bid.

Guests enjoy cookies, cocoa, live musical entertainment, a holiday boutique and pictures with Santa.

TO LEARN MORE:

For more information and to view and bid on the trees, please visit www.seattlefestivaloftrees.com.



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High-Chair Injuries Are on the Rise

Every hour in the U.S., a child visits an emergency room for a high-chair related injury. A new study shows that in two out of three cases, children are climbing on the chair or standing on its seat before the injury. Don't allow climbing on a high chair for any reason, and always fasten the straps snugly. (The tray alone will not keep a child in place.) Be sure your high chair has a 3-point or 5-point

harness that includes a crotch strap or a post. And check for product recalls: millions of unsafe high chairs have been recalled in recent years. Be sure the chair is placed completely out of reach of any items that might cause harm.

TO LEARN MORE:

Visit www.seattlechildrens.org/pdf/CE133.pdf for a Safety Checklist for Home.



Hop Aboard Walking School Buses and Bike Trains



Have you heard about two fun ways kids are 'commuting' to and from school, on foot or by bicycle? Walking school buses and bike trains are catching on. Kids follow a set route to school, and 'pick up' walkers or riders along the way. They reverse the route after school, 'dropping' kids back at home. Parents or other responsible adults lead the groups to ensure safety. Last year, Seattle Children's researchers studied these programs in six Seattle schools that enroll large numbers of low-income students, in an effort to extend these programs to underserved communities and help all students be physically

active. These programs also allow kids to socialize while parents get to know each other — thus building strong neighborhoods. As a 'zero-carbon footprint' commute, they benefit the environment, too. Elementary students in West Seattle recently had a special guest join their walking school bus: Governor Jay Inslee, who is a fan of the program. Ready to hop on board? There are helpful resources for parents interested in starting a program in their neighborhood.

TO LEARN MORE:

Visit www.seattlechildrens.org/goodgrowing.

Speak Up About Immunizations: Ask, Share and Encourage

So far this year in Washington state there have already been 27 reported measles cases — more cases than *in the past five years combined*. Recent disease outbreaks here and across the nation are raising questions and spurring discussions. What's happening with immunization rates, and how does this affect the safety of our children? Here in Washington, only 65% of children are fully vaccinated by age 3; the goal for our state and the entire nation is 80%. For some diseases — including potentially deadly ones like pertussis (whooping cough) and measles — at least nine out of ten of us must have immunity to keep the disease from spreading. This is known as community immunity. Although measles was eliminated in the U.S. 14 years ago, the increase in world



travel has brought the disease back here, where it spreads when it reaches populations without community immunity.

So what can parents do? First, immunize your child on time. If you have any questions or concerns, talk with your child's doctor.

Second, make sure your child's caregivers are immunized. Ask your child care, preschool or school about their immunization rates. Doing so raises this as an important community issue, and adds to a conversation that can promote health and wellness for all. (Find immunization rates for kindergartners in Washington state at www.schooldigger.com/waimmunization.) Finally, speak up. Let others know that your child is fully immunized. Make sure your family, friends and neighbors understand the risks of not immunizing, and the crucial importance of community immunity for everyone's health and safety.

TO LEARN MORE:

Visit www.seattlechildrens.org/goodgrowing.

Kid Bits



Sudden School Phobia

Sometimes, a child may suddenly want to avoid school. It can happen at the start of a new school year or mid-year. Their phobia may be caused by being away from you, a fear of failure, test anxiety, playground anxiety, a 'mean' teacher, or worries about using the school bathroom. Or a child may feel there's a threat from bullies, whether emotional or physical. A school phobia can trigger symptoms such as headaches or stomachaches — which disappear after school and on weekends. Be caring but very firm about attending school. Problem-solve together with your child or teen, and talk with their teacher. You may also want to have your child's doctor rule out any physical causes.

TO LEARN MORE:

Visit www.seattlechildrens.org/school-phobia.



Health Insurance: What to Look For

Are you due to sign up for health insurance, or to re-enroll? While insurance is now more available, it can be pretty tricky to understand the choices. Be sure to compare the plans offered, and check the following: *What is our monthly premium? What is our deductible? What services are covered? What will we pay out-of-pocket for?* Here's another big question: *Which providers can my family see with this plan?* Be sure you know what's offered for your child's care: *Does this plan cover specialized pediatric medical care?* Talk with a plan representative if you have questions. Ask about providers by name, to be sure you can get expert care you trust.

TO LEARN MORE:

Visit www.enrollwithcare.org.



Aim for 0 Sugar-Sweetened Drinks

Improve your family's health with this easy formula: 7-5-2-1-0. Eat breakfast 7 days a week. Have 5 servings of fruits and vegetables every day. Limit screen time to 2 hours maximum every day. Be physically active at least 1 hour a day. And aim for 0 sugar-sweetened drinks. If you're on drink duty for soccer practice, skip the sports drinks and bring water instead — it's the original and best thirst-quencher. You can add slices of lemon or orange for a fresh flavor. Go easy on juice. A little is OK when it's 100% juice, but it still contains natural sugar and extra calories. Preschoolers should have only 4 to 6 ounces of juice a day. Water and low-fat milk are best!

TO LEARN MORE:

Visit www.seattlechildrens.org/obesity.

Quick Tip

Working smoke alarms save lives. Test yours every month!

Regional Clinics

Find us near you at one of our clinics:

- Bellevue
- Tri-Cities
- Everett
- Wenatchee
- Federal Way
- Odessa Brown
- Mill Creek
- Children's Clinic
- Olympia

Main Hospital Numbers

206-987-2000
866-987-2000 (Toll-free)

Online Resources

Visit www.seattlechildrens.org for the following:

- Child Health Advice
- my Good Growing e-mail newsletter
- Doctor Finder
- Seattle Mama Doc, Teenology 101 and Autism blogs
- Medical condition information
- Safety & wellness information
- Ways to help Seattle Children's
- Research Institute



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www.youtube.com/seattlechildrens

Heather Cooper is the Editor of Good Growing which is produced four times a year by the Marketing Communications Department of Seattle Children's. You can find *Good Growing* in the January, April, July and October issues of *ParentMap* and on our website www.seattlechildrens.org. For permission to reprint articles for non-commercial purposes or to receive *Good Growing* in an alternate format, call 206-987-5323. The inclusion of any resource or website does not imply endorsement. Your child's needs are unique. Before you act or rely upon information, please talk with your child's healthcare provider. © 2014 Seattle Children's, Seattle, Washington.



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Classes and Events

To register or view more information, please visit www.seattlechildrens.org/classes. A phone number is provided for those without Internet access. No one will be denied admission if unable to pay the full amount. If you need an interpreter, please let staff know when you register, and one will be provided. These classes are popular and often fill up several months in advance, so register early.

Parenting Classes

Autism 101

WHEN: Thursday, Oct. 23, 7 to 8:30 p.m.
FEE: Free
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle
CALL: 206-987-8080

For parents and caregivers of children recently diagnosed with autism spectrum disorder who wish to better understand this disorder. The class is also available through Children's video and teleconferencing outreach program in various locations throughout Washington and Alaska.

Autism 200 Series

FEE: Free
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle
CALL: 206-987-8080

For parents and caregivers of children with autism who wish to better understand this disorder. These classes are also available through Children's video and teleconferencing outreach program in various locations throughout Washington, Alaska, Oregon and Montana.

Autism 210: You're Not Alone — Preventing Family Isolation
WHEN: Thursday, Oct. 16, 7 to 8:30 p.m.

Autism 211: We Have a Voice — A Panel of Individuals with ASD
WHEN: Thursday, Nov. 20, 7 to 8:30 p.m.

Babysafe

WHEN: Saturday, Dec. 13, 9:30 a.m. to 1:30 p.m.
FEE: \$50 per family
WHERE: Seattle Children's admin building,
6901 Sand Point Way NE, Seattle
CALL: 206-789-2306

For new and expectant parents and infant caregivers. Topics include infant development, baby safety, injury prevention and treatment. Infant CPR is demonstrated and practiced.

Child and Infant First Aid, CPR and AED

WHEN: Sunday, Oct. 12, 9 a.m. to 2:30 p.m.
FEE: \$60
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle
CALL: 206-987-9878

For parents and caregivers. Topics include how to treat bleeding, sprains, broken bones, shock and other first-aid emergencies. Also includes infant and child CPR and AED use.

Preteen and Teen Classes

Better Babysitters

3
locations

WHEN: Sunday, Oct. 26,
9 a.m. to 2 p.m.
WHERE: Seattle Children's admin. building,
6901 Sand Point Way NE, Seattle

WHEN: Sunday, Nov. 9, 9 a.m. to 2 p.m.
WHERE: Overlake Medical Center,
1035 116th Ave. NE, Bellevue

WHEN: Saturday, Dec. 6, 9 a.m. to 2 p.m.
WHERE: Pavilion for Women & Children,
900 Pacific Ave., Everett

View more dates online
FEE: \$40 per person
CALL: 206-987-9879 for all locations.

For youths, ages 11 to 14. Topics for responsible babysitting include basic child development, infant care and safety, handling emergencies, age-appropriate toys, business hints and parent expectations.

CPR and First Aid for Babysitters

WHEN: Sunday, Oct. 19, 9 a.m. to 2:30 p.m.
FEE: \$60 per person
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle
CALL: 206-987-9878

For youths, ages 11 to 15. Topics include pediatric CPR, treatment for choking, and first-aid skills. Students receive 2-year American Heart Association completion card.

For Boys Only: The Joys and Challenges of Growing Up

2
locations

WHEN: Wednesdays, Nov. 5 & 12,
6:30 to 8:30 p.m.
WHERE: Overlake Medical Center,
1035 116th Ave. NE, Bellevue

WHEN: Mondays, Nov. 10 & 17, 6:30 to 8:30 p.m.
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle

View more dates online
FEE: \$70 per parent/son pair; \$20 per extra child
CALL: 206-789-2306

Two-part series for parents, guardians and sons ages 10 to 12. Focuses on what each can expect as boys begin adolescence. Class covers body changes during puberty, popular myths about growing up, behavior and attitude changes, girls and how to communicate about the experience of adolescence.

For Girls Only: A Heart-to-Heart Talk on Growing Up

2
locations

WHEN: Mondays, Nov. 3 & 10,
6:30 to 8:30 p.m.
WHERE: Overlake Medical Center,
1035 116th Ave. NE, Bellevue

WHEN: Thursdays, Nov. 6 & 13, 6:30 to 8:30 p.m.
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle

View more dates online
FEE: \$70 per parent/daughter pair;
\$20 per extra child
CALL: 206-789-2306

Two-part series for parents, guardians and daughters ages 10 to 12. Focuses on the physical changes of puberty and menstruation, what girls need to know about boys, social issues and sexuality. The sessions use lectures, videos, group activities and humor to emphasize family values and communication.

Events

Car Seat Check

WHEN: Saturday, Oct. 18, 10 a.m. to 1 p.m.
FEE: Free
WHERE: Seattle Children's main campus,
4800 Sand Point Way NE, Seattle
CALL: 206-987-5999

Come learn how to safely secure your child in the car. Child passenger safety experts will check your child in a car seat, booster seat or seat belt and answer any questions you may have. First come, first served. No appointments needed.

Ski Helmet Fitting and Giveaway

WHEN: Saturday, Dec. 6, 10:30 a.m. to 12:30 p.m.
(view more dates online)
FEE: Free
WHERE: Seattle Children's admin building,
6901 Sand Point Way NE, Seattle
CALL: 206-987-1569

Come get your child properly fit for a new ski helmet. Kids must be 4 to 18 and present to receive a helmet. First come, first served. No appointments needed. Learn more at www.MakeSureTheHelmetFits.org.



Seattle Children's
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WEDNESDAY

1

Little Bookworms Story Time. Stop by for stories, songs and a special treat. 11 a.m.–noon Wednesdays. **FREE.** Ages 0–5 with caregiver. The Shops at the Bravern, Bellevue. thebravern.com **ONGOING EVENT**

In the Heights. An unexpected event shakes up the community of Washington Heights in Manhattan in this song-and-dance spectacular. Wednesday–Sunday through Oct. 26. \$35–\$67. Ages 12 and up. Village Theatre, Issaquah. villagetheatre.org

8

Walk/Bike to School Day. Take a step towards healthier living by joining communities from more than 40 countries to walk or bike to school. See walkbiketoschool.org; it's also International Walk to School Month; join an IWALK event at feetfirst.org.

Student Wednesday at BAM. The museum invites students to visit its collections every second Wednesday of the month. 11 a.m.–6 p.m. **FREE** for grades K–12 with online coupon. Bellevue Arts Museum, Bellevue. bellevuearts.org

15

The Case for Early Learning. Join brain scientists, education experts and political leaders in a discussion of early childhood education and its benefits, in this *Seattle Times* LiveWire talk. 6 p.m. **FREE**; pre-register. Adults. Microsoft Building 33, Redmond. livewire.seattletimes.com

Mad Campus. Tour 12 temporary, interactive, outdoor art installations inspired by their surroundings. Daily through Oct. 25. **FREE.** Burke Museum of Natural History and Culture and surrounding area, Seattle. burkemuseum.org

22

Bricks and More Fun. Bring your pals for this drop-in LEGO building time. 3:30–5 p.m. Wednesdays. **FREE.** All ages. King County Library System, Muckleshoot Branch. kcls.org **ONGOING EVENT**

Math Salon with Daniel Finkel. The Pied Piper of math leads families in math games and puzzles that illustrate math's ubiquity in daily life. 5:30–7:30 p.m. **FREE.** All ages. Seattle Public Library, Greenwood Branch. spl.org

29

Bob's Big Corn Maze. Test your maze mettle in this 10-acre cornfield puzzle; plus a little kids' maze, pumpkins and more. 10 a.m.–6 p.m. daily Oct. 1–31. \$6–\$8; ages 4 and under free; fees vary for other activities. Bob's Corn & Pumpkin Farm, Snohomish. bobsfarm.com

Don Giovanni. Seattle Opera presents Mozart's epic work with its lustful title character and shocking finale. Oct. 18–Nov. 1. \$59 and up. Ages 13 and older. McCaw Hall, Seattle. seattleopera.org

THURSDAY

2

Peppa Pig Meet and Greet. Children's television character Peppa Pig meets young fans; related activities available. 11 a.m.–2 p.m. **FREE.** All ages. Southcenter Mall, Tukwila. westfield.com/southcenter

Hula Babies. This active class combines baby-wearing and the pleasing movements of hula. Thursdays 10:30–11:15 a.m. \$12 drop-in. Babies with caregiver. Gold's Gym, Mukilteo. ahonuworlodojhula.com **ONGOING EVENT**

9

Thomasson Family Farm and Corn Maze. Navigate your way through the maze, pick the best pumpkin, or get wild in the Kid's Corral activity area. Daily Oct. 1–31. \$2.50–\$12 for various activities. Thomasson Family Farm, Enumclaw. thomassonfamilyfarm.com

The Hayburners at the Market Stage. This terrific local bluegrass duo plays its lively tunes for a pleasant evening at our most international mall. 6:30 p.m. **FREE.** Crossroads Shopping Center, Bellevue. crossroadsbellevue.com

16

What the Griot Said - Storytelling at NAAM. Griot is another name for storyteller; all are invited to hear the tales the Griot tells. 11 a.m.–noon. **FREE.** All ages. Northwest African American Museum, Seattle. naamnw.org

Baby Sing-Along. The co-founder of the group Tickle Tune Typhoon leads caregivers and wee ones for songs and creative movement. 11:30 a.m.–12:30 p.m. \$17. Babies with caregiver. Seattle Holistic Center. seattleholisticcenter.com

23

Seattle Symphony and Garfield High School Side-by-Side Concert. Seattle Symphony musicians perform with Garfield Symphony Orchestra members in this **FREE** community concert. 7 p.m. All ages. Garfield High School, Seattle. More Symphony community concerts Oct. 17, 18, 28. seattlesymphony.org

Tugboat Story Time. Second and fourth Thursdays of the month, 11 a.m.–noon. **FREE.** Ages 2–5 with caregiver. Center for Wooden Boats, Seattle. cwb.org **ONGOING EVENT**

30

Día de los Muertos Celebration and Community Night Out. SAM invites the public to partake in activities and displays inspired by cultures from Mexico to South Asia. 6–9 p.m. **FREE.** All ages. Seattle Art Museum, Seattle. seattleartmuseum.org

The Garden of Rikki Tikki Tavi. A mongoose, a bird and a muskrat band together to face their foe in this tale adapted from Rudyard Kipling. Thursday–Sunday through Nov. 9. \$20–\$36. Ages 5 and up. Seattle Children's Theatre, Seattle. sct.org

FRIDAY

3

Busytown. Olympia Family Theater presents its own, Scarry-inspired busy Olympia complete with songs, local sites and celebrity cameos. Thursday–Sunday through Oct. 12. \$13–\$19. Ages 3 and up. olyft.org

Candlelight Tour at Fort Nisqually. Go low-tech for a night and get a glimpse of life by candlelight. Friday–Saturday, Oct. 3–4 evening tour times. \$8–\$12; preregister. Ages 4 and up. Fort Nisqually Living History Museum, Tacoma. fortnisqually.org

10

The Von Trapps. The real *Sound of Music* family carries on the tradition, with four great-grandchildren of Georg and Maria singing together in striking harmony. 7:30 p.m. \$16–\$54. Washington Center for the Performing Arts, Olympia. washingtoncenter.org

All Shook Up. Last weekend to see Mane-Stage Theatre Company's musical comedy featuring the songs of Elvis Presley. Through Oct. 12. \$11–\$20. Ages 8 and up. Sumner Performing Arts Center, Sumner. manestagetheatre.com

17

Pay-What-You-Can Friday at Soundbridge. Kids explore instruments and other elements of symphonic music; musical storytelling at 10:30 a.m. 10 a.m.–2 p.m. Donation requested. Soundbridge at Benaroya Hall, Seattle. seattlesymphony.org/soundbridge

Shrek the Musical. Last weekend to enjoy this musical story of adventure, love and one hilariously grumpy ogre. Friday–Sunday through Oct. 19. \$20–\$29. Ages 9 and up. Tacoma Musical Playhouse, Tacoma. tmp.org

24

Hoot 'n' Howl. Take an evening tram tour to see what Northwest Trek's animals are up to at night. 6–10 p.m., Friday–Saturday, Oct. 24–25. \$5–\$13; ages 3 and under free. All ages. Northwest Trek Wildlife Park, Eatonville. nwtrek.org

The Phantom Tollbooth. A boy transported to another world finds adventure in this pun-filled play based on the popular children's book. Friday–Sunday, Oct. 24–Nov. 2. \$10. Bellevue Youth Theatre, Bellevue. bellevueyouththeatre.org

31

Pumpkin Bash. It's not just a Halloween party. Watch how animals such as hippos and bears literally bash their tasty pumpkin treats. 9:30 a.m.–3 p.m., Oct. 18, 19, 25, 26 and 31. Included with admission. All ages. Woodland Park Zoo, Seattle. zoo.org

Dracula. International Ballet Theatre presents this dark and dramatic love story while showcasing wide-ranging dance styles, from classical ballet to folk to tap. Friday–Sunday, Oct. 31–Nov. 2. \$25–\$40. Meydenbauer Center, Bellevue. ibtbellevue.org

SATURDAY

4

BrickCon 2014. LEGO maniacs alert! Visit BrickCon to marvel at creations from around the world, build away and share enthusiasm for LEGO. Saturday–Sunday, Oct. 4–5. \$9; ages 5 and under free. Seattle Center Exhibition Hall, Seattle. brickcon.org

Innovation Day. See and hear about inventions from creative minds, designed to improve the lives of people around the world. 10 a.m.–3 p.m. **FREE.** All ages. Gates Foundation Visitor Center, Seattle. gatesfoundation.org/visitor-center

11

Kelsey Creek Farm Fair. Annual fall farm fun, with animals, crafts, hay rides, pumpkins and more. 11 a.m.–4 p.m. **FREE**; some activities have fee. All ages. Kelsey Creek Farm Park, Bellevue. bellevuekcfarm.org

Fire Day at MOHAI. The Seattle Fire Department helps tots learn fire safety, try on firefighter gear, and more. 10 a.m.–2 p.m. **FREE**; includes museum admission during event. All ages. Museum of History & Industry, Seattle. mohai.org

18

The Not-Its! Super-cool kindie rockers entertain all generations with songs about flannel jammies, bees, scabs and other timely topics. 11 a.m. \$5; ages 12 and under free. All ages. Town Hall, Seattle. townhall.org

Black Cat Fun Run. Costumes, glow sticks, flashlights and families dashing through the dark make for an exciting night; 2.5- or 5-mile routes available. 6:30 p.m. \$25–\$40. All ages. Point Defiance Park, Tacoma. metroparkstacoma.org

25

Hilloween. A family Halloween carnival features The Not-Its! and Eli Rosenblatt, plus trick-or-treating along Broadway. Noon–7 p.m. **FREE.** All ages. Cal Anderson Park, Seattle. caphilloween.com

Hansel & Gretel. In this 45-minute original musical by StoryBook Theater, the witch is a crazed Top Chef character who tries to turn Hansel into her next meal. Saturday–Sunday, Oct. 25–Nov. 23; four locations. \$11. Ages 3 and older. storybooktheater.org



Seattle Symphony free community concerts, Oct. 17, 18, 23, 28



COMMUNITY NIGHT OUT: DÍA DE LOS MUERTOS

Presented by 

Thu, Oct 30, 6–9 pm
Seattle Art Museum
1300 1st Ave

Experience a night of culture inspired by art and tradition from all over the globe! Visit a *tapete* (sand painting) inspired by Oaxaca's beautiful traditions, enjoy music and dancing from India and South Asia, and get creative with hands-on Pop art workshops!

In celebration of the exhibitions
Pop Departures and *City Dwellers:*
Contemporary Art from India.

First 500 free after 6 pm.
Children under 12 are always free.

SAM Kids Media Sponsor

Photo: Catherine Anstett

ParentMap

visitsam.org

SAM SEATTLE
ART
MUSEUM




Oct 27th
5–8pm

Halloween Spooktacular



Spooky Science, Eerie Art
& Loads of Ghoulish Goodies!

www.kidsquestmuseum.org

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TAKING FLIGHT

continued from page 25

STRATEGIES

Here are strategies that can help you plan travel with children who have special needs of all kinds.

START WITH PRACTICE GETAWAYS NEAR HOME

Book an overnight trip at a hotel on the beach or a quiet cabin in the woods. These short trips help your child adjust to travel-related transitions, prepping her for longer trips in the future. They help you develop a system and spot vulnerabilities, from hotel bathroom accessibility problems to meltdown triggers. Once you identify potential mishaps, you'll know how to avoid them on longer vacations.

PLAN EVERY DETAIL OF YOUR TRIP

Gone are the days of spontaneity — predictability is the linchpin of a successful trip. Think everything through: the best time of day to fly, how you would handle a medical problem, backup plans for missed connections or rainy days. Before you book anything online, call ahead to hotels, airlines and theme parks to have your questions and concerns answered by real people.

MAKE CHOICES TO REDUCE TRAVEL STRESS

If your child can't sit still for long periods, choose a flight with a layover. If you're nervous about accessibility at restaurants or about food allergies, book a hotel suite with a kitchen so that you can cook your own meals. Be prepared to relax the rules and routines from home a little to reduce overall stress.

PRIORITIZE TRAVEL WITHIN THE UNITED STATES

Thanks to the Americans with Disabilities Act of 1990 and subsequent legal rulings, accessibility in the U.S. is mandated by federal regulation in municipal and public places, from city buses and museums to airports and hotels. Accessibility includes physical access described in the ADA Standards for Accessible Design and programmatic access that otherwise might be obstructed by discriminatory policies or procedures (e.g., waiving wait times at theme parks for people with developmental disabilities such as autism). There is much less certainty overseas when it comes to accessibility. >>

travel resources for special-needs families

Society for Accessible Travel & Hospitality: Travel tips and recommendations. sath.org

Special Needs Travel Mom: Useful advice and trip ideas from a traveling mom of a child with both autism and physical disabilities. specialneedstravelmom.com

Flying Wheels Travel: Guided group tours and travel agency for people with physical disabilities, chronic illness or difficulty walking, and their families. flyingwheelstravel.com

ASD Vacations: Free travel planning for people on the autism spectrum and their families, from Caribbean resorts to cruises. asdvacations.com



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out + about

TAKING FLIGHT

continued from page 31

FIVE TRIP IDEAS

1 NATIONAL PARKS

One of the best opportunities to connect children with special needs to the natural world is found at U.S. national parks. Each individual park has a Web page on accessibility that describes its ADA-accessible trails, campgrounds and restrooms. Visitor centers are equipped with ramps, elevators and restrooms that accommodate people in wheelchairs. Interpretive programs and exhibits often include closed captioning and Braille. Even historic hotels have wheelchair-accessible rooms. Your child with special needs may also be eligible for a lifetime Access Pass, which admits him or her to national parks for free. And while dogs are not typically permitted on national park trails, certified service animals are allowed.

► **TRY:** Yellowstone, Glacier and Everglades national parks are acclaimed for their many miles of fully accessible trails.

2 FAMILY RESORTS

For families that just need a relaxing vacation, resort hotels are a good fit. Resorts have lodging, restaurants and activities all in one place, offering convenience and flexibility — two of the biggest considerations for families with special-needs kids. Look for resorts that go above and beyond ADA regulations with offerings such as accessible swimming pools, paved trails, adaptive kayaking and beach wheelchairs.

► **TRY:** Keystone Ski Resort in Colorado boasts an extensive adaptive program for disabled skiers and snowboarders. Great Wolf Lodge (13 locations, including one in Grand Mound, Wash.) is a giant indoor water park that has “zero-entry” swimming pools, allowing kids in appropriately equipped wheelchairs to join in the splashy fun.





3 CRUISES

An adventure at sea aboard a luxury cruise ship offers one of the lowest-stress family vacations around, and all cruise ships sailing in U.S. waters are ADA compliant. The top cruise lines go even further, with amenities such as wheelchair-friendly swimming pools and menus for passengers with food allergies.

► **TRY:** The Disney Dream and Disney Fantasy ships each have 24 fully accessible, family-size cabins with automatic doors. Youth counselors are trained to work with children with special needs, and the ships' theaters offer wheelchair seating and assisted-listening devices. Royal Caribbean is proud of its autism-friendly ships; perks include priority check-in, gluten-free menu items and sensory-sensitive films and toys. Check out Special Needs at Sea for accessibility equipment rentals that are delivered right to a cruise ship.

4 THEME PARKS

Adventurous and fun, theme-park vacations are on every child's dream list. Many such parks accommodate special needs, yet they present inherent challenges nonetheless (lots of ground to cover going from ride to ride, sensory overload with no quiet places to escape to, etc.). For the smoothest possible experience, plan out every detail well in advance.

► **TRY:** Both Disneyland and Walt Disney World are exceptional in the ways they cater to families with special needs. Many rides are accessible. Disney's Disability Access Service Card allows disabled children and their families to return to a ride at a given time without waiting in line (although some families with autistic children preferred Disney's previous system, which skipped the wait time altogether). Morgan's Wonderland, in San Antonio, Texas, is the world's first fully accessible family theme park. >>



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out + about

TAKING FLIGHT

continued from page 32

5 BIG CITIES

With attractions such as museums, zoos, aquariums, parks and cultural opportunities, America's major cities are very friendly vacation spots for families that have kids with special needs, especially physical disabilities. With few exceptions, these big-city attractions are ADA compliant and wheelchair accessible. Cities also have large chain hotels with accessible rooms, and accessible public transportation.

► **TRY:** In Washington, D.C., historical attractions, monuments and the Smithsonian museums are not only educational, they're wheelchair accessible. Both Metrorail and D.C. buses are accessible as well. ■



Lauren Braden is a Pacific Northwest writer who focuses on recreation and local travel. She travels frequently with her child, who has autism. Lauren blogs at NWTripfinder.com.

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3 northwest trip ideas

1 NEWPORT, OREGON

This rugged stretch of scenic coastline — one of the Northwest's most spectacular — is accessible in places. You can explore barrier-free trails through tide pools filled with starfish and hermit crabs at Quarry Cove, part of the Yaquina Head Outstanding Natural Area. The world-class Oregon Coast Aquarium offers barrier-free access to all of its exhibits. Beverly Beach State Park, nearby, rents wheelchair-accessible yurts.



2 NORTH CASCADES NATIONAL PARK, WASHINGTON

In the summer months, this rustic eco-lodge on stunning Diablo Lake offers family getaways that are a great choice for autistic kids who need lots of flexibility. All of the facilities and campus pathways at the North Cascades Environmental Learning Center are ADA accessible, and it has a Wrangler PMV scooter with all-terrain tires available.



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3 VANCOUVER, BRITISH COLUMBIA

The Northwest's most metropolitan city boasts accessible public transportation systems. Stanley Park's 5.5-mile promenade is barrier free, and wheelchairs can roll right onto the horse-drawn carriages through the park. The Vancouver Aquarium has captioned exhibit videos, easy wheelchair access throughout, a restroom with an adult-size changing table and a 50 percent discount for visitors with disabilities. Its website offers a photographic preview to help prepare your child with autism for her upcoming aquarium visit.



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0-3

'Why does your baby look like that?'

Living (and thriving) with cleft lip and palate

By Gemma Alexander

When we first considered special-needs adoption, I had to research cleft lip and palate to find out what it was. Now I see the telltale lip scar all the time. One in every 1,000 babies is born with some degree of cleft — a gap where parts were supposed to fuse together when the baby was forming in the womb.

A cleft can occur in the lip, the palate or both, and it can be on one or both sides of the face. Nobody really understands why cleft happens. Genetics and vitamin deficiencies are possible contributors, but not causes.

Cleft is usually diagnosed during a prenatal ultrasound. "It was horrible and scary, because I'd never seen it before," says Burien, Wash., mom Nolby Manzanara of how she felt when her daughter, Genesis, was diagnosed with cleft lip and palate. "They sent us to [Seattle] Children's Hospital, and they answered all my questions and made me feel a little bit better."

Feeding is the first practical issue parents must face. "Because babies with cleft palate cannot generate suction, most will not be able to sufficiently breastfeed and will need to use special cleft palate bottles. For mothers who were planning to breastfeed, this is very disheartening," says Carolyn Rogers-Vizena, M.D., a craniofacial surgeon at Boston Children's Hospital.

"Other than a learning curve on the feeding issue, life was normal," says Ashley Harris of Peoria, Ariz., whose son was born with cleft lip



and palate. "I had been in contact with this before through friends."

Rogers-Vizena recommends connecting with other parents for support right away. "The best advice a parent can get doesn't come from doctors or nurses, but from other parents who have gone through similar experiences."

Going under the knife

In the past, children with cleft lip and palate suffered through dozens of surgeries. Today, better techniques, approaches and protocols have reduced the number of procedures.

"We have started to recognize the importance of caring for children in centers where there is a concentration of expertise," says Raymond

Tse, M.D., a pediatric plastic surgeon at Seattle Children's. "We have placed an emphasis on team-based care, where the communication and continuity of care really make a difference."

When we adopted my daughter, who was born with cleft lip and palate, there were 10 members on our support team. For biological families facing a new diagnosis, the social worker is a critical team member who offers coaching and encouragement as parents learn to advocate for their child in the health care system, share the news with friends and family, and cope with strangers' responses. (Most adoptive parents are guided through these concerns earlier as part of the adoption process.)

Manzanara wanted to stay at the hospital after Genesis was born — she worried that her new baby's appearance would frighten her two older children. "I didn't want to go out. I was afraid people would say something to hurt my feelings," she says. Eventually she overcame her fears, although she says that younger kids often ask about how her daughter looks. She still struggles for an answer.

Cleft palate can be hard to explain to children, but adults understand that it is a physical anomaly. Other medical concerns, such as developmental delays or eye problems, are extremely rare. The most common related medical issue is frequent ear infections.

Treatment for most children with cleft palate will include orthodontics and speech therapy, because the palate muscles cannot form certain sounds.

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"Speech differences are very socially stigmatizing, and other children or adults may incorrectly make assumptions about the intelligence or ability of a child based on their speech," Rogers-Vizena says.

But surgeries are still the biggest part of treatment. Genesis had surgery to repair her lip at 6 months old and an initial palate surgery at around 1 year. She can expect more surgeries as she grows. "She's a really strong little girl," says Manzanares. Harris' son Andrew, now 12, has undergone five surgeries.

Everyday adjustments

As children get older, Tse says, involving them in decision making becomes important. Child life specialists are available at many hospitals to help parents give kids age-appropriate explanations. When my daughter was 4, the hospital gave her an anesthesia mask and a rag doll before her surgery. She played "surgery" on that doll for months.

She understood that her mouth needed surgery, but she did not become self-conscious about her appearance until grade school. Rogers-Vizena says, "Awareness of difference typically begins around 3 years of age. At that time, awareness is not perceived as a bad thing. Peer teasing often begins around school age." Knowledge and preparation can help kids respond. "For example, if someone says, 'Your nose looks funny,' a child can say, 'It's because of my cleft' or 'This is how I was born.'"

"He had someone call him a name once or twice in grade school. That's it. He has such good self-esteem that it didn't bother him much. He

has great friends that never judged him," Harris says of Andrew. "This is fixable and will not affect their ability to learn, grow, have friends and have an amazingly normal life."

Tse agrees. "Kids with cleft are like any other kid. They have had to deal with speech difficulties and to psychologically adapt to their facial difference. I often see cleft kids who have a better sense of self. Cleft is not going to hold them back." ■

Despite the positive, supportive atmosphere at Seattle Children's, Gemma Alexander prefers to spend time online at gemmadeealexander.wordpress.com and [@gemmadeetweet](https://twitter.com/gemmadeetweet).

family resources

Children's Craniofacial Association (ccakids.com) works to improve quality of life for people with facial differences and their families.

Faces (faces-cranio.org) offers information, including about financial assistance, for families affected by craniofacial conditions.

Foundation for Faces of Children (facesofchildren.org) helps patients and families learn about facial differences and advocate for children with facial differences.

Operation Smile (operationsmile.org) provides free surgeries for children around the globe.

Smile Train (smiletrain.org) performs free cleft surgery in developing countries.

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Films with powerful heroines



According to a recent study, only 13 percent of movies feature a cast where at least half of the characters are female. And male protagonists outnumber female ones 5:1. Here are some films (and their heroines) that are girl-powerful; find more at parentmap.com/femaleheroes.

KIKI'S DELIVERY SERVICE. (1989); rated G; recommended for ages 5 and up. Heroine: Kiki. You need to find your place in the world. Sometimes that place involves honoring your commitments and being nice to people, sometimes it involves saving a friend from falling to his death from a crashed Zeppelin.

THE INCREDIBLES. (2004); rated PG; recommended for ages 7 and up. Heroines: Elastigirl and Violet. Elastigirl is a strong (and very flexible) mother who takes care of the family, while the shy Violet learns that with self-confidence her abilities make her a formidable hero.

WADJDA. (2012); rated PG; recommended for ages 9 and up. Heroine: Wadjda. Do you want to wear high-tops with purple laces? Do you want to ride a bike? *Wadjda* is the story of a girl in Saudi Arabia who aims to live life her way despite her culture's expectations for how women should behave.

WHALE RIDER. (2002); rated PG-13; recommended for ages 11 and up. Heroine: Paikea Apirana. Paikea is the latest in the line of Maori leaders descended from the legendary Whale Rider. But, she's a girl and her traditional father can't accept that she could be a leader. Pai needs to break through the prejudice and prove that she is worthy.

— John Kubalak



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4–9

Sense and sensibility

An introduction to sensory processing disorder

By Deanna Duff

Sleepless nights are a parent's rite of passage, as is feeding a finicky eater. But for parents of kids with sensory processing disorder (SPD), these moments can escalate from common to catastrophic.

"My daughter couldn't fall asleep by herself. We were completely sleep-deprived for 18 months," says Carrie Fannin of Seattle. "She [would] eat hardly anything with texture, and transitioning from one activity to the next resulted in monumental meltdowns."

A pediatric neurologist diagnosed Fannin's daughter, Hayley, with moderate to severe SPD when she was 6 years old.

Children with SPD have difficulty interpreting and responding to sensory input acquired from both internal and primary senses, including hearing, sight, smell, taste and touch. The brain either overreacts or underreacts to stimuli. A 2013 University of California–San Francisco study concluded that SPD affects 5 to 16 percent of school-age children.

"Putting on socks became a four-hour event," Fannin recalls. "I sat up at 3 in the morning feeling like she would never ride a bike, never graduate from high school, never drive a car."

Today, Hayley is an independent 20-year-old college student with a job. And her mom is the founder of Sensory Planet (sensoryplanet.com), a networking site that helps connect parents with each other, resources and hope.

What is sensory processing disorder?

Imagine a light tap on the shoulder. For a child with SPD, the reaction can vary from not noticing at all to feeling assaulted.

"Sensory processing disorder is difficulty identifying, interpreting and responding to sensory input," says Lucy Jane Miller, Ph.D., founder of the STAR Center, an SPD therapy and research institution in Denver, Colorado, and author of the revised edition of *Sensational Kids: Hope and Help for Children with Sensory Processing Disorder*.

"Underresponsiveness means a child responds too slowly or not enough. They can fall during field day, cut their knees and be bleeding. However, they may not feel it, stand up and keep running," Miller says. "For an overresponsive child, something as simple as a breeze on their neck can induce a sense of danger and panic."

A third manifestation is sensory craving, which Miller describes as constantly seeking input: feverish movement, nonstop talking and an inability to keep their hands to themselves. "Those three



together form a pattern," she explains. "The information comes in, and children cannot regulate how their brains respond."

SPD impacts lesser-known internal senses, too. Vestibular input, or movement, comes from the inner ear and impacts abilities such as balance and coordination. Proprioception, or awareness between separate parts of the body, originates in the muscles and joints. It's responsible for such actions as being able to touch one hand to the other with your eyes closed.

Miller adds an eighth sense, interoception, to the list. It refers to internal sensations, such as hunger or a stomachache.

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In search of diagnosis

"It took a long time and continued persistence on my part to receive a diagnosis," Fannin says. "Hayley was meeting so many developmental milestones that my concerns were being brushed off by doctors."

Many children are either misdiagnosed or not diagnosed at all. According to Miller, a heightened reaction is often mistaken for ADHD, and a lacking response may be seen as autism.

Detection is also inconsistent because SPD has yet to appear in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, the official standard for diagnosis and treatment. "This is a very real diagnosis, though," Miller says.

Portland, Ore., resident Ben Cavalcanti and his wife noticed that their newborn resisted sleep and rarely made eye contact. But it wasn't until their now 5-year-old son was expelled from two preschools that the first-time parents became aware of his special needs.

"Circle time — story reading — was particularly difficult. He'd get swept away in the chaos of play and couldn't settle down to sit and listen," Cavalcanti says. "We took on guilt as parents of what we were doing wrong. I'm sure it also affected him, wondering why he was kicked out."

Children are frequently diagnosed after leaving home for the first time to attend day care, preschool or kindergarten. Without constant parental supervision, problems become more unmanageable. Another influx of diagnoses occurs around third grade due to educational acceleration, Miller says.

Methods of treatment

Cavalcanti began researching symptoms and connected with Portland-based Sensory Kids (sensorykidsot.com), a clinic specializing in SPD occupational therapy (OT).

"Early intervention is important. The sooner you get into treatment, the more impact you'll see."

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Sense and sensibility

continued from page 39

I've treated infants under 2 months old," says Lisa Porter, who founded Sensory Kids in 2009.

In addition to her OT background, Porter trained at Denver's STAR Center, which promotes a "smart-play method." Both Sensory Kids and STAR work with children in a playground-style gym environment. Through hands-on activities, kids learn to identify triggers, develop coping strategies, identify emotions and regulate reactions.

"We also spend a lot of time talking about differences and how everyone has them," Porter says. "A main focus is self-esteem, because SPD takes a toll on kids. They often struggle to relate to their peers and miss out on attending

birthday parties and childhood activities."

For maximum benefits, both Miller and Porter recommend multiple sessions weekly. At STAR, one out of every five treatments focuses on parent-only education.

"My relationship with my son is so much better," Cavalcanti says. "Before, my first reaction was to be punitive and stern. Now I understand [better] what he's experiencing, and I have the tools to work with him."

He and his wife now communicate more clearly with their son, preparing him for transitions between activities and ensuring that he always has access to a calm space. They carefully selected a kindergarten that will accommodate his needs.

Cavalcanti admits it's often still "two steps forward, one step back," but things have improved. At Sensory Kids, 150 tiles painted by kids decorate the walls. The Cavalcanti tile boasts a brightly colored bunch of balloons floating into the sky.

"I've found that people will only be what they're labeled to be," Cavalcanti says. "If [children are] allowed to pursue their full potential, they'll rise up and soar." ■

Deanna Duff is an award-winning freelance writer who contributes to a variety of regional and national publications.

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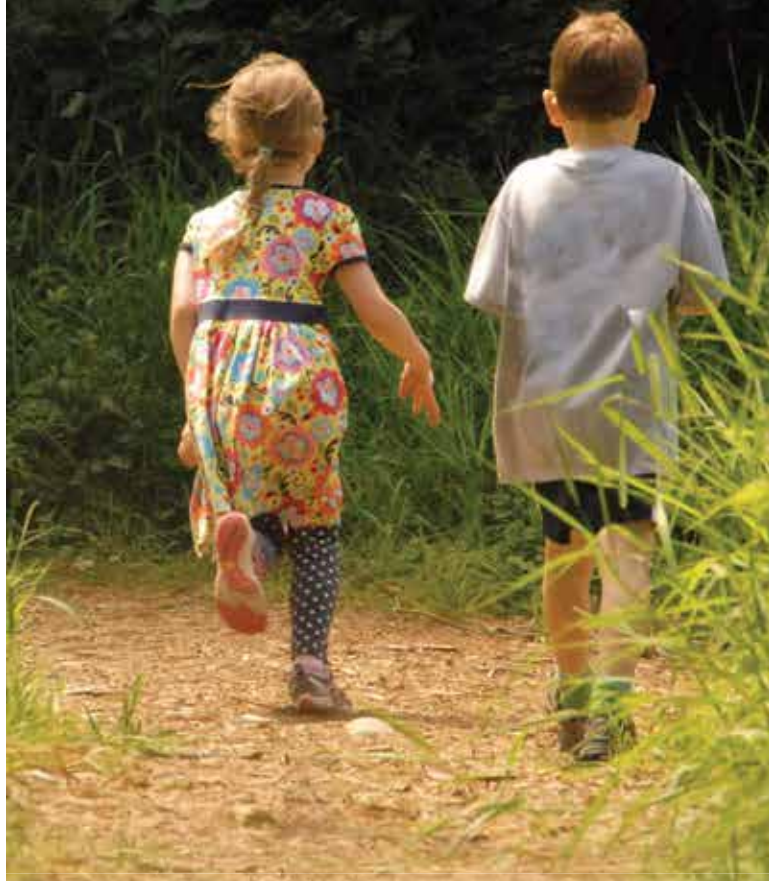
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10–14

Trusted counsel

Does your tween need therapy?

By Kristen A. Russell

Lucy* was 10 years old when lightning struck. Her father's secret gambling addiction — and the resulting financial devastation — came to light, and her parents' marriage was ending. Suddenly, Lucy was not only enduring the tremendous emotional upheaval of divorce, but also facing the loss of her Bellevue childhood home.

Though Lucy's sadness never seemed out of proportion with the situation, her mother worried about her own emotional bandwidth to ensure that Lucy was OK. She wanted to be sure her daughter had someone to talk to, as well as a safe place to feel angry while sorting through some serious emotions. She asked her pediatrician to recommend a therapist.

"Lucy has a real caretaker personality," her mother says, "and I didn't want her trying to nurse me — let alone her little brother — through this mess. It was important for her to have a place to go where she could worry only about her own emotions." Therapy helped Lucy ride out the storm; now 17, she returns to it from time to time when issues arise.

Signs and struggles

Big events such as family traumas can be clear indicators for therapy, but sometimes kids struggle in ongoing, less obvious ways. It's not always easy to know when it's time to seek help for your child, but chances are if you're asking yourself the question, it's worth exploring.

"Most parents will have noticed their child struggling with intense emotions, difficult thoughts or behaviors, or problems in their relationships for several months or longer when they begin to contemplate finding their child a therapist," says Katie McLaughlin, Ph.D., a licensed child clinical psychologist and assistant professor of psychology at the University of Washington.

If you're wondering about therapy for your child, McLaughlin suggests you consider the following:

- Are the emotional and behavioral patterns in question developmentally appropriate? Most children experience challenging emotions and behaviors at certain points in development. Talk to teachers, child-care professionals and fellow parents about whether your child's behaviors seem consistent with those of other kids the same age.
- Are the patterns consistent and stable? Most kids feel distressing emotions, such as fear, sadness and anger, or have problems regulating their behavior in certain situations, with certain people or for short periods of time (especially during important transitions — a new school, a new sibling, etc.). These transient or context-specific patterns are probably not significant enough to warrant therapy. But if

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the patterns stay relatively stable over time and appear in multiple contexts, therapy may be important to consider.

- Are the patterns causing your child significant distress? Are they interfering with important domains of life, such as school or relationships with friends and family? If the answer is yes, then finding your child a therapist might be the right step.

Margaret remembers the moment she knew she needed to look for help. Her 11-year-old son Theo's behavior had slowly become stranger and more disruptive over the course of several years. "I knew something was going on, because he'd get really stressed out over little things, and then he'd get into trouble at school," says the Seattle mom. "He was so anxious and having a harder and harder time doing simple things." >>

counselor credentials

Psychiatrists (M.D. or D.O.) are medical doctors with advanced training and experience in psychotherapy and pharmacology. They can prescribe medications.

Clinical psychologists (Ph.D., Psy.D. or Ed.D.) are therapists with a doctorate that includes advanced training in the practice of psychology, and many

specialize in treating children and teens and their families. Psychologists may help clients manage medications, but they do not prescribe them.

Licensed clinical social workers (LCSW) have a master's degree, specialize in clinical social work and are licensed by the state.

Source: The Nemours Foundation/KidsHealth



Trusted counsel

continued from page 45

One day, Margaret noticed Theo blowing on his fingers repeatedly. She mentioned it to a friend, who thought the behavior sounded like obsessive-compulsive disorder (OCD), an anxiety disorder often accompanied by repetitive movements. “It sounded right,” Margaret says, so she did some online research and found Theo a psychologist at a clinic that specializes in treating anxiety disorders in kids.

Theo was indeed diagnosed with OCD, and he went to therapy several times a week for about six months. Now 17, he still gets the occasional checkup, Margaret says. “He thinks therapy is exhausting — he never feels like going — but it helps him a lot.”

The perfect provider

It can take work to find the right therapist for your child, but it’s well worth the effort, says McLaughlin. “Many parents can feel overwhelmed by the numerous options available, or [they] feel unsure about how to start the search process,” she says. “Therapists vary widely in the types of training they have received, the strategies they use to treat emotional and behavioral problems in children, and their interpersonal style.”

An important first step, McLaughlin notes, is to determine what kinds of treatment have been found effective (are “evidence-based”) for the types of problems your child is experiencing. Speak to your pediatrician or consult reputable online resources (see sidebar).

Once you have a basic idea of what type of treatment your child needs, search for providers covered by your health insurance who offer that treatment. Most insurance plans have provider directories on their websites.

The final step is determining whether a therapist is a good fit for your child. Request a brief consultation or phone interview (not all therapists have time to do this, and many charge a fee). You may need to speak to a few providers before settling on one both you and your child like. “Try not to be discouraged if the first therapist you meet does not seem to be a good fit, and do not be afraid to shop around,” McLaughlin says. “You know your child best.”

The effort can really pay off, she explains. “The right therapist can have an enormously positive impact on your child’s development.”

Theo’s mom, Margaret, agrees: “When you find the right therapist, it makes all the difference in the world.” ■

Kristen A. Russell is a Seattle journalist and the co-author, with Laura Kastner, of Wise-Minded Parenting: Seven Essentials for Raising Successful Tweens + Teens.

resources

- **To read about evidence-based therapies and other resources for parents**, child psychologist Katie McLaughlin recommends the website Effective Child Therapy (effectivechildtherapy.com).
- **For an excellent overview of child therapy**, including an extensive list of tips on selecting a therapist and preparing your child for a visit, see seattlechildrens.org/kids-health/page.aspx?id=34359738996.

types of therapy

Cognitive behavioral therapy (CBT): Focuses on the ways that a person’s cognitions (thoughts), emotions and behaviors are connected. Hinges on teaching children specific skills.

Psychoanalytic therapy: Usually used with tweens and teens who may benefit from more in-depth analysis of their problems. Does not focus on short-term problem solving in the same way as CBT.

Group therapy: Kids meet in groups of six to 12 to solve problems and learn new skills, such as social skills or anger management.

Family therapy: Counseling sessions with some or all family members to help improve communication with each other.

Dialectical behavior therapy (DBT): A form of psychotherapy developed by University of Washington researcher Marsha Linehan that combines cognitive-behavioral techniques with the concept of mindful awareness. Especially effective for self-harm behaviors, depression and eating disorders.

Sources: American Psychological Association, The Nemours Foundation/KidsHealth, The Linehan Institute

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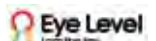
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Paying attention

With diagnoses on the rise, teens and families find new ways to manage ADHD

By Joanna Nesbit

Grant Haskell, now 17, was a high-energy kid who hated the feel of clothing tags and cried when his fingernails were clipped. For years, his family thought he had sensory-integration issues. They even secured special classroom services to accommodate Grant's energy level.

Faced with the multiple teachers and classrooms of middle school, Grant became depressed as his grades plummeted. Antidepressants and therapy didn't help. Then his mother, Kate, suspected a sleep disorder, which can look like hyperactivity in younger children. Grant was diagnosed with periodic movement sleep disorder, sleep apnea and restless leg syndrome. His mood improved with treatment, but his ability to pay attention in class didn't.

Finally, Kate took Grant to the University of Washington's Learn Clinic for a full evaluation, and in eighth grade, he was diagnosed with attention deficit hyperactivity disorder (ADHD) and put on medication. As a family therapist who sees ADHD patients in Bellingham, Kate felt terrible for not recognizing the condition in her own child.

Another Bellingham teen, Eric*, went on ADHD medication in third grade. He had settled down by fifth, so his dad and stepmom, Kerri*, took him off meds because they didn't like the "zombie effect." Then things began falling apart for Eric under the new pressures of middle school, but because he has no coexisting disorders, his family has stayed away from medication. Instead they've upped the structure of their home life, managing Eric's nutrition and monitoring his sleep. The 15-year-old gets mediocre grades but is managing.

The scope of ADHD

According to the Centers for Disease Control and Prevention (CDC), 11 percent of children ages 4–17, mostly boys, were reported by their parents to have been diagnosed with ADHD in 2011 — an increase from 9.5 percent in 2007

and 7.8 percent in 2003. Whether this uptick is due to better diagnosis, overdiagnosis or misdiagnosis is debatable, but experts agree that ADHD is real.

It's also tricky. Two-thirds of diagnosed children have coexisting disorders such as anxiety, depression or a learning disability, so parsing the disorders and medications is an evolving process, as the Haskell family learned. Moreover, symptoms change with age: Classic hyperactivity and impulsivity can fade by early adolescence and be replaced by conditions such as depression, so ADHD is less recognizable.

"Until the 1990s, we typically stopped treating kids ages 11–14 with ADHD medication because we [had been] treating the hyperactivity/impulsivity," says Lawrence Diller, M.D., author

of *Running on Ritalin* and a longtime behavioral and developmental pediatrician. These days, he explains, kids who took meds when they were younger might stop due to insurance changes or lack of family follow-up. Others continue, as in Diller's middle- to upper-middle-class California community, where kids commonly stay on meds through adolescence because academic expectations are so high.

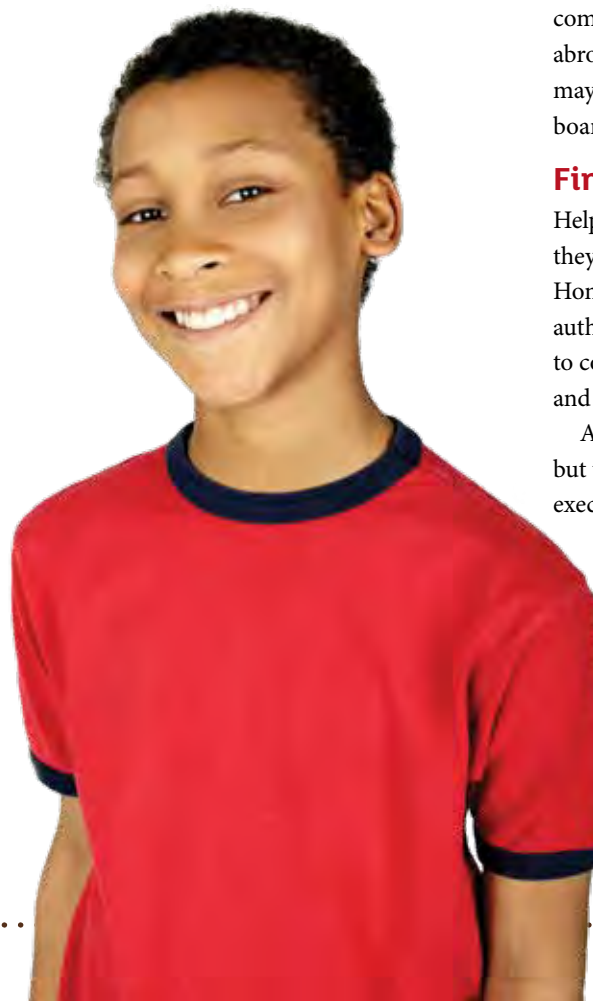
Grant's parents had expected him to start college right after high school, but their mindset has shifted since seeing his struggles. Now a senior, Grant feels so frustrated by the classroom setting that he's fulfilling elective requirements through a National Outdoor Leadership School (NOLS) course. He has found success in his school's Future Business Leaders of America club, as well as an internship with a computer company. He is thinking about working or living abroad for a while after he graduates, and then maybe trying college later. Grant's parents are on board with these choices.

Finding and directing focus

Helping ADHD teens find success in something they love is critical for self-confidence, says Lara Honos-Webb, Ph.D., a psychologist and the author of *The Gift of ADHD*. She works with kids to combat self-defeating beliefs, build confidence and develop motivation on their own terms.

ADHD teens are typically bright and creative, but they may struggle with emotional skills and executive functions, such as task initiation and time management; in a classroom, this can look like laziness or boredom. Homework may feel overwhelming, too. By high school, negative feedback from parents and teachers often spirals kids' confidence into the basement. Add a complex schedule and more challenging academics, and teens may give up.

Elaine Taylor-Klaus, a certified parent coach and cofounder of ImpactADHD (impactadhd.com), an organization that



coaches parents in supporting ADHD kids, says that shifting expectations to focus on a child's gifts rather than deficits is critical for the family relationship. Taylor-Klaus, who has ADD, three special-needs kids and a husband with ADD, was frustrated for years in her search for help. Typically, she says, parents and teachers focus on organizational systems — planners and calendars — then give up if they don't work.

Three years ago, she and certified parent coach Diane Dempster created ImpactADHD to offer online and phone coaching to parents. "That parent shift in perspective is really complex," Taylor-Klaus says. "You don't just will yourself to think about ADHD differently."

To support Eric, Kerri tracks his homework so she knows what's coming and offers to help him study. "I try not to be that

overbearing parent, because I want him to learn to self-manage, but I'll say casually, 'Hey, let me know if you'd like help studying for that vocabulary quiz.'"

An academic and financial aid adviser at a university, Kerri has seen first-year students with ADHD struggle with being away from special educational support, helpful parents and accessible medication. For some students, she says, it's the perfect storm.

She wants Eric to go to college — and so does he — but she recognizes that top grades may not be part of the picture. It's too early to say what he will choose. Whatever it is, his family has his back. ■

Joanna Nesbit is a freelance writer who lives in Bellingham with her husband and two children. Learn more about her at joannanesbit.com.

parent resources

SEATTLE AREA

- The Learn Clinic, University of Washington: 206-543-6511, web.psych.washington.edu/psych.php#p=373

- Edge Foundation: edgefoundation.org

WEBSITES

- Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD): chadd.org
- National Resource Center on ADHD: help4adhd.org
- ImpactADHD: impactadhd.com

READING

- *The Gift of ADHD: How to Transform Your Child's Problems into Strengths*, Lara Honos-Webb
- *Driven to Distraction: Recognizing and Coping with Attention Deficit Disorder from Childhood Through Adulthood*, Edward M. Hallowell and John J. Ratey
- *The ADHD Workbook for Teens*, Lara Honos-Webb
- *Smart but Scattered Teens: The "Executive Skills" Program for Helping Teens Reach Their Potential*, Richard Guare, Peg Dawson and Colin Guare
- *ADDitude* magazine: additudemag.com



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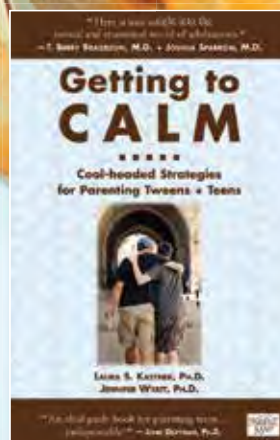
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Someone you should know

By Gemma Alexander • Photograph by Will Austin

The Melodic Caring Project streams live concerts to hospital rooms, creating a communal experience for children who have been isolated by illness. At a Melodic Caring concert, the kids are the rock stars, and the performers are their no. 1 fans. The nonprofit was founded by singer-songwriter **LEVI WARE** and his wife, **STEPHANIE WARE**. Visit melodiccaringproject.org to get involved.

Excerpt from a letter written by Alisha, a patient:

Music is what feeling sounds like. Music is what healing sounds like. It has the power to bring people back to life. I've seen it. I've experienced it. It is powerful, and beautiful. And I will be forever grateful to the Melodic Caring project for stepping in during some of my darkest days and saying, "We're here for you, and we love you. You are the RockSTAR."

What inspired Melodic Caring Project?

Levi: A buddy of mine is a middle school teacher. One of his students, an 11-year-old girl named Katie, was diagnosed with leukemia. So we put together a concert for Katie. But she ended up having to be at Seattle Children's to go through chemo, so she couldn't be at the show. We thought, there's got to be a way to get her involved so she knows that we're all here and we all care. We had a laptop with a video camera on it, and a coffee shop a couple doors down with an open Wi-Fi network, and we thought, let's just stream it. Afterward, we called her and her mom at the hospital, and they were both bawling, because after so much time alone it was really impactful that they weren't forgotten."

Stephanie: We started telling people about what happened, and they just told us, "You have to do this." The people at the shows know that they are part of something bigger than just the concert that night, that it's reaching out and really benefiting somebody else in a situation that most people don't have to think about. It brings out the best in people.

How did the concert for Katie grow into Melodic Caring Project?

Levi: We realized right off that if we're going to dedicate ourselves to this, then we have to do it right and build a foundation that really supports the ability of this program to reach kids. When we founded our board, we got very well-respected people in every field. We're tying the music field to the medical field and technology.

Stephanie: At the start, Levi worked construction. He'd get home on Thursday nights, and we would devote every Friday to developing this idea. At the end of 2011, Seattle Children's wanted to offer concerts to some of their patients, and we decided to jump into it full-time.

So how do you do a concert?

Levi: There are three sides. We have A&R [artists and repertoire professionals] to reach out to musicians to line up artists; we work with the child life divisions of the hospitals to offer the shows to their kids; and we get applications from the kids to be the rock stars. Then we send that show to their hospital rooms.

Stephanie: We handle some of the booking ourselves, but mostly we team up with people like Seattle Living Room Shows. We look into who's playing and research their songs and how they act on stage. And the thing is, the artists get on stage and know that they are speaking to kids on the other side and —

Levi: They're profoundly affected by it. We've had a lot of artists come up after the shows and say, "This is the most profound experience I've ever had with music, because it gave my music purpose."

How does it work on the kids' side?

Levi: Typically, the day or two before the actual concert is when most of the kids will sign up. They might be here in Seattle or in Tacoma or Portland, [as far as] the East Coast. When we streamed Switchfoot, fans were watching from around the world. They sent messages on the live chat [like] "We're watching in Belgium and thinking about you."

Stephanie: We have a live-chat moderator at the concert. People can tune in wherever they are and offer words of encouragement to the kids. The kids can just watch anonymously or participate in the live chat.

Levi: The kids can invite their friends to be part of the show. So in a situation like with Katie, her friends didn't know how to support her — rather than rally around her, they [had] kind of dispersed. When we stream the show, she can say, "Hey, watch this show," and rather than focus on the illness that's dividing them, now they're focusing on this rock show. The artists call Katie out and say, "Katie, you're the rock star. We're your no. 1 fans," then all the friends go "Oh my God!" and the communication opens back up. ■

Gemma Alexander is a freelance writer living in Seattle with her husband and two children. She blogs at gemmadeealexander.wordpress.com and tweets @gemmadeetweet often.



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