

Spring 2002

News and Views, Spring 2002

West Virginia Autism Training Center

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Huntington, WV • Spring 2002

From the Director

Barbara Becker-Cottrill

The West Virginia Autism Training Center at Marshall University made some significant changes in service delivery in January, 1999 and I am frequently asked, "How is the new training model going?" My answer comes quickly and with excitement "It was the best step in the right direction that we could have taken." Through a grant funded by the Centers for Disease Control we were able to develop, implement and evaluate a service delivery process based on a model of positive behavior support (PBS). PBS is a comprehensive approach to addressing challenging behavior that serves to improve the overall quality of an individual's life. PBS employs procedures that are derived from the behavior analytic research and there is an emphasis on

building new adaptive behavioral repertoires that will generalize across a wide variety of people, settings and situations.

The overall training process, called the Family Focus Positive Behavior Support Model, has specific events that occur for each family who participates. For example, each family has a team of individuals who meet at least once a month to craft a behavior support plan. They also attend training lectures. Family-centered and person-centered planning activities are also specific events that are a part of the training process. However, within the structure of these events, the plans developed for each individual with autism is completely unique. Behavior support plans are developed by the team and are

comprehensive in that they target not only behavioral and educational skill building but also strive to support the individual and family in building the best life possible.

Our staff work with teams for a three to nine month period to ensure that plans are effective and that the team will continue to monitor and extend programs and build new ones as time goes on. This is such a difference from our former training model, where staff met a new family, assessed some targeted concerns and provided a plan for their child with short term training on how to implement the plan. We may have been able to work with more families within this consultative model but, in essence, we were providing

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Autism Training Center Northern Panhandle Opens

On March 1st the Autism Training Center Northern Panhandle (ATC NP) Satellite Center opened its doors to the public. The center is housed at New Cumberland Elementary School (just outside of Weirton, West Virginia). To commemorate the event, an open house celebration was held and attended by families with children with autism, educators, educational administrators and local community members and leaders.

This autism satellite center is the second of its type in the state. A satellite center was established in 1997 in Fairmont, West Virginia. Both centers were made possible through the diligent efforts of families who benefit from the services offered by the center. The ATC NP effort was spearheaded by Chris Fair, a parent of a son with autism and an Autism Training Center advisory board

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Ribbon Cutting Ceremony, March 1st at the Autism Training Center – Northern Panhandle.
From left to right: Danny Kaser, Superintendent, Hancock County Schools; Jeff Davis, Hancock County Commissioner; Barbara Becker-Cottrill, Executive Director, Autism Training Center; Chris Fair, parent and Autism Training Center Advisory Board member.



**AUTISM
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**HEARTS
FOR AUTISM
BENEFIT
CONCERT
AND TALENT
SHOW**

**Monday, April 29
7:00 p.m.**

**The Joan C. Edwards
Performing Arts Center
Marshall University**

Featuring
**The Two of Hearts
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**Tickets \$10.00
(\$12.00 at the door)**

Proceeds will go to the
Marshall University
Foundation Autism
Training Center for a
lending library of books
and educational video
tapes on autism for
families throughout West
Virginia.

**For ticket information
call 1-800-344-5115**

**HAVE A HEART FOR
AUTISM!**

From the Director

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a “train and hope” service. Yes, our new model is definitely a step in the right direction. Our evaluation data and family descriptive reports indicate high satisfaction and positive child and family outcomes.

We will continue to strengthen and build on our Family Focus Positive Behavior Support Model and also to expand the range of additional services available to registered families. Our lending library is growing rapidly and our in-service training menu is expanding as well. We have focused on increasing the number of our

physical facilities and are pleased to announce a new satellite center in New Cumberland, West Virginia. More information on this and other activities and events follows. From sharing success stories to tips from experience to new resources for families and educators, we hope you will find our newsletter informative and that it will keep you up to date on the activities of the WV Autism Training Center at Marshall University.

**For Current Training Opportunities
in Autism in West Virginia
Check our Web Site at
www.marshall.edu/coe/atc**

Northern Panhandle

(continued from page 1)

member. Together, families in the Northern Panhandle convinced their representatives of the need for more autism training services and a center that would serve as a training resource. Delegate Margarette R. Leach, District 15 - Cabell County was highly instrumental in the establishment of this satellite center along with Senator Edwin J. Bowman, District 1. Funding was made available through the West Virginia Legislature to the Higher Education Policy Commission to Marshall University specifically for the Northern Panhandle satellite extension of the WV Autism Training Center, Marshall University.

The ATC NP will provide the same services as the ATC. It will house its own resource library of books and educational video tapes and will serve as a resource area for teachers and parents to

develop curricular materials. The center will also provide a training area for workshops on educational strategies for learners with autism, meeting space for families and staff and office space for educational specialists.

The Autism Training Center would like to acknowledge the dedication of the families in the Northern Panhandle that made the opening of this center a reality. We also appreciate the collaboration of the Hancock County Board of Education and School Superintendent Danny Kaser. The opening of this satellite center was truly an exciting event. Clearly evident was the support of the community (leaders, educators, friends and neighbors) and the dedication of the families to their children who have autism.



From left to right: Karen Randolph, Educational Specialist; Lynne Shroads, Educational Specialist; Amity Shroads, Secretary; Danny Kaser, Hancock County Schools Superintendent; Chris Fair, parent and Autism Training Center Advisory Board member.

First Active Autism Spectrum Disorders Registry in the United States will be in West Virginia

M. Nawal Lutfiyya, Senior Epidemiologist, Barbara Becker-Cottrill, Executive Director, and Cathy Jo Templeton, Registry Coordinator

West Virginia will be the first state in the nation to establish an autism spectrum disorders registry. Marshall University's Autism Training Center, with funding from the Centers for Disease Control and Prevention, is the entity housing and managing the registry. With the encouragement and support of West Virginia Senator Robert C. Byrd, the WV Autism Training Center began an autism epidemiology program in 1999. In 2001, Henry Taylor, MD, the state's public health commissioner, named autism spectrum disorders a reportable condition of childhood and added it to Legislative Rule 64, series 7, category 11A (3.5.b.2). The registry will become active in late spring, 2002.

Reporting is mandatory for neurologists, pediatricians, family physicians, psychiatrists, clinical psychologists, school psychologists, and school district (county) special education directors. Plans are currently underway to convene an advisory board in the state of West Virginia to aid in all matters of registry development, implementation and monitoring. The board's responsibilities may include, but would not be

limited to, promotion of the project within the community, provision of technical input, service as a conduit for feedback and communication with the reporter community to insure that the registry responds to local needs.

Since 1999, Marshall University's Autism Training Center has been conducting autism spectrum disorders prevalence research. This work has been undertaken in conjunction with the Centers for Disease Control and Prevention. Initially, the establishment of the West Virginia autism spectrum disorders registry will further enable West Virginia to track prevalence rates (the total number of all individuals who have the attribute or disease at a particular time divided by the population at risk). Eventually, once relevant health professionals are sufficiently familiar with screening, diagnosing and reporting procedures, the tracking of incidence rates (the rate at which new events occur in a population) will be possible. Tracking incidence rates over time will shed light on the pressing question of whether or not the occurrence of this disorder is in fact increasing.

Coffee and Conversation Support Group Meets

Coffee and Conversation is an informational group that started at the WV Autism Training Center in June 2001. The group usually meets every month on a Thursday night at 6:00 p.m. in Huntington.

At the meetings we provide the most current information on the latest news articles, conferences and funding sources. Families can tour the library at the break to check out books or videotapes. Before the meeting ends families have an opportunity to discuss any issues or to share an important event in their lives. To maintain a positive tone, Gloria Sage, Educational Specialist Senior provides *Quiet Thoughts with Music* at the end of each meeting. Gloria provides a 5-minute meditation with music to wind down from the day's activities.



Since our meeting is a mix of parents with children of all ages, we have discussed the need for community services after high school and realize the importance of community supports for our children after the age of 18. Therefore, in collaboration with the Huntington Area Autism Society, we have started holding meetings for parents of adolescents and adults to discuss their children's current and future needs. The main topics for discussion revolve around community activities, staffing issues, job training/volunteer positions, summer camps, dental insurance, etc. For more information about Coffee and Conversation contact Angela at 696-2332.

Autism Training Center Advisory Board has a new Chairman

Richard Covert assumed the position of Chairman of the Autism Training Center Advisory Board this past January. Mr. Covert is a teacher in the Boone County school system and has been an active and dedicated member of the Advisory Board for the past 9 years. We welcome him as the new chairman!

news and views
Spring 2002



GOT A HEART FOR AUTISM?

You can make a contribution that would help families who have children with autism. Your monetary donation will be used to purchase books and educational videotapes on autism for the Autism Training Center lending library. This is a free service for registered families throughout the state of West Virginia.

Donations can be made to the "Marshall University Foundation for the Autism Training Center" and mailed to:

Autism Training Center
Marshall University
One John Marshall Drive
Huntington, WV
25755



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Safety in the Home

by Dianna Grueser, Educational Specialist

Often parents of children with autism are concerned about their child’s safety. Children with autism may wander off, put inedible items in his/her mouth, climb on unsafe items or engage in a number of other behaviors that can make a parent’s heart stop each time a disaster is diverted. Although there is no substitution for good supervision to divert problems, some planning and preparation can go a long way to help prevent accidents and injury.

One of the first things I recommend to parents who are concerned about their child’s safety is to have a safe room. This should be a room like a bedroom or play area that is designed with the child’s interest and safety in mind. This room should be free of any items that could cause harm to the child, however plenty of interesting and engaging items should be available to play with. Which room you choose and the items that are in the room are going to depend on your child’s individual needs and behavior. For example, if your child likes to take off out of the door, you would not want the room to have a door that leads to the outside. If your child likes to climb, you would not want anything tall like a bookcase or shelves in the room. Of course, which items you do have in the room is going to depend on your individual child, but some suggestions might include a bean bag chair, a large therapy ball, koosh balls, a mini-tramp (if your child can safely use it without adult supervision) and other items your child enjoys playing with.

Besides having a room that is a “safe zone”, it is also important to use precautions in the rest of the home. Fortunately for parents, there are many items on the market today that can make the business of child proofing a little easier. Some items that are available include outlet, doorknob and stove knob covers, safety latches for cabinets and kits to bolt furniture to the wall. Almost all of these items can be found at Wal-Mart, Lowes or Target. There are also specialty catalogs such as Safety First, devoted to products that make the home safe for children. You might also want to ensure that all doors to the outside are double locked and have at least one lock up high. If you truly have an escape artist, you may want to place an alarm on your outside doors. Some other things that may be helpful include bolting the furniture such as bookcases and dressers, to the floor or walls, and putting unsafe items such as medications, knives or potential choking hazards out of reach and out of sight. Again, when you are deciding what needs to be done to your home to improve safety, your individual child’s behavior and needs should be taken into consideration.

Although none of the above suggestions will ensure your child’s safety, they may help prevent unnecessary accidents. A little prevention can go a long way.

Congratulations to Dominic!



Congratulations to Dominic Rodighiero On Winning FIRST place in the Logan Elementary Social Studies Fair!

Good luck Dominic, in the County Competition!

Marcus

by Terri McDonald, Educator

Three years ago Marcus, his family and those involved in his education went through the Autism Training Center’s Family Focus Positive Behavior Support program and came out a winner!

On 31 May 2001, Marcus graduated with his kindergarten classmates at Beckwith Elementary. His family, friends and all those who have worked with Marcus are VERY proud of him and know he has a very bright future. He is currently attending Fayetteville Elementary.

**HEARTS FOR AUTISM BENEFIT
CONCERT AND TALENT SHOW**

Monday, April 29
7:00 p.m.

The Joan C. Edwards Performing Arts Center
Marshall University



How To Start an Information Support Group

by Angela Bryson, Parent Support Coordinator

news and views

Spring 2002

The word support means to serve as a foundation, maintenance, give assistance to, uphold, aide and corroborate for an individual or group (Random House College Dictionary 1988). For parents of children with autism, support from others can be essential to help us care for our children and ourselves. A support group is beneficial because it provides information, shared experiences and common bonds with members of the group. In this article, I will provide information on how to start, plan and organize a support group. If you do not know of a support group in your area call the Autism Training Center, your local WV Parent Educator Resource Center (PERC), state chapter, or behavioral health center to locate one in your region.

The first and foremost question you should ask yourself is: What is my purpose for starting a support group?

It is a good idea to have a goal established. Ask yourself what you would like to achieve and what population you would like to support. Of course, over time the support group might take on an entirely different direction once members start making suggestions. Today, there are many different groups who provide various supports to their members. Many groups try to incorporate a theme. One group in California meets at the local YMCA and members go swimming or walking after their meetings. Another group in North Carolina meets monthly to discuss and share legislative issues and has committees who lobby for different bills. A group in Oregon acts as an inclusion group for families and meets every month at various community activities around the city.

The second question you should ask yourself is what audience am I trying to target? What population do I wish to serve? Some groups choose to support one type of disability. The current trend is for the support group to serve various disabilities and various ages.

Once you've determined your goals and the population that you want to support, it's time to work out the details. Following are some questions for you to consider when planning a support group meeting.

Where will we meet?

For various reasons, you may not want to use your house for group meetings. You might ask your employer if it is possible to use a conference room. If not, then try the public library, churches, hospitals, your local parent resource center, your child's school, or local YWCA or YMCA.

When will we meet?

Most groups meet in the evening; however, some groups meet in the afternoon and share lunch together. If you decide to do this, be sure to tell your group to bring a bag lunch. You might decide to provide the drinks or snacks. Try to keep your meetings to no more than one hour in length.

Now that you have a place and time to hold meetings you need to develop a game plan. Following is a list of suggestions for new groups:

6 weeks prior to the first meeting:

Make your "TO DO" list and check off each item as it is completed:

- Contact your state organization and let them know of your plans. They can make excellent suggestions, provide information and refer parents in your area who call the state chapter.
- Research current news articles. You can do this through internet or library research or using articles provided by other agencies.
- Because you may not know how many will attend your meeting it is a good idea to have at least 10 copies of all materials ready.
- You may want to contact your local parent resource center for any information they might have to share.
- Make up your brochure or fliers. Be sure to include directions to your meeting.
- If you choose to have a presenter, be sure the presenter will provide good information for your meeting. Also, be sure no fee is involved.

2 weeks prior to the first meeting:

- Send out notices to schools, behavioral health centers and other relevant agencies. Include a contact number if someone wants more information.
- Put an ad in the paper announcing your first meeting.
- Put an ad on the community board on television
- Put fliers in doctors offices, behavioral health centers and on community boards at stores and parent resource centers.

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Mark Your Calendars for these Important Conferences!

CHAMPIONS AND CHALLENGES: 2002 National Conference on Autism Spectrum Disorders Autism Society of America

Marriott Hotel in Indianapolis, Indiana
July 17 – 21, 2002
For more information on the conference, please call the ASA conference hotline at 888-233-2864 or check out the ASA Web site at www.autism-society.org.

2002 ABA Convention
Sheraton Centre Toronto
May 24 – 28, 2002
For reservations call: (416) 361-1000
or 1-800-325-3535
For conference information:
(616) 387-8341/8342/9344
ABA Website:
<http://www.wmich.edu/aba>

Kentucky Autism Training Center
Autism Institute 2002
June 10-12, 2002
Galt House Hotel
Louisville, Kentucky
502-852-4631
<http://www.louisville.edu/medschool/KATC>

Positive Behavior Support in the 21st Century
May 8-9, 2002
Doubletree Jantzen Beach
Portland, Oregon
Contact: 541/346-5314
or
treese@oregon.uoregon.edu



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Information Support Group

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2 days prior to the first meeting:

- Be sure your materials are together.
- Purchase any food items for the meeting.
- Make any last minute copies.
- Develop an agenda.

The day of the meeting:

- Display information
- Arrange table for refreshments
- Arrange tables and chairs for a comfortable meeting environment.
- Have a sign-up sheet.

- Have agendas ready.
- Allow time for introductions
- Allow parents time to discuss their child
- Always end the meeting on a positive note

Remember the amount of time you put into something is usually what much you get out of it. Organizing and running a support group takes time and effort but the rewards are many. The satisfaction of helping another person while you empower yourself with information has its own rewards.

Hats Off to a Powerful Positive Behavior Support Team

by Kim Ramsey, Program Coordinator Senior

Gabe is a second grade student at Pinch Elementary in Kanawha County. Gabe's positive behavior support team includes his proud parents, Jackie and Jeff Moales; teacher, Linda Meszaros; speech therapist, Jan Hartstein; autism itinerant, Marcia Jordan; and occupational therapist, Audrey Hill. Mr. Bob Calhoun, principal, provides Gabe and the team with support and encouragement. This powerful team finds many opportunities to put PBS practices to work!

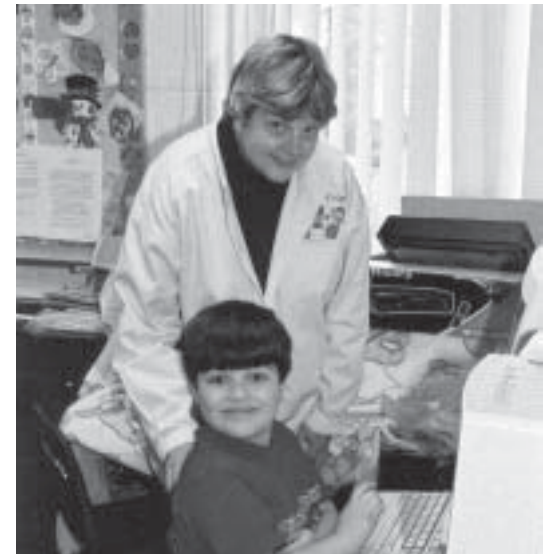
Gabe's teacher, Linda Meszaros, along with Pinch Elementary teachers Karen Urlahs, Betty

Sampson, and Sharon Davidson, co-created "Power Readers." This successful program, funded through a RESA grant, was designed to increase reading skills for young readers while providing opportunities for students to have fun. The group meets after school each week throughout the school year and for half days during July. Teachers and Power Readers enjoy participating in a variety of games and hands-on activities.

Gabe's reading skills have not only increased, Gabe is also learning the importance of teamwork.



CAMP GIZMO!
July 14-18, 2002
Romney, WV
For Information
Contact:
Kathy Knighton or
Ginger Huffman
At 304/558-2696
1-800-642-8541



Don't Rock the Jukebox

by Donna Graham, Mother and Educator

news and views
Spring 2002

Our son Michael's obsession with country music began when he was nine months old. He first discovered Country Music Television (CMT) at 2 a.m. while in pain due to a milk allergy. Nothing seemed to calm him until my husband accidentally turned to the country music station. Within minutes, Michael began to relax almost as if the pain had subsided. It may seem difficult to believe that the soothing sounds of George Jones and Alan Jackson could have such an impact on one's life but it has for Michael.

Since country music was so powerful in helping to calm our son, we began to explore other areas where music could be used as a learning tool to make being in our world a little easier. For instance, we turned the closed caption on when watching CMT and Michael began to read the song lyrics. This gave him a meaningful connection between words and pictures. Then, we expanded on the idea and purchased a subscription to Country Weekly Magazine. This launched Michael's interest and desire to read. Today, at age eleven he is reading chapter books even though his comprehension is challenged due to the absence of pictures in the text.

Next, we learned to combine music with a mirror. It proved beneficial in teaching Michael to dress himself, understand facial expressions, and recognize emotions in general. He would critique himself in the mirror daily. He loved to look like the country music artists he so admired. We purchased western attire such as cowboy boots, hats, shirts, etc. From this, he learned to button, snap, and zip because he wanted to wear that special outfit like Brooks and Dunn.

Once Michael was dressed for the part, he performed. He would sing songs while watching himself in the mirror. It didn't take long for him to memorize the physical moves and facial

expressions of the music artists. This led to our using music videos to explain about emotions. The following was our first sign that Michael understood the relevance of facial expressions and feelings. One afternoon, while riding the bus home from school Michael became rather loud and annoying. The bus driver looked in his rear view mirror at Michael rather sternly. Michael's loud response to the driver was, "Billy don't raise your eyebrows at me!" The bus driver just smiled to himself fully understanding the significance of Michael's words.



Obviously, voice modulation and the control of speech/language for our son has been difficult. Yet, his interest in country music has allowed him the opportunity to enter the world of conversation even with weak receptive and expressive language. He memorizes the lyrics of songs and uses phrases in conversation, sometimes appropriately, sometimes not. The lyrics taught him about idioms and slang phrases that are often taken literally by children with language difficulties. In

addition, his vocabulary has increased dramatically.

In summary, Michael has learned to read, dress himself, and explore various emotions through his obsession with country music. He is currently showing an interest in writing the lyrics to songs and we have hired a music therapist to help him to read music and to play an instrument. Those in the field of autism refer to such obsessions as a special interest to be nurtured, but for our son his love of country music is more of a personal passion. It has helped him to better understand the world around him and in doing so has opened the door for him to be all he can be.

As Alan Jackson would say... "Don't rock the jukebox, I wanta' hear some Jones, my heart ain't ready for the Rollin' Stones."

"In summary, Michael has learned to read, dress himself, and explore various emotions through his obsession with country music."

Dad's e-group established

by an ASA member

A Dad's e-group, for fathers who have children with autism, has been established. The group is an extension of the ASA conference presentation, "For Dad's Only." We hope this will be a valuable asset to the autism community, and offer ideas, support and information to all the Dads out there.

To subscribe, go to: AutDads-subscribe@yahoogroups.com

To post a message: AutDads@yahoogroups.com



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CycleUSA

CycleUSA (Cycle to Understand and Solve Autism) swept across the United States from April to July 2001. It was the first national event for the autism community designated to raise awareness of the disorder and to raise funds for research.

John Keating, a Canadian Police Officer and father of a child with autism was the main cyclist. Other main riders included Bob Scott, an Englishman who works with individuals with autism, and Ron Oberleitner, a New Jersey father whose son has autism. The other three members of the CycleUSA team included Ron Harrison, Jeff Belanger and Huntington, WV's own Bill Harvey, whose son also has autism. Bill was the driver of the Cycle USA truck donated by Aaron's Sales and Lease Ownership. The truck became a safety vehicle, rolling CycleUSA store, and, most importantly, a billboard that called attention to autism all the way across the United States.

The CycleUSA event began on April 27 in New York City and ended 7300 miles, 23 states and 44



Bill and Elaine Harvey reunite after Bill's two and a half months journey for CycleUSA. Elaine is also a member of the Autism Society of America Board of Directors.

major cities later in San Diego on July 19. The event received coverage in 13 of the top 25 US media markets reaching more than 10 million viewers, listeners and readers across the country. CycleUSA was a great success!

On Fatherhood and Disability

by Kent Moreno, Educational Specialist Senior

In the 1970's, the phrase "You've come a long way baby" was adopted by the women's movement to characterize the progress made in the struggle for equal rights and opportunities for women. As the father of an 11 year old girl, Megan, how could I not want "the sky's the limit" for anyone I loved regardless of their gender? In truth, things have come a long way for women with regard to opportunities and this is surely a good thing. This article is about the other side of the coin, the male gender and more specifically, fathers.



Megan and Ben

Benjamin Nelson Moreno, was born on August, 27, 1993. Shortly after he was born, our pediatrician informed us there was reason to suspect that Ben had Down Syndrome. Tests were done and the doctor was right. Fortunately for Ben (and us), both his mother and I worked in the developmental disabilities field. Thus, while we still had to jump through a myriad of hoops in order to get Ben the services he needed to progress, at least we knew where the hoops were and how high we would have to jump.

At 12 months of age, Ben's progress literally halted.

Therapeutically, nothing we did seemed to have any positive effect. It was during this time that I began to wonder whether Ben might have autism as well. A few years later, Ben did receive a diagnosis of autism. We now had more hoops to jump through and more worries.

When Ben was 5 months old, he contracted RSV, a respiratory virus, and had to be in the hospital for ten days. Believing that one of us should always be with Ben, my wife, Mollie, and I made the decision that we would take turns being at the hospital, 24 hours on and 24 hours off. During one of the days I spent in the hospital with Ben, a nurse came in and asked for my wife. I said, "She's not here." The nurse replied, "Oh, is she in the bathroom?" I said, "No". The nurse replied, "Oh, are you giving her a break so she can get something to eat?" I said, "No, I've been here since 7:00 a.m. yesterday morning." The nurse looked somewhat surprised and then proceeded to ask me the questions she assumed only a mother could answer. I have to admit to being a bit offended by the nurse's attitude. Why would she think that only a mother would know the facts of their child's life? I discussed being offended by the nurse's behavior with Mollie. Mollie pointed out that many fathers don't take their children to doctor's appointments or spend the night with a child during a

(continued on next page)

DON'T MISS IT!

Autism Society of West Virginia Conference 2002

March 22 and 23 • Charleston Marriott Hotel

Topics: SCHOOLWIDE POSITIVE BEHAVIOR SUPPORTS AND
SELF DETERMINATION/INDIVIDUALIZED FUNDING

Conference Key Note Speakers:

Dr. Rob Horner

Primary investigator on the Research and Training Center for Positive Behavior Support. Currently is professor of special education at the University of Oregon and a nationally respected expert in the field.

"School-wide Positive Behavior Support: Organizing Schools for All Children"

David Wiens

A Lecturer in Applied Communications at Kwantien University College in British Columbia, Canada

"Real People Real Choices"

Also Presenting

Thomas Powell, Ed.D., and Don Kincaid, Ed.D.

The Conference begins at 8:00 a.m. on Friday, March 22 and
Saturday, March 23 concluding on Saturday at 4:00 p.m.

For more information, call Jeannie Elkins (304) 836-5611 or e-mail: aelkins@citynet.net

On Fatherhood (continued from previous page)
hospitalization and the attitude of the nurse reflected her professional experiences.

During the Woody Allen/Mia Farrow debacle, as both parents were fighting for custody of their biological children, it came out in the news that in court one day, when asked the name of his children's pediatrician and the pediatrician's phone number, Woody didn't know. I immediately thought of our pediatrician and wondered, "How could any parent at a minimum not know who his or her child's pediatrician is?"

A few months ago, I sat in a presentation on the "Portage" model which is being used by the early intervention programs in Alabama. During the presentation, the speakers kept referring to "the mothers" i.e. "we train the moms", "we meet with the mother and the child once a week"... I thought "where are the fathers? Why aren't the fathers being involved in the early intervention services for their own child?" I asked the question to the presenters, "What about involving the fathers?" The response was that while they try to encourage the participation of the fathers and will even schedule visits during the evening hours to accommodate both parents, dads usually are not involved.

Sadly this reflects my own professional experience. In almost 20 years of working in the developmental disabilities field, I have worked with a diversity of fantastic families. Yet I would have to say that, in at least 80% of the families with whom I have worked, the majority of the burden for child care and meeting a child's educational/therapy needs falls to the moms.

If this were the 1950's, the argument might be made "Well the father is the breadwinner and the mom keeps house and cares for the children." The problem is that this is not the 1950's and overwhelmingly in the United States, both parents work. With regard to homes where only one parent works, according to a study done by Chase

Manhattan Bank, the average housewife works 99.6 hours a week.

More bothersome are the statistics regarding paternal performance after a divorce or separation. Seventy-five percent of fathers renege on court ordered child support payments. Many divorced fathers do not have regular visitation with their children. Even worse, I personally know of two situations where upon moving out, each father visited his non-disabled children but did not visit his child with a disability.

Having children comes with a lot of joy, a lot of stress and a lot of work. Having a child with a disability easily doubles the stress and work portion of the equation. Here especially, fathers need to be equal partners in providing care for their children, especially during the "not so fun" times.

The "first-time" divorce rate in the United States is approximately 40 percent. The divorce rate for families who have children with disabilities is somewhat higher than the national average. When one looks at the additional stress and work that comes with having a child with a disability, this is not surprising.

Is the news all bad? "No." I feel comfortable in saying that the majority of fathers are more involved in the lives of their children than were the fathers of 20 or 30 years ago. And there are many fathers who see parenting as being the equal responsibility of both parents. That being said, we fathers as a whole, must do better. Time goes too fast when you're a parent watching your children grow up. How many times have parents thought or said "it seems like just yesterday..." Our children need us. If we as fathers take a more active role in the lives of our children, I predict not only will we have greater opportunity for meaningful experiences with our children but we will also have happier children with higher levels of self-esteem and our marriages will be happier as well. It's time to plant the seeds so that in time, society can say "You've come a long way, fella."

news and views
Spring 2002



First Annual Walk for Autism

A collaboration between the Huntington Area Autism Society, The WV Autism Training Center and the Autism Services Center

**Saturday, April 6, 2002
Huntington Ritter Park**

- Registration at 10 a.m.
- Walk begins at 11 a.m.
- Walkers are encouraged to find sponsors.
- Donations can be made to "The Huntington Area Autism Society"

**Come and help us raise
awareness about
Autism!**

Contact: Elaine Harvey
Ph: 304/736-1479
Email:
bharvey@worldnet.att.net





AUTISM
TRAINING
CENTER AT
MARSHALL
UNIVERSITY

“The plan emphasizes creating a positive learning environment, developing consistent expectations, teaching students, educators and parents about the expectations and reinforcing students for following the expectations.”

School-wide Positive Behavior Support in West Virginia

by Jennifer McFarland, Associate Director of Training
and Francie Clark, Coordinator, State Department of Special Education

Many individuals in West Virginia have either heard of Positive Behavior Support (PBS), participated in training related to PBS or directly benefited from PBS. PBS is based upon a body of research derived from the field of behavior analysis to assist persons with challenging behavior in learning new skills so they do not need to continue to engage in challenging behavior.

One outcome of PBS is the development of a support plan for the individual with challenging behavior. Support plans are developed by a team of individuals who know the person best. The team might include family members, educational/vocational personnel, behavioral health staff, friends, neighbors and the person with challenging behavior. Support plans developed through the PBS process employ strategies that are non-aversive and based upon information collected through a functional behavioral assessment. Person-centered values are at the heart of PBS. Treatment decisions are made considering issues of dignity and respect for the individual. The plan addresses issues of quality of life by assisting the person to develop new skills, providing needed supports and assisting the individual to become a contributing member of their community.

Originally developed to address issues related to individuals with disabilities who exhibited challenging behavior, the field of PBS has expanded to include the application of the process to more diverse populations and settings. PBS has been used to assist in the development of plans with individuals with mental illness, children in foster care, students in general education, etc.

More recently, PBS has been successfully applied to assist in system- and school-wide plans of support in the educational system. School-based teams, which can include representatives from regular and special education, administration, support staff, parents, students and the business community, work together to develop a plan for

their school. As with plans developed for individuals, school-wide plans are based on assessment information collected about the individual school. The plan emphasizes creating a positive learning environment, developing consistent expectations, teaching students, educators and parents about the expectations and reinforcing students for following the expectations. Continued decision making by the school-based team occurs on a regular basis and is data based.

Data collected by schools implementing a PBS approach have shown dramatic decreases in office referrals and detention and suspension rates. As well, improvements in attendance rates and overall parental, staff and student satisfaction have been documented.

This past year the WV Department of Education, Offices of Special Education and Student Services and Assessment, collaborated with the WV State Training Team on PBS (including the Autism Training Center) and the West Virginia University Extension Agency to provide training in school-wide PBS to WV schools. Approximately, 250 people comprising 42 school-based teams attended training in August and October, 2001. The teams represented 28 county school systems and the WV Schools for the Deaf and Blind. Many of the teams developed and began implementing plans. Currently, they are in the process of collecting outcome data. Already, some teams are beginning to see improvements in their school's rate of discipline referrals. A follow-up session will occur in April, 2002. Plans for continued training are currently underway.

This collaborative project is exciting for all West Virginians. Improvements in discipline issues at the school level mean positive changes for all students, including those with special needs.

Computer Corner

by Kent Moreno, Educational Specialist Senior

One of the most prevalent reasons for buying a computer is to have a tool to support learning. As parents or educators we hope that a computer will help our children/students learn more and/or learn better. In this edition of Computer Corner we will

look at two types of software designed to teach academic skills.

Before I begin, I want to make a suggestion. Often times children are placed in front of the computer as a means of providing structure during

(continued on next page)



down time or leisure time. Allowing a child to use educational software without supervision may be counter productive to learning. A good example of this involved my daughter, Megan. When she was about 4, she was playing "Vowel Pond," which is part of Reader Rabbit 2. Vowel Pond has the Reader Rabbit character holding a net and sitting by a pond. The computer says "Sounds like _____" and fish with words written on them swim by. The object is to scoop up only the fish with the words written on them which have similar phonetic sounds to the word spoken at the beginning of the activity. When you click on the fish it gets scooped up and placed in a bucket. If the correct fish is scooped up, it stays in the bucket. If the wrong fish is scooped up, the fish does a "double take" (shakes it's head back and forth) and then jumps out of the bucket and back into the pond. On this day, I walked downstairs to find Megan clicking on only the incorrect fish. Being the concerned father that I am, I attempted to point out to Megan the error of her ways. I told her that she was only supposed to click on the fish with the correct sounds on them. Megan replied that she knew that but it was more fun to watch the fish shake their heads back and forth and then jump out of the bucket and back into the pond.

I learned a good lesson from this experience. Luckily, the incorrect learning which occurred in this instance was easily undone. For a child with a neurological impairment, such as autism, undoing incorrect learning is usually not so easy. The above story is also a good example about what can happen when software is not well designed. In this instance, the consequence for an incorrect response was more entertaining (reinforcing) than the consequences for a correct response and the learner's behavior was shaped to give the incorrect answer.

So, let's talk about software. Basically, there are two types of software designed to teach academic skills, "educational" and "edutainment." Educational software is specifically designed to teach skills and, as such, its main focus is on the presentation of academic material, rather than on sights and sounds or games. Examples of educational software are the Jostens and Laureate programs used in many schools as well as many shareware/freeware programs such as Creepin' Critter Math and Math Stars. Edutainment software is the "Sesame Street" of software. It's designed to be a fun, enriching environment with a diversity of entertaining sights and sounds present throughout the experience. With edutainment software, instruction mainly occurs through playing games. Examples of edutainment software are the "Jump Start" series and the "Math Blaster" series.

Which type of software is best depends on what you desire to accomplish with it. Educational software is more likely to give the learner intensive exposure to academic material and provides many

opportunities for practicing new skills. Also, the principles of good instructional design are more likely to be present in educational software. If the goal is to build strong skills in a particular academic area, then educational software is superior. If the goal is to introduce new material to a child in a fun, non-threatening manner then edutainment software is a good choice. There is no reason why both types of programs cannot be used.

Good Educational/Edutainment Software should allow for high rates of responding or practice. The greater the opportunity for practice the more likely the learner will acquire the new skill. Good educational/edutainment software should be designed so that the learner receives instant feedback as to a correct or incorrect response. Immediate feedback has a dramatic impact on whether a new skill is learned and how quickly that skill is learned. Also immediate feedback significantly reduces the likelihood that a skill will be learned incorrectly.

Good educational/edutainment software should be designed so that the learner is never blocked from giving the correct answer due to the on-screen activity or educational game. The teaching, rather than the game playing must be given first priority. In Math Blaster, there is a section where, written on a flying saucer, is a math problem. At the bottom of the flying saucer are 4 portals. At the top of each portal is a possible answer to the math problem. The object is to fly an astronaut with a jet pack into the portal with the correct answer above it. The problems begin with the learner having to fly the astronaut through a field of space trash before attempting to fly into the portal with the correct answer. When the astronaut hits a piece of space trash, he gets knocked down to the planet's surface and acts dazed for a second or two. Additionally, the flying saucer itself is dropping little laser bombs which must be avoided. Thus, there are many impediments which may block the learner from giving any response, much less the correct one. I talked with a teacher who had Math Blaster in her classroom. Her students would purposely fly the astronaut into the space trash because the consequence for doing so was more reinforcing than the consequence for giving the correct answer.

While both educational and edutainment software can be purchased in a variety of stores, there are a number of sites where shareware/freeware educational programs can be downloaded. After a particular program has been downloaded, give it a try. If you like the program, keep it. Please note that shareware is not free. If you like a shareware program please send the requested amount to purchase the software from the developer. Also, don't discount shareware/freeware because it's less expensive or not as fancy. Two of the best programs I've found for teaching math skills, "Creepin' Critter Math" and "Math Stars," are both shareware.

Some sites worthy of investigation include:

www.shareware.com

www.tucows.com

www.crayons.com/links.html

www.winsite.com

www.shareware.miningco.com

www.nickjr.com

www.trollbridge.com

www.download.com

www.macshare.com/sftwre.html

In our next newsletter, I will provide information on how to select educational/edutainment software based on its instructional design.

April is Autism Awareness Month!

Help teach others about autism. Call the West Virginia Autism Training Center (1-800-344-5115) and request autism awareness brochures. Give them to everyone you know!



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- And More!