State looks at eligibility for young children

At PACESETTER press time, Minnesota was expected to change its eligibility criteria for special education services affecting children from birth through age 2. The new criteria include only those children who meet the federal definition of an infant or toddler with a disability under Part C of the Individuals with Disabilities Education Act (IDEA 2004).

The federal Office of Special Education Programs (OSEP) notified Minnesota in 2004 that to continue receiving Part C funds, the state must comply with federal law by June 30, 2007.

According to the Minnesota Department of Education (MDE), under new provisions Minnesota children from birth through age 2 are eligible for services, if they

- Meet the criteria of a disability category under Part B of IDEA, or
- Demonstrate a developmental delay in one or more areas. (Previously in Minnesota, it was two or more areas), or
- Have a medically diagnosed condition or disorder that has a high probability of resulting in a developmental delay, regardless of whether the child has demonstrated need or delay. (Previously in Minnesota, a child had to demonstrate need or delay).

MDE expects an additional 1,700 Minnesota children will be served with the eligibility change. The figure is based on data that shows other states serve an average 2.6 percent of the birth through 2 population under Part C. In Minnesota, it has been 1.75 percent (December 2006). The expected cost increase runs between $1.9 million in 2008 to $5.3 million in 2011.

Other changes in Minnesota rules affect evaluation procedures and transition services as children move from Part C coverage to Part B. Minnesota does not serve “at-risk” children under the federal definition in IDEA, nor will it in the new criteria.

Minnesota adjusts special ed rules

By Michael Carr

The Minnesota Department of Education (MDE) plans a public hearing in mid-August on its final proposal for revising special education rules. MDE accepted comments on the proposal through June 30.

Minnesota rules will change to meet requirements of the federal Individuals with Disabilities Education Improvement Act of 2004 (IDEA 2004). Each state can choose to comply with the minimum requirements of IDEA and its regulations or go beyond the federal requirements in their own laws, such as Minnesota has done in a number of areas.

“It is important to understand that Minnesota has been a leader in special education for more than half a century,” said Paula F. Goldberg, executive director of PACER Center. “PACER Center wants to ensure that this rule changing process retains Minnesota’s high standards so children with disabilities continue to

(Continued on page 2)
Funding increase to help special education

By Michael Carr

Minnesota Gov. Tim Pawlenty has signed into law an education-funding bill that appropriates the largest special education increase in many years.

It includes a $329 million increase in the 2008-09 biennium budget and $448 million in the 2010-11 budget. In addition, the bill increases funding for the regular education general formula, all-day kindergarten, and early childhood services.

Many education stakeholders considered the funding a dramatic improvement for local schools. In the past, numerous districts moved dollars from other education accounts to meet special education obligations, because special ed funding was frozen in 2004.

The governor also signed two education provisions that could affect children with disabilities.

A Response to Intervention (RTI) provision includes general education funding that will train school personnel how to provide an early intervening services program for all children. It also provides services for students currently not receiving special education but whose statewide test scores indicate they need academic assistance.

Another provision sets up a task force to examine and make recommendations where Minnesota special education laws exceed federally mandated minimums. It is similar to a current task force spearheaded by the Minnesota Department of Education.

PACER Center and other special education stakeholders will work with the Bureau of Mediation Services, which will convene the new task force.

Other new legislation requires Minnesota school districts to implement a bullying-prevention policy that includes cyberbullying (bullying via the Internet). As the National Center for Bullying Prevention, PACER Center strongly supported the legislation, providing supporting evidence and attending legislative sessions regarding the bill.

PACER’s popular Web site www.PACERkidsagainstbullying.org has received national recognition and thousands of visitors.

Minnesota adjusts rules

(Continued from page 1)

reach their full potential,” she added.

Examples of Minnesota rules about which parents and advocates for children with disabilities have expressed concern include:

Short-term objectives: The federal law requires only goals (with short-term objectives only for some students with the most severe cognitive disabilities), and the state statute references both goals and objectives. Current Minnesota rules confirm that the objectives are necessary as short-term steps to reaching the yearly goals.

Evaluation reports: Federal law does not define the evaluation reporting requirement, but Minnesota law defines it in detail.

Behavioral Intervention Plans: Although the federal law references the need for Behavioral Intervention Plans (BIPs) for some children, the Minnesota law more specifically requires the BIP to be part of a child’s Individual Education Program (IEP), if the child needs the intervention.

Transition services, once academic criteria are met: The federal law suggests that once a student has reached the academic requirements necessary to graduate, he or she may exit from special education. The federal law also identifies the need to address transition services but not as clearly as does current Minnesota law. The Minnesota law states that if a student’s IEP goals have not been met, the student should receive transition services, regardless of whether he or she has met the academic requirements for graduation.

Specific learning disabilities: The criteria for determining eligibility for a specific learning disability in Minnesota must change to meet federal requirements. PACER has recommended that special education stakeholders meet to discuss the issue on specific learning disabilities.

Save the date:
PACER Benefit
April 27, 2008
Thanks to OLSON, a Minneapolis-based creative agency, PACER Center has a new logo, tagline, and look to its materials. (See it throughout this issue of PACESETTER and in future PACER materials.) OLSON led a pro bono in-depth branding process that also involved Gestalt, a design agency, and Straight Line Theory, Web site designer. Scott Heimes, a member of PACER’s Marketing Committee, initiated the project.

“PACER Center does tremendous work for many different people, so one of our challenges was to identify the ultimate key audience. The positioning, ‘Champions for Children with Disabilities,’ clearly articulates what PACER stands for,” said Kevin DiLorenzo, president, OLSON. “The new brand identity reflects that position and demonstrates the vitality and energy of PACER Center.”

“We so appreciate OLSON’s thorough process and contribution of many hours that included focus groups, followed by a creative and collaborative approach in finalizing the final brand, ‘Champions for Children with Disabilities.’ Everyone involved is thrilled with the outcome! We can’t thank OLSON enough for donating their expertise to PACER,” said Mary Schrock, PACER development director.

Working with the project from OLSON were DiLorenzo; Bob Molhoek; Stephanie Hoch; Scott Dahl; Jeff Berg; Amy Jo Preisler; and Zack Keenan. Jay Mathews and Andrew Benson represented Straight Line Theory, and Gestalt was represented by Jeffrey Ess.

In addition to Heimes, members of the marketing committee are Mariko Miyamoto, Robert Goldberg, Michelle Fitzgerald, Jack Guze, Michael Keller, Laura Keller, John Lick, Paul Thibeau, Nick Tietz, Jessica Phillips, Bob Anderson, and Scott Young.

When people refer to PACER Center as “an award-winning organization,” they can point to the following recognitions received by PACER staff and projects:

**STAR AT Award for Excellence**
The statewide award was made to PACER’s Simon Technology Center in April. A State Capitol ceremony honored PACER and others for their commitment to removing barriers to independence for people with disabilities through assistive technology. STAR is Minnesota’s Assistive Technology Act Program.

**Minnesota Council of Nonprofits Dot.Org Award**
PACER’s bullying prevention Web site received honorable mention. The site, www.PACERkidsagainstbullying.org, has received thousands of visits—and kudos—from across the United States since its launch last year.

**Larry Wilson University of Minnesota’s College of Education and Human Development Alumni Society Award**
Paula F. Goldberg, PACER Center’s executive director, was honored for demonstrating excellence in educational achievement outside the traditional school environment. Goldberg is a co-founder of PACER Center, which is now a national parent center with more than 30 programs.
Make health information part of any

By Amy Dawson

If you plan to go out of town this summer, remember to pack an emergency information form, or “EIF” for your child with disabilities or special health needs. When you load the car, put the EIF in the glove compartment. In fact, whether you’re traveling or not, put one in mom’s purse, dad’s jacket pocket, and the child’s backpack, as well.

The American Academy of Pediatrics created the emergency information form to transfer critical information about children with special health care needs. Any child with a health care need may benefit from having an EIF, whether the child has food or drug allergies, asthma, diabetes, is oxygen dependent, or has chronic heart failure. The EIF is a quick and easy way to inform an emergency room doctor about your child’s diagnosis, baseline statistics, and the proper course of action for anticipated crises.

You may think you don’t need such a form for your child, because you intend to be nearby if he or she needs emergency care. Consider this:

“I had my son’s pulmonologist fill out the emergency information form in case I was ever out of town and my husband or a personal care attendant had to take him to the hospital,” said one mother.

Instead, she found herself in the emergency room trying to explain her sick son’s complex medical status. She had been awake for the better part of two nights caring for him and was so stressed out and exhausted that she had trouble explaining his multiple diagnoses and baseline vitals coherently. Fortunately, she remembered the EIF was in her son’s backpack—she just never thought she would need to use it herself.

“I am so glad that I had it with us,” she said.

The emergency room doctor was glad, too, she recalled. The EIF helped him understand the boy’s condition,

Vocational Rehabilitation offers transition support

By Sean Roy

“Transition,” or the movement from school to adult roles and community living, is a crucial time for youth with disabilities and their families. Transition experts recommend a solid plan be in place to ensure a smooth segue between school and adult supports.

Competitive employment affects the ability of youth with disabilities to live independently and contribute to their communities. Employment not only provides wages but also combats isolation and provides much-needed social outlets. Studies show, however, that adults with disabilities experience much higher rates of unemployment and under-employment than do their peers without disabilities.

There is help. Families and youth can explore options found within state Vocational Rehabilitation (VR) agencies. VR is funded under Title I of the federal Rehabilitation Act of 1973 and is mandated to help eligible individuals with disabilities prepare for and engage in gainful employment that is consistent with their strengths and interests.

VR counselors can work closely with school districts, as well as families, to help in transition planning for youth with disabilities. Transition experts advise parents and youth to invite VR counselors to Individualized Education Program (IEP) meetings at least two years before the student exits school. VR counse-

Project Pride addresses employment

Project Pride (PACER’s Rehabilitation Act Information and Disability Education) provides information and training about the Rehabilitation Act for youth with disabilities, their families and professionals.

“PACER’s transition staff helps families explore options for postsecondary education and careers that will fit their youth’s interests and skills,” said Judy Moses, Project Pride co-coordinator.

Project PRIDE workshops and materials assist as well. For example, the popular The Road to Work, a book for youth and adults on issues related to the Rehabilitation Act, is now in its third edition. (See page 22.)

Individualized programming is recognized as best practice in employment programming and is a strength of VR activities, she continued. Therefore, it will not be identical from person to person, she explained.

“Situations vary, so parents should always explore the program themselves instead of basing decisions on what other recipients have received,” she said.

Following are ways to reach Minnesota’s VR program. VR is located in all of Minnesota’s Workforce Centers. Parents can also

■ ask their youth’s school case manager about VR
■ call Minnesota VR at (651) 296-5619 or (800) 328-9095 or visit www.deed.state.mn.us
■ call PACER’s transition staff at (952) 838-9000 or (800) 537-2237 or visit www.pacer.org

By Amy Dawson

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The EIF is easy to complete.

How do you obtain an emergency information form? Ask your child’s primary care provider. This might be a pediatrician or a specialist. If your child has complex needs, you may want to ask more than one doctor to complete an EIF or review it.

Blank interactive forms are on PACER’s Web site at http://www.pacer.org/health/index.htm under “Resources available to you.”

Sample EIFs that illustrate how useful the tool can be for specific cases are at American Academy of Pediatrician’s Web site at www.aap.org. Give your child’s physician a few weeks notice to complete the form. Update it at least annually or more often if your child’s condition changes significantly. Then make multiple copies and dispense them liberally—the family car, a favorite jacket, your child’s school, camp, child-care center, neighbor, and grandparents. Leave a copy in a convenient spot at home, in case you need to call an ambulance.

Hopefully, you will never need the EIF. If you do, however, your child may receive better care because you are prepared.

Amy Dawson is the coordinator of PACER’s Health Information and Advocacy project. The project offers information on health care systems, resources, and advocacy for families of children and youth with special health needs and disabilities.

STC staff conducts workshop series

Parents and professionals from two Greater Minnesota regions received information and hands-on training in assistive technology through a series of PACER Simon Technology Center (STC) workshops, funded by Minnesota Department of Education grants.

The series were conducted in Brainerd and Mankato through the spring. They covered a range of topics from what is available in assistive technology to how to find funding for it.

STC’s library loans software, assistive devices

The PACER Center’s Simon Technology Center Library offers an inexpensive way to preview software and popular assistive technology devices for children and young adults with disabilities. The Library contains more than 2,000 pieces of software, as well as many assistive technology devices to use at home or school.

The Library’s software emphasizes educational skills, including reading, writing, math, science, independent living skills, keyboarding, social studies, problem solving, cause-and-effect, and other access methods.

Assistive technology devices available for loan include touch screens, switches, alternative keyboards, trackballs, alternative and augmentative communication devices and much more.

Library hours:
Tuesdays – 12 noon to 6 p.m.
Saturdays – 10 a.m. to 4 p.m.
Closed Holidays

Membership fees:
$50 annually for an individual or family of a child with a disability. Scholarships are available.
$100 annually for professionals.

To view the Library Catalog online visit: www.pacer.org/stc/atfinder

Visit www.pacer.org
By Dixie Jordan

The dust is beginning to settle. With final regulations for the Individuals with Disabilities Education Improvement Act (IDEA 2004) issued several months ago, parents and professionals have a more defined picture of what the changes in the nation’s special education law mean to children with disabilities.

Congress reauthorized IDEA, with amendments, in late 2004. The regulations, or interpretation of the statute (law) by the U.S. Department of Education, became effective last October.

In most instances, the regulations closely track the IDEA 2004 statute.

Changes in the law align it more closely to the No Child Left Behind Act (NCLB). They also affect how Individualized Education Programs (IEPs) are developed, implemented and reviewed. Because the IEP defines the specialized services that a child with a disability needs to be successful, changes in the IEP process are important for parents to know. Some of the changes include:

**Bringing state standards into IEP planning**

Under NCLB, all children, including those who have disabilities, are required to participate in statewide and districtwide assessments or testing. Each state must have assessments that are accessible to the broadest range of children possible and must include alternate assessments for those students who are not able to participate in the regular assessments. Children with disabilities must be provided with reasonable accommodations, when necessary, to accurately measure academic achievement.

The IEP team may not exempt children from taking state assessments. The role of the team is to determine the manner in which a child will participate in these assessments, including whether alternate assessments are needed. Statewide academic achievement assessments

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ALLIANCE project conducts national institutes

When one of the nation’s 6.7 million children with a disability faces an education-related issue, his or her parent can seek help with a phone call to the nearest parent center. There are more than 100 across the United States.

As the national center of the Technical Assistance ALLIANCE for Parent Centers project, PACER provides information, training and resources to the parent center leaders and staff who take those calls.

One method is by sponsoring ALLIANCE institutes—two-day seminars on how to make parent centers more effective. The subjects vary from year to year and range from management to assistive technology and legislative and policy issues.

This year’s institutes include “Building Technology Capacity in Your Parent Center” at PACER Center in June, and leadership institutes “Building Strategic Relationships to Create Change” and “Management: Sustaining Projects and Personnel,” both in San Francisco in August.

The technology institute focused on technology options for parent centers and parents they serve. It included training on alternative (long distance) learning, assistive technology, software, networking, creating Listservs, and Web site design.

The strategic relations institute will offer practical suggestions for developing coalitions, disseminating information, and working for systems change to benefit families of children with disabilities.

Both August institutes will address managing, motivating, and mentoring staff; managing financial and fiscal details; accepting and inspiring change; and building and maintaining stability within the parent center.

To learn more about the ALLIANCE and parent centers across the nation, visit www.taalliance.org or go to www.pacer.org and click on the link to the ALLIANCE project.
2004 and their child’s IEP

will help parents, schools, and the state to understand whether children with disabilities are achieving to high standards. Parents can help prepare their child for state assessments by talking about the purpose of the testing and making sure that their child attends school on test days.

Any accommodations or modifications that a child needs to receive appropriate day-to-day education must be written into that child’s IEP. The IEP team must also consider what accommodations the child may need for standardized testing. If a child’s IEP team, which includes the parents, determines that the child cannot participate in the regular assessment, the child may be provided with an alternate assessment. In this instance, the team must include a statement in the IEP document that explains why the child cannot take the regular statewide assessment and why the alternate assessment chosen by the team is appropriate.

Concerning assessments, parents need to know:

- what assessment options may apply for their child.
- whether any alternate assessment provided aligns with their state’s academic content standards. There are several kinds of alternate assessments. The first is alternate assessment that meets the state’s academic content standards. Many states, including Minnesota, also permit a small group of students to take alternate assessments that are aligned to alternate standards rather than the regular state standards.
- how the IEP team can help a child to reach grade level in reading, math, science, and writing. These strategies should be included in the IEP.

- the accommodations the child needs to progress toward his or her IEP goals and to participate effectively in statewide assessments. The accommodations will be the same for both purposes. The IEP must include any accommodations to be provided.

Changes in IEP team meetings

Under the new IDEA regulations, a member of the IEP team may be excused from attending an IEP meeting—if both the parent and school agree. If the team will discuss issues from the team member’s area of expertise, he or she must submit written information to the parent and the team before the meeting takes place. The parent must agree, in writing, to excusing the team member.

The new regulations also permit different ways for IEP meetings to take place, such as through conference calls or video conferencing. Once the annual IEP meeting is conducted, a parent and school district may agree to additional changes in a child’s IEP without having another meeting. If parents agree to make changes to the IEP without a meeting, it is important for them to request and obtain a copy of the new IEP changes. Any changes to the document must be recorded as amendments to the IEP.

A previous IDEA requirement that IEP teams develop short-term objectives for each child’s annual IEP goals no longer exists under federal law. (Many states still require the short-term objectives under state law.) Under IDEA 2004, short-term objectives are required only for children who are taking alternate state assessments aligned to alternate achievement standards. Minnesota special education rules are in the process of being revised, but current rules contain a requirement for short-term objectives for all children with disabilities. Parents will want to check their state rules to determine their state’s position on short-term objectives. IDEA does require a statement of how progress toward the annual goals will be measured.

Educational placements

When a child transfers between school districts, services comparable to those in the IEP must be provided by the new district. The services must continue until the previous IEP is adopted or a new IEP is developed and implemented. If a child transfers to another state, comparable services must be provided until eligibility in that state is established and a new IEP is developed. These new provisions will help ensure that children with disabilities do not go without services while new assessments are being considered or implemented.

Progress reports

Parents must receive progress reports on the achievement of their children with disabilities at least as often as the parents of children who do not have disabilities. These reports on their children’s progress. The IEP team will also review the IEP at least once per year to determine if the annual goals for the child are being met and to revise the IEP as needed. According to IDEA 2004, it is no longer required to report whether the progress is sufficient to meet the goal by the end of the school year. Current Minnesota law does require a report on sufficient progress.

Dixie Jordan is a PACER project coordinator and national speaker. An expert on special education law, she has coordinated PACER Center’s emotional-behavioral disorder program, the Families and Advocates Partnership for Education project, and the American Indian Parent Network. In addition, Jordan has written national curricula on IDEA 2004 and NCLB for PACER.
Standardized testing: Understanding

The following information is current as PACESETTER goes to print. With new legislation and regulations, however, assessment requirements may change. PACER staff suggest that families

- Contact PACER with questions
- Work with their child’s Individualized Education Program (IEP) team to determine how well the school is educating their child.

By Barb Ziemke and Carolyn Anderson, PACER staff, parent advocates

“I am glad that my son must participate in standardized testing,” said the mother of a Minnesota student with a disability. “It means that students with disabilities are included when it comes to holding schools accountable. It shows me that the school has high expectations for my child, as well as for all students,” she continued.

In public schools across the nation, standardized testing is a regular part of the school year. Minnesota’s assessment program is designed to

- Measure how well students, as a group, are achieving, according to Minnesota Academic Standards.
- Measure students’ progress, as a group, over time.

The federal No Child Left Behind (NCLB) education law, as well, says that public schools in each state must set academic standards and show that students are making progress toward meeting them.

For a student with disabilities, preparation for the testing usually begins months in advance when the Individualized Education Program (IEP) team considers what accommodations the student will need to measure his or her proficiency accurately.

“Accommodations” allow a student to complete the same test as other students but with adjustments that do not change the meaning of the student’s score. “Modifications” are changes in the actual tests, which is not allowed in accountability testing. Some students with the most significant cognitive disabilities will take an alternate assessment (see related article on page 6).

General accommodations

It is important for a student’s parents and other members of the IEP team to know about state and district academic standards and assessments. As they consider what testing accommodations to include in the IEP document, it will help for them to

- Review the accommodations that increase the student’s access to the general education curriculum.
- Look at what accommodations the student routinely uses in daily classroom instruction.

Accommodations for testing

In taking the Minnesota standardized tests, a student with disabilities may

NCLB regulations give new option for standards and tests

States have the option to develop less demanding academic standards and school accountability tests for certain students with disabilities, according to a new No Child Left Behind (NCLB) regulation announced in April.

The new test option affects students with disabilities who can achieve high academic standards, even though it may take them longer to reach grade level than it takes their peers. Students choosing the option must have been receiving special education services under an Individualized Education Program (IEP). The new tests are in addition to established alternate tests, such as the Minnesota Test of Academic Skills (MTAS), for students with the most significant cognitive disabilities.

Dirk Mattson, director of research and assessment for the Minnesota Department of Education, said he has sensed broad desire for the new assessment in Minnesota. Should the state develop one, it would take people and money, and he would not expect to see it done before 2009, he said.

Standardized testing is done to hold public schools accountable for educating all students. The NCLB law requires states to establish academic standards (levels of achievement) and companion assessments (tests) to show that students are making Adequate Yearly Progress (AYP) toward meeting the set standards.

States that choose to modify standards under the new NCLB regulation can design new assessments based on them and count the test results toward Adequate Yearly Progress, with some limitations.

The regulation says that states may count proficient (passing) and higher test scores on the modified tests toward Adequate Yearly Progress for up to 2 percent of all students. Nationally, that equates to up to 20 percent of students with disabilities, although the percentage varies among states.

Previously, states could count up to 1 percent of the alternate scores that are proficient and above toward Adequate Yearly Progress.

In states using both the new testing option and the established alternate test for students with the most significant cognitive disabilities, up to 30 percent of students with disabilities could be affected.
Parents of students with disabilities often ask, “What standardized tests should my child be taking?”

“The simplest answer is that most students will take the Minnesota Comprehensive Assessments—Series II [MCA-IIs] for school accountability,” said Barb Ziemke, a parent advocate at PACER Center. “Only students with the most significant cognitive disabilities will take the MTAS [Minnesota Test of Academic Skills],” she said.

For students with disabilities, the Individualized Education Program (IEP) team determines how the student will participate in testing for accountability and for graduation. The IEP team determines appropriate accommodations and writes them into the IEP document.

Following is brief view of Minnesota’s standardized tests for school accountability and graduation.

School accountability tests

The Minnesota Comprehensive Assessments—Series II (MCA-IIs)

The tests help Minnesota school districts measure student progress toward the state’s academic standards. Students take reading and math tests in Grades 3-8, 10 and 11. Beginning in 2008, they will take science tests in Grades 5 and 8 and once during high school, depending on when students complete their life sciences curriculum. Accommodations are allowed.

The Minnesota Test of Academic Skills (MTAS)

It is Minnesota’s alternate assessment that measures the reading, mathematics, and science progress of students with severe cognitive disabilities. The standards are different from the Minnesota Comprehensive Assessments—Series II, although they are based on the general curriculum. Students take the tests in Grades 3-8, 10, and 11.

Graduation tests

Basic Standards Tests (BSTs)

Minnesota is phasing out the Basic Standards Tests, replacing them with the graduation portion of the Minnesota Comprehensive Assessments. The Basic Standards Tests assess reading, mathematics, and writing. Students who entered Grade 8 before 2005-06 or earlier must pass them to receive a public high school diploma. The class of 2009 will be the last class required to pass the Basic Standards Tests to graduate. Accommodations, but not modifications, are allowed on the initial test, which establishes a baseline skill level for the student. Both accommodations and modifications are allowed thereafter.

A student may pass the tests at an individual level, as determined by the IEP team.

Graduation-Required Assessments for Diploma (GRAD)

A component of the Minnesota Comprehensive Assessments—Series II, the Graduation-Required Assessments for Diploma measures the reading, writing, and math proficiency of high school students. Students in the class of 2010 are the first ones required to pass each of the tests to graduate from a public school in Minnesota. Students may take the tests more than one time.

Another way for a student to meet the graduation requirement would be to pass the Minnesota Test of Academic Skills, as determined by the IEP team.

Here’s a look at Minnesota’s standardized tests

Parents of students with disabilities often ask, “What standardized tests should my child be taking?”

“The simplest answer is that most students will take the MCA-IIs [The Minnesota Comprehensive Assessments—Series II] for school accountability,” said Barb Ziemke, a parent advocate at PACER Center. “Only students with the most significant cognitive disabilities will take the MTAS [Minnesota Test of Academic Skills],” she said.

For students with disabilities, the Individualized Education Program (IEP) team determines how the student will participate in testing for accountability and for graduation. The IEP team determines appropriate accommodations and writes them into the IEP document.

Following is brief view of Minnesota’s standardized tests for school accountability and graduation.

School accountability tests

The Minnesota Comprehensive Assessments—Series II (MCA-IIs)

The tests help Minnesota school districts measure student progress toward the state’s academic standards. Students take reading and math tests in Grades 3-8, 10 and 11. Beginning in 2008, they will take science tests in Grades 5 and 8 and once during high school, depending on when students complete their life sciences curriculum. Accommodations are allowed.

The Minnesota Test of Academic Skills (MTAS)

It is Minnesota’s alternate assessment that measures the reading, mathematics, and science progress of students with severe cognitive disabilities. The standards are different from the Minnesota Comprehensive Assessments—Series II, although they are based on the general curriculum. Students take the tests in Grades 3-8, 10, and 11.

Graduation tests

Basic Standards Tests (BSTs)

Minnesota is phasing out the Basic Standards Tests, replacing them with the graduation portion of the Minnesota Comprehensive Assessments. The Basic Standards Tests assess reading, mathematics, and writing. Students who entered Grade 8 before 2005-06 or earlier must pass them to receive a public high school diploma. The class of 2009 will be the last class required to pass the Basic Standards Tests to graduate. Accommodations, but not modifications, are allowed on the initial test, which establishes a baseline skill level for the student. Both accommodations and modifications are allowed thereafter.

A student may pass the tests at an individual level, as determined by the IEP team.

Graduation-Required Assessments for Diploma (GRAD)

A component of the Minnesota Comprehensive Assessments—Series II, the Graduation-Required Assessments for Diploma measures the reading, writing, and math proficiency of high school students. Students in the class of 2010 are the first ones required to pass each of the tests to graduate from a public school in Minnesota. Students may take the tests more than one time.

Another way for a student to meet the graduation requirement would be to pass the Minnesota Test of Academic Skills, as determined by the IEP team.
Second Mann Symposium planned for August

Mann Symposium committee members, seated from left, are Barry Garfinkel, M.D. Center for Developmental Psychopharmacology; Roberta Mann Benson, Ted and Roberta Mann Foundation; Paula F. Goldberg, PACER Center; and Harold Benson, retired school administrator and consultant. Standing from left: Mary Crawford, Mann Foundation; Mary Schrock, PACER Center; Cynthia Shevlin Woodcock, Minnesota Department of Education; Mari Carlson, Mt. Olivet Lutheran Church; and Kerry Jo Johnson, PACER Center. Not pictured: Andy Barnes, M.D., University of Minnesota; Dan Jensen, Public Radio International; Renelle Nelson, PACER Center; L. Read Sulik, M.D., CentraCare, St. Cloud Hospital Behavioral Health Clinic; Virginia Richardson, PACER, and Julianne Amendola, Minnesota Institute of Arts.

Mann Foundation brings national speakers to local audience

The Second Annual Ted and Roberta Mann Foundation Symposium for Children’s Mental Health and Learning Disabilities is bringing national speakers to the Twin Cities to inform parents and general education teachers about childhood learning disabilities and mental health disorders.

The symposium is cosponsored by PACER Center. Registration and a waiting list are filled for the Aug. 15 event.

Symposium speakers will cover ADHD, anxiety, depression, emotions and behavior, learning disabilities, managing resistance, and working with schools. They include

J. Stuart Ablon – Harvard Medical School, CPS Institute at Massachusetts General Hospital, Center for Collaborative Problem Solving, and co-author of Treating Explosive Kids: The Collaborative Problem-Solving Approach;
Jeff Q. Bostic, M.D. – Harvard Medical School, Massachusetts General Hospital, and Massachusetts Child Psychiatry Access Project;
Winelle Carpenter – Teacher,
educational consultant, researcher, and author of Become Your Own Expert! a self-advocacy curriculum for youth with learning disabilities.

LeDerick R. Horne – Project Eye-to-Eye, a mentoring program for students with learning disabilities. Horne has a severe learning disability, but he became an outstanding student and graduated from college with honors.

John W. Maag – University of Nebraska, an inspirational speaker who specializes in the education and treatment of children with emotional and behavioral disorders.

The ongoing mission of the Ted and Roberta Mann Foundation is to keep alive the legacy established by the late Ted Mann, theater owner, movie producer, businessperson, and philanthropist. Administered by Mann’s eldest daughter, Roberta Mann Benson, and her two children, John and Blythe Brenden, the foundation continues to make a difference in the lives of many.

The content of the symposium is of particular interest to Roberta Mann Benson from a professional standpoint. She received her master’s degree in psychotherapy at the Adler Graduate School and is currently working on her doctorate at St. Mary’s University in the field of education. Mann Benson is also certified as a life coach.

PACER designated a CFC recipient

PACER Center is eligible for donations made through the Combined Federal Campaign (CFC), the workplace charity campaign for federal civilian, military, and postal employees. PACER will be listed under “National/International Independent Organizations” in local campaign charity lists.

PACER’s code number for CFC contributions is 12272, and donors should use the code in designating their gift to PACER.

PACER is a tax-exempt 501(c) (3) nonprofit organization and can also receive donations through United Way campaigns, although it is not a United Way agency. United Way pledge cards have a location in which to write PACER’s name and address.

For information on how to support PACER through the CFC, United Way, or other workplace charity campaigns, call PACER at (952) 838-9000 or visit www.pacer.org and click on “How You Can Help or Donate.”
25th Benefit is an exceptional event

What a way to celebrate a Silver Anniversary! PACER Center’s 25th Annual Benefit saw record attendance, record support—and record excitement with “American Idol” vocalist and Academy Award winner Jennifer Hudson in her Minnesota debut. The event, with proceeds supporting PACER projects for children with all disabilities, was May 5 at the Minneapolis Convention Center.

In addition to Hudson’s performance, the Benefit featured a huge silent auction and a spectacular live auction, with items such as a two-year lease on a Mercedes Benz SLK 280 sports car, tickets to the Notre Dame-USC football game (including private jet), and tickets and transportation to the 2008 Grammy awards.

“This fantastic Benefit is the result of the hard work of an outstanding Benefit committee, the wonderful support of PACER’s many dedicated friends, and the commitment of the community to help children with disabilities,” said Paula F. Goldberg, PACER’s executive director. “It shows that people in Minnesota care about all children.”

Patron Party Sponsor was the Starkey Hearing Foundation. Dinner Sponsors were Steve and Mary Sue Simon and Family. Reception Sponsor was Target Corporation, Friend of PACER Sponsor was Phyllis Heilicher, Valet Sponsor was Best Buy Company, Ticket Sponsor was U.S. Bank, and Live Auction Sponsor was Allen and Kathy Lenzmeier.

The next PACER Benefit is April 27, 2008.

Meeting performer Jennifer Hudson, were (back, from left) Ron Voss; PACER Executive Director Paula F. Goldberg; Hudson; and Robert Goldberg, Gold Marketing Group. Seated are Mary Schrock, PACER Director of Development, Sarah Young, and Scott Young, PACER’s Marketing Advisory Board.

Amelia Santaniello (left) and Frank Vascellaro (rear), WCCO-TV anchors, were Benefit emcees. Benefit co-chairs were Danna Mirviss, Colleen McGough Wood, and Jessica Broyles.

Corporate Sponsor Committee members, below, included (back row) Don McNeil, PACER board president; Jim Oricchio, committee co-chair; Jack Cameron; and Hayes Batson. In front are Richard Perkins and Don Davidson, committee co-chair.
At right, U.S. Sen. Amy Klobuchar chatted at the dinner with Kristi J. Wieser and Heidi Kraemer (back to camera), both of IBM. Sen. Klobuchar and Wieser are members of PACER’s Advisory Board, and Kraemer is on PACER’s National Business Advisory Board.

Participating in Benefit events were at left, Ginger and Keith Guggenberger of the Starkey Hearing Foundation, Patron Party Sponsor; middle left, Phyllis Heilicher, Friend of PACER Sponsor, and granddaughter Sophie Mirviss; and below, Gary and Patrice (Silent Auction co-chair) Alkire.

Meeting with performer Jennifer Hudson following her performance were, rear from left, Jim (Corporate Sponsor co-chair) and Donna Oricchio; Muffy Bennett (Advisory Board); Hudson, Mara Bennett; Melanie (Advisory Board co-chair) and Chuck Barry, Angel sponsors; and Mary (Advisory Board) and Jim Frey, Angel sponsors. In front are Brian Gruidl; Kate Peerenboom; Cathy and Mike Gruidl; and Joanne and Don Davidson (Corporate Sponsor co-chair and Advisory Board).
PACER Benefit
is
April 27, 2008

Helen and Derm (Advisory Board) Rowland are long-time PACER supporters.

Above, Julie and Charlie Weaver (PACER Advisory Board), PACER Executive Director Paula Goldberg, and Judy and David Hallett (corporate sponsor), paused at the reception. Below, Jessica Broyles (Benefit co-chair) left, stopped for a partial family portrait. With her from left are sister Kelly Lenzmeier, dad Allen Lenzmeier, and husband Rowan Broyles. Her mom, Kathy, was in another area of the reception.

Lower left, the Bateman family are long-time PACER supporters. They are rear and from left, Christy and Ron Bateman and Brian Grulke. In front are Kimberly Grulke and Jill Bateman.

Lower right, Benefit-goers purchased gifts through the Tiffany Blue Box Extravaganza. Some lucky buyers found they had won exceptional high-value items. Bob Anderson (PACER Marketing Advisory Board), third from left, hoped he was among them.
More Benefit...

From left, Susan Marvin, Mark Scally, and Ken Rosenblum M.D. Susan was a Benefit Associate Sponsor, and Ken is a member of the Benefit Corporate Sponsor committee.

At left, Benefit performer Jennifer Hudson and PACER supporter and internationally known artist Anthony R. Whelihan became acquainted. Tony is a member of PACER’s Advisory Board. In addition, he initiated PACER’s Creative Kids program, has designed the Benefit Playbill for more than a decade, and contributes to the live auction.

The Jacobs family has been involved with PACER for many years. From left are Melinda Jacobs Grodnick and Alexandra and Irwin Jacobs.

At left, Bob Klas, Jr., is above. Sandy and Bob Klas, Sr., were Angel Sponsors.

At left, Kal Patel (PACER Advisory Board) and John Akin were among the Benefit corporate sponsors enjoying events of the evening.

At right, Norton and Susan Gray, left, talked with Melanie and Chuck Barry. Melanie Barry is co-chair of the PACER Advisory Board.

Save the date:
Next year’s PACER Benefit is April 27, 2008

From left, Susan Marvin, Mark Scally, and Ken Rosenblum M.D. Susan was a Benefit Associate Sponsor, and Ken is a member of the Benefit Corporate Sponsor committee.
Boredom busters can keep kids reading

By Deborah Ottman

“Summer time, and the livin’ is easy”…or maybe not! While you, a parent, may welcome the lessening of responsibilities the end of the school year brings, summer vacation can bring another set of issues. A chronic concern for many families is the challenge of keeping kids busy in constructive, affordable activities, while helping them retain the all-important literacy skills they gained at school.

Using resources such as your local public library as a starting point, you and your children can create summer fun that meets the interests and abilities of each individual in the family. The activities will not only bolster literacy, but will give you an opportunity to remain an involved and engaged parent.

Use the list below and build on it. With your children, choose one of the suggested topics, or take turns choosing a topic. Discover what aspects of the topic interest all of you. A trip to the library can be an activity on its own. There you will find books and other materials, such as Internet Web sites, related to your activity. If your children have not yet obtained a library card of their own, this might be a great time to do it.

Flying kites? Borrow a library book or go online together to learn how to build a kite from scratch. Check out how other cultures fly and use kites for fun. If you and your children have chosen to make a “Seasonal Delight” for supper, find a child’s cookbook or guide to local farmers’ markets. Use a field guide to identify the butterflies your “Butterfly Garden” attracts! The important idea is to find reading materials from a variety of sources that will enhance and expand the direction you’ve chosen to go!

Deborah Ottman is on the staff of PACER’s Minnesota Parent Center; Minnesota PIRC. The Minnesota Parent Center was established through a federal Parent Information and Resource Center (PIRC) grant. MPC collaborates with the Minnesota Department of Education and local Minnesota school districts. A major component is working to improve student achievement in Title I schools by increasing parent involvement. The Web site is www.pacer.org/mpc/

Summer activities that can involve reading:

Grow a Garden – Whether it’s on a windowsill or in your backyard, start gardening by reading about soils and seeds. Veggie and butterfly gardens are beneficial and fun!

Days Gone By – Local historical societies and landmarks, museums, cemeteries, and old buildings can all offer glimpses into your community’s past. Use these places as a springboard for sharing your own family histories and memorabilia with your children.

Fly a Kite – Paper or plastic, store-bought or homemade, it’s a challenge and a thrill to see your kite become airborne. Reading the instructions is key. See whose can fly the highest!

Water Fun – In addition to the simple joy of the hose and sprinkler on a hot day, water balloons, a pinaqua (a piñata with water) using a plastic bag, or water “paint” on a sidewalk can all be heatbusters. Cool one another off in a spray bottle battle. Books or the Internet can offer more ideas.

Build a Fort – Throw a sheet over the picnic table, prop up your couch cushions as a barricade, or go all out and construct a tree house; the options are endless when it comes to creating a “secret” play space for your child. When you’re done, there’s nothing like settling back and reading a favorite story in the newly created space.

Family Rembrandts – Design and make family Tee shirts, invent stationery to write to relatives and friends, frame and hang great pieces of your child’s art. Decide together what appeals to your family, then create! Captions and slogans require your child to spell and write.

Seasonal meals – Head to a grocery store, local farmers’ market, or produce stand to check out what fruits and vegetables are in season. Find and use a recipe featuring your purchase. Let your children help make a dish you liked when you were young.

Go Fish – See what you can catch in the ponds, rivers, or lakes nearby. Make a fishing pole from a pop can, line, and a hook—books and other resources can tell you how. Don’t forget the worms!

Full Moon Hike – Slap on the mosquito repellent, and take a walk outside using the full moon to guide you. Take turns making up scary stories as you go! Books and other material about the night skies can add interest.

Family Book Club – Pick some books that you all vote to read. Perhaps you can start with one of your childhood favorites. Schedule a date and time to sit and share your thoughts about the story. Don’t forget to serve a special snack and beverage!

Family Vacation – Use travel guides to learn about where you’ll be heading. Use maps to plan your route and to see points of interest along the way. Pick up a notebook in which to do shared journaling. Staying home? Prepare your own “Travel Guide” by learning about and putting together a brochure highlighting points of interest in your community. You can take photos, draw, or clip pictures to decorate your guide.

Summer Treasures Memory Box – Decorate a box and fill it with mementos and trinkets from your summer. If you like, add captions describing what the item is, and why it’s been included.
Most people agree that a high school diploma is key to a successful future. However, many students with disabilities never graduate—they drop out.

Approximately 28.3 percent of the nation’s youth with disabilities who are served under the Individuals with Disabilities Education Act (IDEA 2004) drop out of school, according to 2004-05 U.S. Department of Education figures. Others say they believe the dropout rate for students with disabilities is even higher, because many students leaving school prematurely have undiagnosed disabilities. Research finds that students with emotional or behavioral disorders (EBD) and students with learning disabilities (LD) are at greatest risk of dropping out.

Students who drop out of school often face difficult futures. Statistics show they are more likely to be unemployed or earn less money than high school graduates. In addition to financial disadvantages, they often experience situations at home and at school.

- Notice and praise good behavior.
- Know your child’s friends and their families.
- Tell teachers that you want to be contacted immediately (and by what method) if your child has problems with schoolwork or behavior.
- If your child is struggling, seek help as soon as possible. Parents and other adults can reduce the likelihood of dropout if they take steps to help youth cope with their problems.

Helping students succeed in high school

High school is a time when parents and their child begin to define new roles. While young people may say they want to make their own decisions, there is a place for parent involvement. It includes efforts to help the student graduate. Following are some ways to do that:

- Maintain frequent contact with your child’s teachers throughout high school.
- Monitor school attendance. If your child is skipping school, it may be a warning that he or she is having difficulty. Talk with school staff immediately.
- Encourage your child to participate in at least one extracurricular activity or have a part-time job. It will help him or her develop positive relationships and have success outside the classroom. Many schools provide after-school and summer programs to build new interests. The programs can help your child feel part of the group, important to the school, and more motivated.
from dropping out of high school

- Help your child explore career options of interest and the education needed to be successful in those careers.
- Let your child know that individuals who earn a high school diploma are likely to earn twice as much each year compared to those who do not have a diploma or equivalency.
- Help your child establish graduation as the academic priority. Keep track of the credits he or she needs to graduate.
- Identify goals for the future. The most important questions to ask: “What interests you?” “What do you do well?” Learn about the training or education needed during or after high school to meet the goal.

PACER Center has two dropout prevention projects funded by the Minnesota Department of Education. Through the projects, PACER works with the Richfield and Cloquet-Fond du Lac schools. For information, call PACER at (952) 838-9000.

futures of students with disabilities

deal with substance abuse and other social issues.

PACER staff and others offer ideas on how parents can help their children stay in school.

Family involvement is an important factor in a child’s motivation for staying in school. The most accurate predictor of a student’s school achievement is how much the family encourages learning. Daily conversations about school performance and encouragement to work hard and do well are important ways that parents can be involved in their child’s education. As key members of their child’s Individualized Education Program (IEP) team, parents can provide input that may help the student stay in school.

According to the National Parent Teacher Association, when their families are involved, children are more likely to:
- earn high grade-point averages,
- score better on tests or rating scales,
- enroll in more challenging classes,
- earn more credits,
- attend school regularly,
- have positive attitudes about school,
- graduate from high school,
- enroll in postsecondary programs, and
- refrain from destructive activities such as alcohol and drug use and violence.

Parent center coalition meets in Washington

The two co-coordinators of the National Coalition of Parent Centers recently met with dignitaries in Washington, D.C, including Minnesota Congresswoman Betty McCollum, a member of the Appropriations Committee and Labor, Health and Human Services, Education and Related Agencies Subcommittee. From left are Donna Fluke and Julie Reynolds, coalition co-coordinators, and Rep. McCollum. Paula F. Goldberg (right), PACER executive director, also attended. The nation’s Parent Training and Information Centers (PTIs) and Community Parent Resource Centers (CPRCs) serve families of children with all disabilities from birth to age 22. Each state has at least one parent center.
By Marcia Kelly

If the word “bullying” makes you think of one child picking on another in the schoolyard, it may be time to update your image of this important problem. While such face-to-face harassment certainly still exists, new ways of bullying have emerged.

With the proliferation of cell phones, instant messaging, social networking Web sites such as MySpace, and other technologies, bullying has muscled its way into cyberspace. Cyberbullying, as this new technological danger is called, may already have happened to your child. According to a study done by wiredsafety.org, 90 percent of middle-school students say they have been the victims of this new form of bullying. Perhaps more sobering, only 15 percent of parents even know what cyberbullying is, according to another study by the group.

As in any type of bullying, cyberbullying can have serious consequences, as indicated in the suicide of a Vermont child. (Visit www.PACERkidsagainstbullying.org, and click on “Parents & Professionals,” then the link to the Burlington, VT, Free Press article at the right of the page.)

Cyberbullying: What it is and how it works

Cyberbullying is the use of technology to harass, hurt, embarrass, humiliate, or intimidate another person. It can be done anonymously, which makes it easy for one child to hurt another and not be held accountable or see the impact of his or her actions. Because this technology reaches a wider audience than just the person who is targeted, its effects can be devastating.

This form of bullying can take place in many ways. For example, some young people have discovered sites where they can create a free Web page—including one intended to bully another child. Embarrassing pictures, private instant messaging (IM) exchanges, and hateful or threatening messages can be posted on these sites. Some young people also post mean comments at legitimate Web sites’ guest books. Others post blogs (short for “Web logs”), information that is instantly published to a Web site. Bullies have found blogging to be a powerful tool when encouraging peers to gang up on another child.

Cyberbullies, like schoolyard bullies, look for targets who are vulnerable, socially isolated, and may not understand social norms. Many children with disabilities have these characteristics, and so they may be especially vulnerable to cyberbullying.

Your 3-step plan to protect your children from cyberbullying

Today’s children are the first generation to experience cyberbullying. Today’s parents are the first to figure out how to respond to the problem.

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Is your child being bullied in cyberspace?
As you venture into this new territory, here are some tips that you may find helpful, says Julie Hertzog, PACER’s bullying prevention project coordinator.

1. **Raise the topic of cyberbullying with your children.**

Many children are afraid to initiate such a conversation because they fear that their access to the Web and cell phones will be eliminated; others are scared to admit that they are being bullied. Open the subject for discussion and let your children know that you want them to have some cyber freedom—but that it needs to be safe.

2. **Set cyber safety rules.**

You set safety rules for your children in the physical world. Do the same in cyberspace. Remind your children that they never really know who is on the other end of cyber communication. It could be the person they think it is, or it could be a predator or a bully. With that in mind, two good guidelines are, “Don’t do or say anything online that you wouldn’t do or say in person. Don’t reveal anything that you wouldn’t tell a stranger.” Specific advice for your children might include:

- Never give out your e-mail password, a photo, or any personal data, such as a physical description, phone number, or address. A bully could use that information to harass you in many ways.
- Never share too many personal details. For example, if you keep an online diary, someone could use that information to bully or ridicule you.
- Never share your IM account password with anyone, even your best friend. That friend may share it with other people, or the friendship may end—and your private messages could suddenly become very public.

Also, a cyberbully with your password can sign on, pretend to be you, and behave inappropriately with others to embarrass and humiliate you.

3. **Know what your children are doing online.**

Privacy is important, but safety is more important. As a parent, you have a responsibility to know what your children are doing online. Keep your children’s computer in an open spot, such as the family room, where you can supervise Web activity. If your children have an account on a social networking site such as MySpace or Facebook, for example, know how to access it so you can monitor the communications. If you do discover that your children are subjected to cyberbullying, document it by printing the e-mails or Web pages, saving electronic copies, and contacting your children’s school or the police.

Technology offers your children many advantages and benefits—and, occasionally, some risks. The solution is not to remove their access to technology but rather to manage the risks. You can do that by being aware of your children’s cyber activities, learning about new technologies, and adding “cyber parenting” to your list of talents.

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**Nevada parent center has a visitor**

Paula F. Goldberg, left, co-director of the Technical Assistance ALLIANCE for Parent Centers national center at PACER, recently visited Parents Encouraging Parents (PEP), the Nevada Parent Training and Information Center. With her are Stephanie Vrsnik, center, and Karen Taycher, PEP executive director. Sam Lieberman, president of the PEP Board of Directors and former Minnesotan, is in front.
Max* is a 7-year-old with fetal alcohol syndrome (FAS). Max is kind, loving, and likes to play with others. However, his particular disability makes it difficult for him to make and keep friends. He perceives situations differently than his peers do, often exercises poor judgment, has a hard time following classroom and home rules, and generally acts impulsively. These are features of Max’s disability, a brain injury caused by Max’s biological mother drinking alcohol while she was pregnant.

Like many children whose brain injury results in behavior problems, Max is often judged harshly. Instead of understanding that Max has a disability, adults may punish him for behaviors that he simply has not learned to control. Punishment, unfortunately, will not help him to learn how to meet adult expectations.

If people could see inside Max’s head, they might have a better understanding of why Max acts the way he does. There are physical differences between a child’s brain affected by alcohol and one that is not. Alcohol may change a child’s brain development so that it doesn’t function the same way as an unaffected brain.

According to the National Organization on Fetal Alcohol Syndrome, some 40,000 babies are born each year with some degree of impairment from fetal alcohol exposure. Fetal alcohol spectrum disorders (FASD), an umbrella term describing this range of effects, which go from mild to severe, include varying degrees of physical and neurodevelopmental abnormalities. These differences can result in mental, behavioral, and learning problems. Fetal alcohol syndrome is the leading known cause of intellectual and developmental disabilities, and it knows no racial, ethnic, or socioeconomic boundaries.

Determining how much alcohol is dangerous to a developing fetus is a complex issue. Researchers know that binge drinking exposes the baby to the highest risk. Frequent drinking also poses dangers. There is no research on how much, if any, drinking is safe during pregnancy. In the absence of such data, the U.S. Surgeon General recommends that women who are pregnant or may become pregnant abstain from all alcohol use.

**Early diagnosis is critical for a child with a fetal alcohol disorder**

Early diagnosis and intervention are critical in determining the outcomes for a child with FASD,” says PACER’s Dixie Jordan, an expert on the educational rights of children with disabilities, including those with FASD. “For someone like Max, it can make all the difference.”

A pediatrician, general practitioner, geneticist, developmental specialist, or physician who is also a child psychologist may be able to help parents obtain an accurate diagnosis, Jordan says. The person conducting the assessment will look for varying degrees of symptoms such as:

- Specific facial characteristics, such as small eyes, a thin upper lip, and smooth philtrum (the groove between the nose and upper lip)
- Growth deficits
- Intellectual and developmental disabilities
- Heart, lung, and kidney defects
- Hyperactivity and behavior problems
- Attention and memory problems
- Poor coordination or motor skill delays
- Difficulty with judgment and reasoning
- Learning disabilities

Making an accurate diagnosis can be tricky, since the symptoms of FASD often resemble those of other disabilities, such as attention deficit hyperactivity disorder (ADHD), autism, post-traumatic stress disorder, oppositional defiant disorder, and other mental health issues. In the absence of confirmed maternal drinking, such similarities can lead to misdiagnoses and thus ineffective treatments.

“Children with FASD need structure and consistency,” Jordan adds. For school-aged children with FASD, she suggests the following strategies that both parents and teachers can use to help these children compensate for their disability, focus, and learn:

**Offer a comfortable learning space without distractions.**

- Avoid the use of bright fluorescent lights.
- Paint walls in a soft color.
- Keep clutter out of sight; have doors on cabinets.

**Provide structure, predictability, consistency.**

- Offer predictability in schedule, routines.
- Structure all transitions.

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*Max is a fictional child, but his story represents the typical experience of many children with FASD.*
there’s hope for fetal alcohol disorders

Encourage multiple ways of learning.

- Be brief and keep directions simple.
- Say “show me” or “how” rather than “why.”
- Provide a printed copy of oral or blackboard directions.
- Keep assignments short.
- Support hands-on, multisensory learning.
- Provide large-print materials.
- Give fewer problems on a page.
- Be prepared to repeat the same instructions several times.

Be aware of your own attitude toward certain behaviors

- The child may misinterpret words or actions and is not necessarily “lying” from his point of view. For example,
- Reconstruct the story with the child so that the thinking errors can be explored and corrected
- Provide role play opportunities to facilitate understanding.
- The child may repeat the same behaviors in spite of being punished because he has not learned the relationship between cause and effect. Some experts suggest:
  - Repeat, repeat, repeat.
  - Provide only one rule at a time, review rules daily
  - Use short term consequences – but do not use natural consequences if the child does not understand causal relationships.

Sue Terwey, program director for the Minnesota Organization on Fetal Alcohol Syndrome (MOFAS), says that teachers and other adults will find better success if they learn different ways to relate to a child with FASD. “The disability is more about accommodating than fixing,” she explains. “When you get away from the ‘fix the kid’ mentality, it frees everyone.”

For example, Terwey says, “one way people can accommodate some children with FASD is to understand that they may process information more slowly. Slowing down and simplifying your message can help them.”

Knowing what accommodations are needed can help a child with fetal alcohol disorders

Making other environmental accommodations can help as well. If a child consistently misses the school bus because he can’t anticipate when it will arrive, for example, having a watch that beeps when it’s time to go to the bus stop can help him manage time better.

“Parents need support from friends and family, and they need professionals to help with sensory integration, occupational therapy, hearing, vision, speech, or other needs,” says Jennifer Stieve, MOFAS’ public awareness and communications coordinator. Also, she notes, as the child grows older, his or her needs change—and so do those of the family.

Experts agree that there is no “one size fits all” solution to FASD. “You just have to keep trying until something clicks,” Stieve says.

Just as FASD can range from mild to severe, the prognosis for children like Max can run the gamut from good to poor. The brightness of their futures depends partly on the degree to which their developing brains were injured and partly on receiving a timely diagnosis and appropriate interventions that can help them achieve their full potential.

“FASD is a permanent physical disability that comes with a social disability,” PACER’s Jordan says. “If we can address the social disability by replacing judgment with understanding and the right kind of education, and if we can better diagnose and accommodate children with FASD by focusing on their strengths and talents, we can help the child, the family, the school, and society.”

FASD Definitions

Fetal alcohol spectrum disorders (FASD) is an umbrella term that include the following conditions:

- Fetal alcohol syndrome (FAS) is characterized by specific facial characteristics, such as small eyes, a thin upper lip, and a smooth philtrum (the groove between the nose and upper lip), severe growth deficiency, well-documented or suspected alcohol exposure, and severe clinical problems.
- Partial fetal alcohol syndrome (pFAS) is characterized by normal growth but some facial characteristics of FAS, known alcohol exposure, and three impaired areas in their central nervous system.
- Alcohol-related neurodevelopmental disorder (ARND) is characterized by normal growth, normal or only slightly affected facial features but three or more central nervous system problems and known alcohol exposure.
- Alcohol-related birth defects (ARBD) are characterized by milder symptoms that may be related to alcohol exposure but don’t quite qualify in other realms for the diagnosis of FAS.
NEW INTERACTIVE CD

**Top Secret Job Skills: Declassified**

This clever and entertaining interactive CD teaches youth basic information and skills for obtaining—and keeping—a job. The exercises advise in a way that invite youth to come to their own conclusions about what is appropriate behavior in the workplace. While it is designed for youth with disabilities, the CD’s common sense content can apply to anyone entering the job market.

$35  ST-38

NEW

**Working Together**

This parent’s guide to parent-professional partnership and communication is a “must have” for families of children with disabilities as they plan a child’s Individualized Education Program (IEP). Filled with common-sense tips based on research and practice, it offers a blueprint for building positive family-school relationships. There are national and Minnesota versions.

$6  10+ copies, $5 each  PHP-a19

**Beyond Sticks and Stones: How to Help Your Child with a Disability Deal with Bullying**

More than 160,000 children, many with disabilities, miss school each day to avoid harassment and intimidation by classmates. This long-awaited book helps you to help your child address the problem of bullying.

$6  10+ copies, $4 each  BP-7

**Assistive Technology Planner**

The planner includes information on choosing and implementing assistive technology as part of a student’s Individualized Education Program (IEP). The kit contains individual booklets for teachers, administrators, and families.

$25  ATP-10

NEW

**EZ AT** Assistive Technology Activities for Children Ages 3–8 with Disabilities

This newly published compilation of activities for children with disabilities is the result of submissions by parents and professionals across the nation. Many of the ideas are simple and inexpensive to incorporate at home and school. All represent best practices for children that most effectively use technology to promote learning and inclusion.

$10  10+ copies, $8 each  STC-16

**A Parent’s Guide to Universal Design for Learning (UDL)**

This easy-to-read booklet introduces parents to the background and principles of UDL. It tells how UDL can help students with disabilities succeed in the classroom with an adaptable curriculum to meet their individual learning needs. It is published by the Technical Assistance ALLIANCE for Parent Centers at PACER Center.

$2  10+ copies, $1.50 ea  ALL-38

**Parents Can Be the Key**

The eighth edition of this popular handbook for parents of children and youth with disabilities describes basic special education laws and procedures and parents rights and responsibilities in their children’s educations. Published in 2006.

$3  10+ copies, $2 each  PHP-a1

**The Road to Work: An Introduction to Vocational Rehabilitation**

The third edition of this book for youth and adults with disabilities and their families reflects the current version of the law. It discusses issues related to the Rehabilitation Act, including eligibility criteria for vocational rehabilitation services, transition planning for high school students, and other legislation and self-advocacy skills.

$8  10+ copies, $6.50 each  VO-1
To order the listed materials...

1. Specify how many you want of each item and the cost
2. Total your order, adding appropriate sales tax
3. Enclose payment with your order
4. Mail to: PACER Center
   8161 Normandale Blvd.
   Minneapolis, MN 55437-1044

Prices include postage and handling. A discount may be available if 10 or more of the same item number are ordered.

■ indicates one item is free to Minnesota parents or guardians of children with disabilities and to Minnesota young adults (age 14 and older) with disabilities.

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Please complete the following:

☑ Parent  ☐ Professional  ☐ Other __________________________

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Telephone: (h) ______________________ (w) __________________ E-mail: __________________

*If a parent:

Birth date of child with disability: ________________________ Disability: __________________________

Visit www.pacer.org
Being a parent is challenging, but having a child with a disability may bring extra challenges. That’s why there’s PACER Center.

A nonprofit parent center, PACER has served families of children with disabilities and special health needs for nearly 30 years. PACER provides expertise and resources to help families make decisions about education, vocational training, employment, and other services for children and youth with all disabilities.

How can PACER help me?

If you have a question or need help for your child with a disability, contact PACER. Most PACER staff are parents or family members of children with disabilities. They share your experience. They understand.

PACER has 30 projects. Many are specific to Minnesota. Some are national or international in scope. All focus on ways to help children with disabilities succeed at home, at school, and in the community.

If you live in Minnesota, you can call PACER’s parent advocates who will help you understand the laws that affect children with disabilities.

How do I contact PACER?

By telephone, Web sites, e-mail, or fax.

If you call during PACER office hours, a staff member will answer the telephone and take information about your situation and link you to the appropriate PACER project. If you are not directly connected, a staff member from that project will call you back, usually within 48 hours.

PACER telephone numbers are:
(952) 838-9000 (main number)
(800) 537-2237 (Minnesota toll-free)
(888) 248-0822 (national toll-free)
(952) 838-0199 (fax)

Send e-mail to pacer@pacer.org.

PACER Center’s postal address is 8161 Normandale Blvd., Minneapolis, MN 55437.

What are PACER hours?

PACER’s switchboard is open from 8 a.m. to 5 p.m. Monday–Friday. There is voice mail at other times. PACER observes federal holidays.

Where can I learn more about PACER?

PACER’s Web sites are:
- www.pacer.org (principal site)
- www.taalliance.org (technical assistance for the nation’s 100 parent centers)
- www.fape.org (information on the Individuals with Disabilities Education Act - IDEA)
- www.c3online.org (Connecting Youth to Communities and Careers)
- www.PACERkidsagainstbullying.org (bullying prevention)