



# Connecting

Connect

*Family Support is the Heart of our Mission.*

June - August, 2011

Volume 16, Number 2

## Positive Behavior Support

*Making undesired behavior unnecessary*

“We were running from one specialist to another trying to figure out what was wrong,” said Erika Villanueva as she recalled her family’s frustration and puzzlement about the changes in their son at school. “Daniel’s behavior just went through the roof,” she recounted. The school wanted to transfer him into a program that relies more on punitive techniques: break the rules, bear the consequences every time.

Erika described how she tried to get techniques she first learned from their son’s habilitation provider implemented in his classroom, “But they just kept reverting



*Erika with her daughter, husband and Daniel.*

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back to using punishments like time-out. Daniel didn’t want to go to school and he would refuse to get on the bus.”

The positive reinforcement techniques introduced by the habilitator had made a big difference within their home environment. “She trained us how to use these methods at the same time she was working with Daniel,” explained Erika. Impressed with progress she saw in Daniel’s behavior at home, Erika began to advocate for having

similar techniques used in his classroom.

Erika found a place for Daniel in a program that uses a school-wide model based on Positive Behavior Support. Daniel began to respond. “It was like a miracle. It just worked!

“For example: Daniel did not like to eat in a room with other people, so lunch time was especially difficult. They let him start by sitting in the hall and slowly

— continued on page 3

# From the Director...

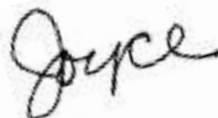
Most of us can remember hearing a child say something completely untrue, and saying it with such conviction that it was tempting to not correct them. With school out for the summer, a parent I know had a call from her daughter announcing she was taking a younger brother for lunch at a nearby restaurant, because “kids eat free”. No amount of explanation or persuasion was effective in convincing her daughter that children’s lunches are free when accompanied by an adult paying full price. In the wonderful realm of absolute certainty, a place adults visit occasionally, free lunch is still a possibility.

Sometimes parenting can become a little bit like trying to live in the world of absolute certainty, and we hold on tenaciously to our treasured notions about managing behavior. After all, there are scary things that can happen to children and parents are protective and cautious. However, in being authority figures for our children we sometimes believe we must be right about everything. It can be quite a burden.

I think my most interesting and effective parenting began with the realization that I didn’t have all the answers. I found it reassuring to learn that managing behavior effectively required some knowledge, skill development, and practice on my part. Over time, I became better at it. Over time, my child’s problem behavior improved.

Addressing issues from a different perspective (what is the purpose or goal of this behavior?) can provide key insights to help us become better parents, and help our children feel more successful about solving problems and meeting their needs in positive ways.

Funny how that works sometimes.....



**Raising  
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*families helping families*

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Parent to Parent support is the heart of Raising Special Kids. Information about local services, educational programs, advocacy, or special health care needs is available in both Spanish and English. Services are provided at no charge to families in Arizona.

Raising Special Kids is a 501(c)3 non-profit organization.

continued from page 1 —

weaned him into the room. Every day they moved his seat closer and closer to the room. Finally he was actually in the doorway,” she laughed. “Now he eats in the same room with the other kids every day. They’ve been awesome helping him learn to transition to different activities. They have had many creative, inventive ideas; and if one thing doesn’t work, they try something else. They use music a lot to encourage him.”

Erika reported that now Daniel loves school and she is thrilled with progress he has made. “He comes home with a big smile on his face. I think it has a lot to do with patience, and learning not to take a child’s behavior personally.”

### Why? Because it works.

Studies have shown that behavior is the foremost reason for students being removed from regular classrooms. Research indicates methods to reduce undesired behavior based on positive reinforcement are more effective than punitive methods. Positive Behavior Interventions and Supports (PBIS) is the only approach to addressing behavior that is specifically mentioned in the Individuals with Disabilities Education Act (IDEA).

Dan Davidson, Ph.D. BCBA-D of the Institute for Human Development at Northern Arizona University is one of the state’s foremost authorities on PBIS. He explained the approach is focused not on punishing; but instead on making undesired behavior unnecessary by helping people get their needs met using acceptable behavior. The model can be used in varied circumstances: for individuals or within whole systems such as a school-wide program.

Davidson recently conducted a series of staff trainings for Raising Special Kids on PBIS with tools and

techniques for assisting parents. Davidson noted PBIS can be used effectively by parents, caretakers, teachers and other professionals for individuals with or without disabilities. In some circumstances the seriousness or complexity of the situation may require the help of a certified or licensed Behavior Analyst.

The use of PBIS to address problem behavior begins with the individual. Specific motivation for a behavior must be determined in order to develop a plan to change the behavior. Some parents have found a necessary first step is increasing their objectivity—stepping back from personal feelings and reactions to observe a child’s behavior as a scientist would observe an experiment. Using established and proven practices outlined in the following steps can pave the way to success.



### Basic Steps:

1. **Collaborate** – Use a team and involve as many caregivers as possible to maintain consistency in the child’s typical day and in every setting. Think about all the adults who are involved with the child: extended family, friends, teachers, classroom aides, bus drivers, respite and habilitation providers, therapists, tutors, counselors, and administrators. Shared responsibility will result in more extensive observation, better data collection and improved results.
2. **Set Goals** – Davidson described an overall goal of PBIS as seeking **“cooperation not compliance.”** Do not expect all behaviors to change at once. Begin by targeting a few specific behaviors, and as they improve, expand to address other behaviors. Envision what you would like to experience, for example: “Accomplish grocery shopping peacefully.” Then identify what behavior is preventing that vision from happening. Is it: a temper tantrum before leaving the house? Running away while walking the aisles? Perhaps screaming during check out? Once you’ve identified the problem behavior, then **be clear about the preferred behavior** you want from your child.

- *A review of research on PBS effectiveness showed that there was over a 90% reduction in problem behavior in over half of the studies; the problem behavior stopped completely in over 26% of the studies.*
- *Harsh punishment and zero tolerance policies have not been effective at either improving behavioral climate in schools, or preventing students with problem behaviors from entering the juvenile justice system.*

— National Association of School Psychologists  
fact sheet by Andrea M. Cohn



— continued from page 3

3. **Measure Behavior** – To measure and track changes, collect facts and data. Define the frequency or intensity of the unwanted behavior and dedicate time to measure it before making changes. (How often during the shopping trip does the screaming happen?) A variety of tools to measure data are available through Raising Special Kids such as charts and tables. It may be surprising to see how often a behavior actually happens instead of relying on your feelings or impressions which can be influenced by other factors. Keep in mind that a data collection method must be practical and simple so it will be easy to use.

4. **Analyze Function** – Behavior serves a function, and it is a form of communication. All behavior has a reason. The same behavior in different people may be due to different motivations. **Behavior, wanted or unwanted, exists because it meets a need.**

Reasons for a behavior may not be obvious to someone who is part of the individual's regular environment. Parents, caregivers or teachers may play an unknowing role in triggering a behavior, so the objectivity of an outside observer may be helpful in discovering the cause of a particular behavior. A professional may be necessary to conduct a Functional Behavioral Assessment (FBA).

*A single type of behavior may be caused by different motivations or serve different functions. Determining the function is key to developing effective responses.*

### Story of 4 runners

— excerpted from Dan Davidson presentation

- One runs to get out of the house and away from the demands
- One runs to go towards the park
- One runs to get attention in the form of the chase
- One runs simply because it feels good



*The actions of parents and caregivers speak loudly. What messages do you want your child to hear? Are you sending the messages you want your child to receive?*

### Messages I want to convey

— excerpted from Dan Davidson presentation

- I care about you
- You're safe with me
- I believe in you
- You can count on me for help
- I value effort over helplessness
- It's OK to make a mistake
- I don't want you to hurt/feel bad
- I like it when you do this
- I don't like it when you do that

5. **Make a Plan** – A written Behavioral Intervention Plan (BIP) will help all participants stay on track and provide a common reference point for continuing to gather data. The plan should specify both the behaviors to decrease as well as those to increase. For example: Billy will not run out of the house in the middle of family dinner *and* he will...what? (Stay in the house and play with toys? Go to his room and jump on his mini trampoline? Stay in the dining room though he may walk about? Remain in his chair and speak with a quiet voice?). The plan should include a way to **improve the environment** and change what may

be triggering the unwanted behavior. Methods include: a) modify expectations, b) organize space, c) organize time, and d) improve relationship. It is this last one that requires parents, teachers and other caregivers to be clear about the messages they wish to convey to the child through every interaction. Think about a positive message you want to convey to the child—do your actions reflect that?

**Teaching alternative skills** is key to making undesired behavior unnecessary. Do not assume the individual knows the desired behavior—teach it beforehand. Determine realistic steps that help meet the individual's needs and demonstrate them during a period of low stress. For example: If you want something to eat, do not hit the refrigerator, instead ask, “May I have a snack?”

6. **Support the Caregivers** – The plan should be developed with the support of those who must carry it out. Without their cooperation the plan will not work. Communicate, share experiences with, and encourage each participant in the plan. Acknowledging the importance of each person's role will promote consistent and willing participation leading to success. One parent noted an increase in self awareness about her actions was among the rewards of practicing Positive Behavior Support.
7. **Evaluate Results/Adjust** - Adapt the plan as needed. Continue to measure behavior and track the data. Monitoring progress is essential to motivate caregivers and determine whether goals have been met or the plan needs adjustment. Most persistent behavior patterns will not change quickly, even with a good plan. Minor adjustments to the plan are often required over time to ensure that the behavior plan continues to be effective. If the behavior data (frequency of running, length of tantrums, severity of self-injury) does not improve, then the plan must be modified.

## Learn more...

Raising Special Kids offers workshops in Positive Behavior Support (see calendar on pg 6) or call 602-242-4366 or 800-237-3007.

### Resources Online:

- [www.pbis.org](http://www.pbis.org)
- <http://csefel.vanderbilt.edu>
- [www.apbs.org](http://www.apbs.org)
- [http://www.pbis.org/common/pbisresources/publications/PBIS\\_Bullying\\_Behavior\\_Apr19\\_2011.pdf](http://www.pbis.org/common/pbisresources/publications/PBIS_Bullying_Behavior_Apr19_2011.pdf)

## Professional Help

Who conducts Functional Behavioral Assessments (FBAs) and helps develop Behavior Intervention Plans (BIPs)?

- **School Psychologists** in your child's school often have the responsibility but are not always trained in functional assessment
- **Board Certified Behavior Analysts** (BCBAs) are well trained. To find one near you, visit [www.bacb.com](http://www.bacb.com) - Find a Certificant.
- **Licensed Behavior Analysts** Arizona now requires professionals who conduct behavior analysis in non-school settings to be licensed. For a list of AZ licensees, go to [www.psychboard.az.gov](http://www.psychboard.az.gov) - Licensee Directories

## Positive Behavior Support Free Seminar for Parents

Saturday, September 10<sup>th</sup>

8:00 a.m. – 1:00 p.m.



Mel Cohen Conference Center  
1919 E. Thomas Road  
Phoenix, AZ 85016

Presenters:

**Dan Davidson, Ph.D. BCBA-D**

Institute for Human Development  
Northern Arizona University

**Robert Klaehn, M.D. ABPN,**

Psychiatry and Child Psychiatry

- Learn effective behavior support approaches to improve your child's behavior
- Materials and tools for behavior monitoring and data collection
- Behavioral health medications
- Question and Answer

*Breakfast & snack*

*Register at Raising Special Kids*

*602-242-4366 or online at*

*[www.raisingpecialkids.org](http://www.raisingpecialkids.org)*



# Raising Special Kids Calendar

Register through our online calendar or call 602-242-4366 or 800-237-3007.

*Our office location is a fragrance-free environment, please avoid wearing fragrances.*  
Disability Empowerment Center, 5025 E. Washington St., #204, Phoenix, AZ 85034

## Positive Behavior Support

Training on effective techniques for behavior management.

**Thu. 6/23/11, 3:00 – 4:30 pm**

**Mon. 7/11/11, 10:00 – 12 noon**  
(Family Partners)

**Wed. 8/17/11, 10:00 – 12 noon**

## The Journey to Adulthood

Provide young adults and parents with information about physical, emotional and social changes that adolescence and puberty bring to every child.

**Mon. 6/6/11, 10:00 – 12:00 noon**  
(Family Partners)

**Sat. 8/20/11, 9:00 – 12:00 noon**  
(Double Workshop: Paired WITH Getting and Keeping the First Job)\*

## Getting and Keeping the First Job

Assist young adults and parents with identifying the importance of employment for youth with disabilities and special needs.

**Sat. 8/20/11, 9:00 – 12:00 noon**  
(Double Workshop: Paired WITH The Journey to Adulthood)\*

\*Young adults are encouraged to accompany parents for our Double Workshop  
**Saturday, 8/20/11, 9-12 noon**

## Understanding 504

Learn about the rules and regulations of a 504 Plan and how it differs from the IEP(IDEA).

**Sat. 7/23/11, 10:15 – 12:00 noon<sup>SS</sup>**

## Guardianship

### Turning 18, What's Next?

Making the decision; understanding the process Learn what guardianship involves before your teen turns 18. You will also learn about alternatives to guardianship.

**Sat. 6/25/11, 2:00 – 4:00 pm<sup>SS</sup>**

**Mon. 8/1/11, 10:00 – 12:00 noon**

### IEP Basics

Learn about the purpose of IEP's, parents' role in the process, and how to prepare for meetings.

**Wed. 6/22/11, 10:00 – 12:00 noon**

**Sat. 7/23/11, 2:00 – 4:00 pm<sup>SS</sup>**

**Wed. 8/24/11, 4:00 – 6:00 pm**

### Turning 3, What's Next? AzEIP to Preschool Transition

Learn how to transition your child from AzEIP services to preschool services provided by the school district.

**Sat. 7/23/11, 12:15 – 1:45 pm<sup>SS</sup>**

### Transition from Preschool to Kindergarten

Learn eligibility differences and strategies for an effective transition into school age services.

**Sat. 6/25/11, 8:00 – 10:00 am<sup>SS</sup>**

### High School Transition

Learn how the transition plan in a student's IEP in high school can prepare for higher education, employment, and life in the community. Resources discussed.

**Sat. 6/25/11, 12:15 -1:45 pm<sup>SS</sup>**

## Bully-Free Environments

Learn how to recognize bullying, effectively respond, and build positive solutions.

**Sat. 6/25/11, 10:15 – 12:00 noon<sup>SS</sup>**

**Sat. 7/23/11, 8:00 – 10:00 am<sup>SS</sup>**

**Tues. 8/23/11, 4:00 – 6:00 pm**

## Parent/Professional Collaboration

Techniques for effective advocacy. What to ask, how to ask for it.

**Wed. 8/3/11, 1:00 – 3:00 pm**

## Organizing Your Child's Records

Bring your child's special education, ISP, therapy and medical records to this "make and take" session to create your own filing system.

**Fri. 7/8/11, 10:00 – 12:00 noon**

## IEP 1-to-1 Consultation

Bring your child's IEP for review, as well as your questions and concerns.

Call for an appointment:

**602-242-4366 or 800-237-3007.**

### Notice our

### ALTERNATE LOCATIONS

(workshop times listed in red )

#### Family Partners

9051 W. Kelton Lane, Ste. #7  
Peoria, AZ 85382

Attendance at all workshops is at NO COST.

For Southern Arizona workshops please call 520-324-3150 or visit [www.pilotparents.org](http://www.pilotparents.org)

<sup>SS</sup> Offered during a "Summer School for Parents" event (see pg. 7 for details)

## NORTHERN ARIZONA WORKSHOPS

Register via website calendar at [www.raisingpecialkids.org](http://www.raisingpecialkids.org) or call 928-523-4870

Location: Family Resource Center, 4000 N. Cummings, Flagstaff

### Positive Behavior Support

Training on effective techniques for behavior management

Wed, 6/8/11, 5:30 – 7:30 pm

guardianship involves before your teen turns 18 and about alternatives to guardianship.

Wed, 7/6/11, 5:30 – 7:30 pm

to preschool services provided by the school district.

Sat. 7/12/11, 5:30 - 7:30 pm

### Guardianship

### Turning 18, What's Next?

Making the decision; understanding the process. Learn what

### Turning 3, What's Next?

### AZEIP to Preschool Transition

Learn how to transition your child from AZEIP services

### IEP Basics

Learn about the purpose of IEP's, parents' role in the process, and how to prepare for meetings.

Wed, 8/17/11, Time TBD



## Summer School for Parents

Join us for a day (or two) of learning!

### Disability Empowerment Center

The Nina Mason Pulliam Conference Center, 5025 E. Washington St., Phoenix, AZ 85034

Workshops will be presented in English and Spanish

### Saturday, June 25, 2011

8 a.m. to 4 p.m.

- 8:00 a.m. - 10:00 a.m. Pre School to Kindergarten Transition
- 10:15 a.m. - 12 noon Bully Free Environment
- 12:15 p.m. - 1:45 p.m. High School Transition
- 2:00 p.m. - 4:00 p.m. Guardianship

### Saturday, July 23, 2011

8 a.m. to 4 p.m.

- 8:00 a.m. - 10:00 a.m. Bully Free Environments
- 10:15 a.m. - 12 noon Understanding 504
- 12:15 p.m. - 1:45 p.m. Turning 3? What's Next – AZEIP to Preschool
- 2:00 p.m. - 4:00 p.m. IEP Basics

Lunch provided. No child care.

Space is limited, please register by contacting Raising Special Kids at 602-242-4366 or online at [www.raisingpecialkids.org](http://www.raisingpecialkids.org).



## Escuela de Verano para Padres

Únase a nosotros para un día (o dos) de aprendizaje!

### Disability Empowerment Center

Centro de Conferencias Nina Mason Pulliam, 5025 E. Washington St., Phoenix, AZ 85034

Los Talleres serán presentados en Inglés y Español

### Sábado, 25 de Junio del 2011

8 a.m. a 4 p.m.

- 8:00 a.m. - 10:00 a.m. Transición de el Pre escolar al Jardín de Niños (Kindergarden)
- 10:15 a.m. - 12 noon Es su Hijo Blanco de Bullying? (Burlas)
- 12:15 p.m. - 1:45 p.m. Transición de Escuela Secundaria (High School)
- 2:00 p.m. - 4:00 p.m. Tutela: Tomando la Decisión y Entendiendo el Proceso

### Sábado, 23 de Julio del 2011

8 a.m. a 4 p.m.

- 8:00 a.m. - 10:00 a.m. Es su Hijo Blanco de Bullying? (Burlas)
- 10:15 a.m. - 12 p.m. Comprendiendo los Planes 504
- 12:15 p.m. - 1:45 p.m. Al Cumplir los 3 años que sigue?: AZEIP al Preescolar
- 2:00 p.m. - 4:00 p.m. Conceptos Básicos del IEP

La Comida será proporcionada. No habrá cuidado de los niños.

El espacio es limitado, por favor Regístrese llamando a Criando Niños Especiales (Raising Special Kids) al: 602-242-4366 o en nuestro sitio de Internet: [www.raisingpecialkids.org](http://www.raisingpecialkids.org).



## What's in a Behavior Intervention Plan?

If your child is exhibiting behavior in school that is impeding her access to an appropriate education, it may indicate a need for a Functional Behavioral Assessment (FBA). An FBA should be conducted by someone with training and experience in Positive Behavior Support or Applied Behavior Analysis to determine why the behavior is occurring and to develop an effective Behavior Intervention Plan (BIP).

A BIP should be written as a guide for teachers, aides, caregivers and anyone who works with the child. Dan Davidson, Ph.D. BCBA-D (see pg 3) recommends a BIP should include the following essential activities to be effective:

1. **Prevent** – Avoid or change the antecedents so that the problem behavior is less likely to occur.
2. **Teach** – Demonstrate a new behavior to replace the problem behavior.
3. **Extinguish** – Do not allow the problem behavior to be reinforced so that it weakens over time
4. **Reinforce** - React positively to the new replacement behavior so that it strengthens over time
5. **Monitor** – Keep records that tell you how well the plan works.

## A Parent's Story

“Since my son was diagnosed with dyslexia and ADHD I have been trying to make sense of the laws, IEP meetings, test results and how special education works.

I knew after my first IEP meeting a year ago that I didn't know enough to advocate for my son. If things stayed the way they were, my son would never learn to read. I researched day and night, went to countless classes trying to understand the system, but emails and calls to the school only led to more frustration. I wasn't able to make the changes needed for my son. This entire process was overwhelming, and I felt I had no one on my side.

I'm writing to let you know how grateful I am for the services Raising Special Kids provided. The classes Raising Special Kids offers are very helpful, but by far, the best service provided is the IEP Partner.

I finally felt I had someone on my side. I was advised on what the school must do, what the school did not have to do, and how to communicate my concerns without being confrontational. Knowing the IEP Partner would be at the meeting gave me reassurance that this IEP meeting would be different. And it was. We were able to achieve everything we wanted in the IEP, and more.

My son will now have assistive technology, occupational therapy and ESY (extended school year) services, things I never knew were available or how to request them. And all of this is being implemented before the end of this school year.

Again, I very much appreciate Raising Special Kids for all that you do. You have made a huge difference in our lives.”

## Study reflects importance of transition services

A recent Easter Seals study shows a picture of life-long challenges for families of children with disabilities as they become adults. Transition services in high school are a primary resource for preparing students for independence. Many parents worry their adult children's basic needs for employment, housing, transportation, social interactions, recreation, healthcare and financial security will not be met:

- Only 11% of parents of adult children with disabilities report their child is employed full time.
- Just 6 in 10 parents of adult children with a disability rate their child's quality of life as excellent or good (61%), compared to 8 in 10 parents of adults without a disability (82%).
- Huge gaps exist in parents of adults with disabilities' assessment of their child's ability to manage their own finances (34% vs. 82% parents of adults without disabilities) and have the life skills necessary to live independently (30% vs. 83% parents of adults without disabilities).
- Nearly 7 in 10 adults with disabilities (69%) live with their parent(s) or guardian; only 17% live independently -- compared to more than half of adult children without disabilities (51%).



# Speak Up, Prevent Errors in Your Child's Care

Your child's health and safety are important to doctors, nurses, and other caregivers. You can make a difference in your child's care by asking the right questions.



## What can you do to prepare for your child's visit to the doctor's office or hospital?

It's helpful to write down the following information and share it with your child's doctor and other caregivers:

- *Your child's medical history. Include vaccinations, allergies, current health problems, and the dates of any surgeries and hospital visits.*
- *A list of your child's medicines. Include prescription and over-the-counter medicines, vitamins, and herbs. Include the amounts.*
- *Questions you have about your child's health.*

### Resource Online:

- <http://www.hhs.gov/ash/initiatives/hai/training/>

## A campaign for caution

*Emmett's Story told by Karla Rauch—Emmett's mom*

Emmett was 12 months old when we discovered he was not acting like his usual playful self. Emmett was taken into an Urgent Care facility to evaluate his condition. His symptoms consisted of fevers, acting lethargic, deep coughing and having no desire to eat.

Emmett was taken to see his Primary Care Physician for a second evaluation. He was having difficulty breathing and was rushed to the Emergency Department. A chest x-ray showed that a button battery was lodged in his esophagus.

The battery Emmett ingested was from a DVD remote control. Emmett was rushed to Phoenix

Children's Hospital to have the battery removed.

The damage to Emmett's body was devastating — the battery had completely eroded. Button batteries contain an alkaline-based product that, when mixed with the acid contained in the esophagus, can produce a chemical reaction within hours. The battery that was in Emmett's esophagus was believed to have been lodged for three days.

Because of a button battery the size of a quarter, Emmett has had to

## What should you ask the doctor?

Ask how a treatment will help your child. Understand that more tests or treatments are not always better for your child.

## What if you do not understand what the doctor is saying?

Tell the doctor you do not understand. Ask more questions. By asking questions you are helping the doctor understand what you need. Tell the doctor if you need someone who speaks your language.

## How can you help prevent your child from getting an infection?

Handwashing helps prevent infection. Remind caregivers to wash or clean their hands before touching your child. Remind caregivers to wear clean gloves when they do tasks such as taking blood, touching wounds or examining your child's private parts.

*Text adapted from a brochure in the "SpeakUP" series by The Joint Commission.*

*A Healthy Roads Media project: [www.healthyroadsmedia.org](http://www.healthyroadsmedia.org)*



*Emmett Rauch*

Small, coin-sized batteries or "button batteries" can be found in many products including:

watches	remotes	calculators
flashlights	toys	hearing aids

Discard button batteries carefully!

endure: 12 surgeries, 10 weeks of pediatric ICU experience, removal of two inches of esophagus, a collapsed lung, severe damage to his trachea, 16 procedures under general anesthesia, G-tube feeding, and 100 x-rays. He is currently relearning how to swallow, and there are many more surgical procedures to come.

The National Battery Ingestion Hotline is available anytime at (202) 625-3333 (call collect if necessary), or call your poison center at (800) 222-1222

More information online visit <http://www.cpsc.gov/cpscpub/prerel/prhtml11/11181.html>

## Español

# Apoyo para el Comportamiento Positivo

*Haciendo que el comportamiento indeseable no sea necesario*

“Estábamos yendo de un especialista a otro tratando de averiguar lo que estaba mal”, dijo Erika Villanueva, recordando la frustración y consternación de su familia ante los cambios de su hijo en la escuela. “El comportamiento de Daniel simplemente se salió de órbita”, ella relató. La escuela quería transferirlo a un programa que se basa más en técnicas punitivas: cada vez que rompes las reglas te enfrentas a las consecuencias.

Erika describió cómo trató de obtener técnicas que aprendió originalmente del proveedor de habilitación de su hijo en su salón de clases, “Pero seguían regresando a la utilización de castigos como tiempo de descanso. Daniel no quería ir a la escuela y se negaba a subirse al camión.”

Las técnicas de refuerzo positivo presentadas por el habilitador habían hecho una gran diferencia en su entorno familiar. “Ella nos enseñó a utilizar esos métodos al mismo tiempo que trabajaba con Daniel”, explicó Erika. Impresionada con el progreso que vio en el comportamiento de Daniel en casa, Erika comenzó a abogar por aplicar técnicas similares en su salón de clases.

Erika encontró lugar para Daniel en un programa que utiliza a través de toda la escuela, un modelo basado en el Apoyo al Comportamiento Positivo. Daniel comenzó a responder positivamente. “Fue como un milagro. ¡Simplemente funcionó!”

“Por ejemplo: A Daniel no le gustaba comer en un salón con otras personas, así que la hora del almuerzo era especialmente difícil. Comenzaron permitiéndole sentarse en el pasillo, y poco a poco lo fueron acercando al salón. Cada día movieron su silla más y más cerca del salón. Finalmente estaba en el umbral de la puerta”, dijo riéndose. “Ahora come diariamente en el mismo salón con los otros niños. Han sido fantásticos ayudándolo a aprender a realizar una transición a distintas actividades. Han tenido muchas ideas creativas e innovadoras, y si algo no funciona, prueban algo más. Usan mucho la música para animarlo.”

Erika reportó que ahora Daniel ama la escuela y que está encantada con el progreso que él ha realizado. “Llega a casa con una gran sonrisa en su rostro. Creo que tiene mucho qué ver con la paciencia y el aprender a no tomar personalmente el comportamiento del niño.”



*Erika con su hija, su esposo y Daniel.*

### ¿Por qué? – Porque funciona.

Los estudios han demostrado que el comportamiento es la principal razón por la cual los estudiantes son removidos de sus salones regulares de clases. La investigación indica que los métodos para reducir la conducta indeseable basados en el refuerzo positivo, son más eficaces que los métodos punitivos. El programa de Intervenciones y Apoyos al Comportamiento Positivo (PBIS por sus siglas en inglés), es el único que se enfoca al comportamiento mencionado específicamente en el Decreto de Educación de Individuos con Discapacidad (IDEA por sus siglas en inglés).

El Dr. Dan Davidson, Ph.D. BCBA-D del Instituto para el Desarrollo Humano en la Universidad del Norte de Arizona es una de las principales autoridades del estado con lo que respecta al programa PBIS. Él explicó que el enfoque se centra en no castigar; sino que en lugar de ello, en hacer que el comportamiento indeseable sea innecesario, al ayudar a la gente a satisfacer sus necesidades usando comportamiento aceptable. El modelo puede usarse en diversas circunstancias: para individuos o en sistemas completos, como en un programa a través de toda la escuela.

Davidson llevó a cabo recientemente una serie de cursos de capacitación para el personal de la organización Raising Special Kids sobre el programa PBIS, además de herramientas y técnicas para ayudar a los padres de familia. Davidson señaló que el programa

PBIS puede ser utilizado eficazmente por padres, proveedores de cuidado, maestros y otros profesionales para tratar con personas con o sin discapacidades. En algunas circunstancias, la gravedad o la complejidad de la situación pueden requerir la ayuda de un Analista del Comportamiento certificado o con licencia.

El uso del programa PBIS para resolver el comportamiento problema comienza con el individuo. La motivación específica para un comportamiento debe determinarse con el fin de desarrollar un plan para cambiar el comportamiento. Algunos padres han encontrado que el primer paso necesario es aumentar su objetividad — dar un paso atrás de los sentimientos y las reacciones personales para observar el comportamiento de un/a niño/a, como un científico observaría un experimento. Utilizando las prácticas establecidas y comprobadas delineadas en los siguientes pasos, se puede pavimentar el camino al éxito.

## Pasos Básicos:

- 1. Colabore** – Use a un equipo y envuelva a tantos cuidadores como sea posible para mantener la consistencia en el día típico del/la niño/a en todo ámbito. Piense en todos los adultos que estén involucrados con el/la niño/a: familiares, amigos, maestros, ayudantes en el salón de clases, conductores de camión, proveedores de servicios de tregua y habilitación, terapeutas, guardianes o tutores, consejeros, asesores y administradores. La responsabilidad compartida resultará en observación más amplia, mejor recopilación de datos, y mejores resultados.
- 2. Establezca Metas** – Davidson describió una meta general del programa PBIS como la búsqueda de “cooperación y no de cumplimiento”. No espere que todos los comportamientos cambien a la vez. Empiece enfocándose en algunos comportamientos específicos, y mientras vayan mejorando, extiéndase para abordar otros comportamientos. Piense en lo que le gustaría experimentar, por ejemplo: “Ir al supermercado en paz.” Después, identifique qué comportamiento está previniendo que ese deseo suceda: ¿Es una rabieta antes de salir de casa? ¿El corretear mientras caminan por los pasillos? ¿O quizás los gritos mientras pagan? Una vez que haya identificado el comportamiento problema, entonces establezca claramente qué comportamiento prefiere de su hijo/a.
- 3. Mida el Comportamiento** – Para medir y rastrear los cambios, debe recolectar información. Defina la frecuencia o intensidad del comportamiento indeseado y dedique tiempo a medirlo antes de realizar cambios. (¿Qué tan frecuentemente durante el viaje de compras ocurren los gritos?) Raising Special Kids tiene disponibles una variedad de herramientas para medir la información, tales como gráficas y tablas. Puede resultar sorprendente ver qué tan frecuentemente realmente ocurre un comportamiento, en lugar de depender de sus impresiones o sentimientos, los cuales pueden ser influenciados por otros factores. Mantenga en mente que un método de recolección de datos o información debe ser práctico y sencillo, para que sea fácil de usar.
- 4. Analice la Función** – El comportamiento sirve para una función y es una forma de comunicación. Todo el comportamiento tiene una razón. El mismo comportamiento en distintas personas puede ser debido a distintas motivaciones. El comportamiento, deseado o no, existe porque satisface una necesidad.  
  
Las razones de un comportamiento pueden no ser obvias para alguien que forma parte del entorno regular del individuo. Los padres, guardianes, tutores o profesores pueden desempeñar, sin saberlo, un papel para desencadenar un comportamiento, así que la objetividad de un observador externo puede ser útil para descubrir la causa de un comportamiento en particular. Un profesional puede ser necesario para realizar una Evaluación de la Conducta Funcional (FBA por sus siglas en inglés).
- 5. Desarrolle un Plan** – Un Plan de Intervención del Comportamiento (BIP por sus siglas en inglés) por escrito, ayudará a todos los participantes a mantenerse en el camino delineado, y proveerá un punto de referencia común para continuar recopilando datos. El plan debe especificar tanto los comportamientos que deben reducirse así como aquellos que deben aumentar. Por ejemplo: Billy no se saldrá corriendo de la casa durante la cena familiar y él... ¿qué? (¿Se quedará en la casa y jugará con juguetes? ¿Se irá a su habitación y saltará en su mini trampolín? ¿Permanecerá en el comedor y puede caminar alrededor? ¿Permanecerá sentado y hablará con una voz tranquila?). El plan BIP debe incluir una forma de mejorar el medio ambiente y cambiar lo que puede estar desencadenando el comportamiento no deseado. Los métodos incluyen: a) modificar las expectativas, b) organizar el espacio, c) organizar



el tiempo, y d) mejorar la relación. Es este último punto el que requiere que padres, maestros y otras personas proporcionando el cuidado sean claros con respecto a los mensajes que desean transmitirle al/la niño/a a través de cada interacción. Piense sobre algún mensaje positivo que usted desea transmitirle a su hijo/a — ¿Sus acciones lo reflejan?

Enseñar habilidades alternas es la clave para hacer que el comportamiento indeseable sea innecesario. No asuma que la persona sabe cuál es el comportamiento deseado—enséñeselo previamente.

Determine los pasos realistas que ayudarán a satisfacer las necesidades del individuo y demuéstreselas durante un período de baja tensión. (Si quieres algo de comer, no golpees el refrigerador, sólo dime tranquilamente “¿Me puedes dar un bocadillo?”)

6. **Apoyo a las Personas Proporcionando Cuidado** – El plan BIP debe desarrollarse con el apoyo de aquellos que lo llevarán a cabo. Sin su cooperación el plan no funcionará. Comuníquese, comparta sus experiencias y aliente a cada participante

del plan. Reconocer la importancia del papel de cada persona, promoverá la participación coherente y dispuesta que los llevará al éxito. Una de las madres notó que el aumento de auto conciencia con respecto a sus acciones, fue uno de los beneficios de practicar el Apoyo al Comportamiento Positivo.

7. **Evalúe los Resultados y Ajuste el Plan como Sea Necesario** – Continúe midiendo el comportamiento y dele seguimiento a la información. Monitorear el progreso es esencial para motivar a las personas proporcionando cuidado, y determinar si se han cumplido las metas o si el plan necesita ser ajustado. Los patrones del comportamiento más persistentes no cambiarán rápidamente, incluso con un buen plan BIP. A través del tiempo, frecuentemente se requieren pequeños ajustes al plan para asegurar que continúe siendo eficaz. Si los datos del comportamiento (frecuencia de los correos, duración de las rabietas, gravedad de la lesión ocasionada a sí mismo/a) no mejoran, el plan debe ser modificado.

## CALENDARIO EN ESPAÑOL

Por favor llamar al 602-242-4366 o 800-237-3007 para confirmar su asistencia a los talleres. Disability Empowerment Center, 5025 E. Washington St., #204, Phoenix, AZ 85034. *Somos una oficina libre de fragancias.*

### El Comportamiento Positivo

El vínculo entre las familias las intervenciones y el apoyo conductual positivo es muy importante.

Lunes, 6/13/11, 1:30-3:00 pm

Lunes, 7/11/11, 10:00 am-12:00 pm

Lunes, 8/15/11, 1:30-3:00 pm

### Al cumplir los 18 años, que sigue?

Tutela: Tomando la Decisión y Entendiendo el Proceso  
Aprenda lo que la Tutela implica y sus alternativas antes de que su adolescente cumpla los 18 años de edad.

Sábado 6/25/11, 2:00-4:00 pm\*

Martes, 8/16/11, 3:00-4:30 pm

### Conceptos Basicos del IEP

Aprender acerca del propósito del IEP a través de una visión general del documento y reunión.

Jueves, 6/16/11, 10:00-11:30 am

Sábado, 7/23/11, 2:00-4:00\*

Jueves, 8/18/11, 10:00-11:30 am

### Al cumplir los 3 años, que sigue?

Intervención Temprana

Aprenda sobre los requerimientos para la transición e ideas para lograr un proceso mas fácil.

Sábado, 7/23/11, 12:15-1:45 pm\*

### Es su Hijo Blanco de Burlas?

Estrategias de Intervención para Padres de Niños con Discapacidades.

\*Una forma de abuso en la escuela a través de la intimidación, tiranía y aislamiento.

Jueves, 6/9/11, 6:00-7:30 pm

Sábado 6/25/11, 10:15-12:00 pm\*

Sábado 7/23/11, 8:00-10:00 am\*

Viernes, 8/26/11, 10:00-11:30 am

### Transición de Escuela Secundaria (High School)

Aprenda como el plan de transición en el IEP de su estudiante de Escuela Secundaria (High School) puede prepararlo para una educación superior, empleo, vida en la comunidad y recursos disponibles.

Sábado 6/25/11, 12:15-1:45 pm\*

### Organizando los archivos de sus niños/a

Aprenda modos efectivos para organizar sus archivos.

Viernes, 7/8/11, 1:00-3:00 pm

### Transición del preescolar al kindergarten

Aprenda las diferentes formas de elegibilidad y estrategias para una transición efectiva a los servicios de edad escolar.

Sat, 6/25/11, 8:00 -10:00 am\*

Para descripciones de talleres y más información, llame a nuestra oficina al 602-242-4366 o al 800-237-3007 o vea el Calendario en español en nuestra pagina web:

[www.raisingpecialkids.org/](http://www.raisingpecialkids.org/)

Por favor llámenos para confirmar su asistencia a los talleres.

*\*Escuela de Verano para Padres - pagina 7*



# Community Notes

## Young supporter leads 2 fundraisers

As an 8th grader, Charles Miscio has already set and met a high bar for community service and leadership. A determined young man, Charles recruited two veteran pro hockey players as coaches, organized two hockey skills clinics for young players and donated proceeds from the clinics to Raising Special Kids: over \$1,400.00!

Our gratitude is extended to Charles, coaches Tim Watters and Sean Whyte for volunteering their time and Oceanside Arena for providing free ice time.



From left: Sean Whyte, Charles Miscio, Howler and Tim Watters

## Miracle League

### Grand Opening

The Miracle League of Arizona opened a new ballpark in Scottsdale built for children with special needs. It has a rubberized playing field to accommodate wheelchairs and walkers and prevent injuries. No fee is required to participate. Volunteers and/or Parents may sign up by email: Deanna.zuppan@mlaz.org or call (480) 619-8810.



Board Chair Kevin Bonner (left) joined Dan Haren Sr. at the grand opening celebration of the Miracle League of Arizona ballfield.

### More Adaptive Recreation organizations

- KEEN: [www.keenphoenix.org](http://www.keenphoenix.org)
- Special Olympics: [www.specialolympicsarizona.org](http://www.specialolympicsarizona.org)
- MASD: [www.mesadisabledsports.com](http://www.mesadisabledsports.com)

## Arizona's Eleventh Annual Transition Conference

**"Imagine It, Plan It, Do It!"**

**Making a commitment to the successful transition to adult life for Youth and Young Adults with Disabilities**

**October 3<sup>rd</sup> & 4<sup>th</sup>, 2011  
9:30 a.m. - 5:00 p.m.**

Talking Stick Resort, 9800 E. Indian Bend Rd., Scottsdale, AZ 85250

- This conference has been filled to capacity for the last two years, make sure to register early!
- Early registration discounts ends Friday, June 17
- Scholarships available For additional information, contact Jeannette Zemeida at (602) 542-3855.

Online registration at <http://www.ade.az.gov/>



Tucker enjoys bowling. Many bowling alleys are accessible.

**DID YOU KNOW?**

60% of families receiving services through the Division of Developmental Disabilities use more than 360 hours per year of respite care.

# Raising Special Kids News

## Board member receives JoLeta Reynolds Award

Michael Remus received the JoLeta Reynolds Award, given for exceptional service in advancing the field of special education at the National Institute on Legal Issues for Educating Students with Disabilities.

"It is especially meaningful to me that I was nominated by Raising Special Kids, Arizona's Parent Training and Information Center. It is wonderful to have a relationship with them that focuses on working

together to help students with disabilities and their parents," commented Remus. "All we do is worth nothing unless we make a difference in the lives of kids. If students are struggling, we must find ways to help them succeed. If students are not making progress, we must find ways to keep them engaged in learning. The future of our world depends on how well we teach our students. Failure is not an option."

## Scenes from a Special Day

The volunteers from the Scottsdale Sunrise Rotary Club, Phoenix El Puente Rotary and Scottsdale Unified School District Service Learning Classes are to thank for countless huge smiles and a fantastically fun day for families in March. Free food and fun was enjoyed by about 3,500 attendees during this year's Special Day for Special Kids.

Mark your calendars now for another great day next year on March 24th at McCormick-Stillman Railroad Park in Scottsdale.



Rotary Club volunteers



Fun and giggles in the petting zoo



Family time together

## Conference a hit with families

Parents learned therapy techniques from the pros

Families learned valuable information about home therapy techniques, effective advocacy and resources directly from the pros at the second annual Collaborative Therapies Conference. Therapists and a pediatrician presented to a crowd of nearly 100 parents of young children at Phoenix Children's Hospital in May. "This



Dr. Robin Blitz opened the conference with a presentation on communicating with doctors.

has been a terrific resource for me," commented an attendee.

## Outreach in Northern Arizona

Families in rural areas of Arizona received training through workshops offered in partnership with Head Start in Ashfork.

"We are a very small town with limited resources, so it was very helpful to have you share your area of expertise with our staff and families," said Ramie Morse of Head Start.



### We gratefully acknowledge our conference sponsors and presenters

Phoenix Children's Hospital  
South Mountain Health Care  
MGA Healthcare, LLC  
Dr. Robin Blitz  
Karl and Elizabeth Freeburg  
Dana Wayne  
Rebekah E. Enfinger, PT, DPT  
Missy Thomas, MA, CCC-SLP  
Lara Taggart, MS, OTR/L  
Corinne Canivez, DSI  
The Emily Center  
Division of Developmental Disabilities  
Arizona Early Intervention Program  
Raising Arizona Kids Magazine  
Kellogg's  
Kati Designs, LLC  
Southwest Human Development  
Valley Of The Sun - United Way  
Wendy Imbordonni Photography  
P.O.P.S.I.C.L.E.  
Care Connect AZ  
HopeKids

# In The Spotlight

## Making a Difference in the Lives of Children *Thank You* for referring families to Raising Special Kids

February - April, 2011

**Aid to the Adoption of Special Kids**  
AASK  
**American Academy of Pediatrics**  
**Arizona Dept Of Health Services**  
Ralph Figueroa  
**Arizona Early Intervention Project**  
Malea Grace  
**Arizona Pediatric**  
Lucy Smith  
**Arizona's Children**  
**Association/Golden Gate**  
**Community Center**  
Joanna Marroquin  
**Ashfork Head Start**  
**AZA United**  
Paulina Tiffany  
**Bellair Elementary School**  
**Capstone**  
**Cardon Children's Medical Center**  
Amira El-Ahmadiyyah  
Josie Jones  
**Care Connect Arizona**  
Mia Ruiz  
**Cenpatico**  
Diane Taylor  
**Community Information & Referral**  
**Service**  
**Deer Valley Unified School District**  
**Division Of Developmental Disabilities**  
Carmen Aguilera  
Sarah Bravo  
Kathleen Calder  
Lyn Cipolla  
Annie Converse  
Wanda Copeland  
Tadzia Dennis-Jackson  
Meredith Dohanyos  
Alma Espinoza  
Maria Fernandez  
Francisca Gil Faddis  
Kathi Guildig  
Ty Hample  
Megan Hansen  
Billy Henderson  
Tina Johnson  
Jill Keyes-McClements  
Jeannie Kildoo  
William Kilgore  
Dorothy Knox

Carly Konieczny  
Vanessa Kruse  
Laura Kushemba  
Maria Elena Mangiameli  
Lucia Marquez  
Chelsie Martin  
Martha Mills  
Tammy Molash  
Marta Monyer  
Laura Moore  
Norma Olea  
Courtney Parker  
Carla Pate  
Lisa Rennells  
Erica Sanchez  
Kizzy Sepulveda  
Dana Southworth  
Susan Steward  
Lola Summers  
Cortney Tipton  
Jo Ann Valdez  
Marietta Valdez  
Patty H. Walters  
Megan Wiley  
Elizabeth Williams  
Linda Williams  
Meagan Woelfel  
**Family Partners**  
**First Southern Baptist Church @**  
**Sahuaro Ranch**  
Steve French  
**Flagstaff Medical Center**  
**GALA**  
**Glendale Family Health Center**  
Linda Fiske  
**Head Start**  
**High Functioning Asperger's Group**  
Ellen O'Hare  
**Hillcrest Middle School**  
**Hummingbird Early Intervention**  
**Services**  
Laura Denali  
**Hurley Ranch Elementary School**  
Josiah Vasquez  
**Joni and Friends**  
Pam Baldwin  
**Legend Springs**  
**Maricopa Health Plan**  
Terry Dendulk

**ADHS OCSHCN**  
Marta Urbina  
**Phoenix Children's Hospital**  
Tiffany Glick  
Susan Larkin  
Cynthia Nakamura  
Maritsa Saudeco Graham  
Jennifer Stalteri  
**Rehab Without Walls**  
Mandy Cornelius  
**RISE, Inc.**  
Amy-Lee Verfaillie  
**Sharing Down Syndrome**  
Gina Johnson  
**Shumway Elementary School,**  
**Chandler USD**  
**Southwest Human Development**  
Sharon Mayher  
**Stetson Hills School**  
**Sunrise Elementary Principal**  
**TASK San Diego**  
**Tolleson High School**  
**Touchstone Behavioral Health**  
Fidel Gonzalez  
**Touchstone Behavioral Health**  
**Guadalupe**  
Reyes-Awna  
**Washington Elementary School**  
**District**  
Megan Tolway  
**Wee Care**  
**Weinburg Elementary/Chandler**  
Evelyn Gannon  
**West Valley Family Development**  
**Center**  
Dr. Valerie Kemper

**INDIVIDUALS**  
Jessica Burnside  
Dr. Elaine Ellis  
Dr. Daniel Kessler  
Sara Leppert  
Dr. Raun Melmed  
Dr. Karlsson Roth  
Cathy Uno

## Parent Leaders are the heart of Raising Special Kids *Thank You!*

February - April, 2011

**Casa Grande**  
Janine Baber  
**Cave Creek**  
Jill Pearns  
**Chandler**  
Samantha Beatty  
Beth Maloney  
**Gilbert**  
Peter Graf  
Chris Jones  
Janet Kirwan  
Jennifer Kurr  
**Glendale**  
Pam Baldwin  
Dawn Kurbat  
Danielle Martinez  
Annette Navarro  
**Mesa**  
Susan Melton  
**Peoria**  
Steve French  
Mark Mucklow  
Tricia Mucklow  
**Phoenix**  
Rebecca Bailey  
Jeannie Bremerkamp  
Lisa Case  
Veronica Castillo  
Patty Coe  
Nancy Gunderson  
Sharon Hayes  
Elizabeth Naughton-Ketzler  
Nancy Licht  
Madeline Papazian  
Ines Rosas  
Lori Stuart  
Hannah Swearengin  
Paulina Tiffany  
Dana Wayne  
Leslie Williams  
**Queen Creek**  
Elizabeth Bird  
**Scottsdale**  
Steve Lee  
Chris Linn  
Shauna Mattson  
Lynn Michels  
Katie Petersen  
Mary Quinsler  
Ched Salasek  
**Sun City**  
Margaret Tiffany  
Paul Tiffany  
**Tempe**  
Janet Romo  
**Tolleson**  
Kristie Amator  
**Tucson**  
Wendy Brimhall  
Denise Mogge  
Jasmin Taketa-Tran  
**Volunteers**  
Iris Sanabria  
Philip Sanabria  
Joelle Warzecha

We post about  
news, events, and  
more that are of interest  
to families living with  
disability. Want to  
know what's up?

Find us on  
Facebook.



Designate  
**Raising Special Kids**  
to be your charity of choice  
when you use  
**Goodsearch.com**  
— a Yahoo-powered internet  
search engine.

## Arizona's Family Health Information Project *Raising Special Kids receives grant award*

U.S. Department of Health and Human Services (HHS) Secretary Kathleen Sebelius announced that \$4.9 million in new and continuing funding has been awarded to support the Family-to-Family Health Information Centers (F2F HIC). Funding for the centers was extended under the new federal health reform law and will support 51 centers across the U.S., including Arizona's center, Raising Special Kids. For more information on F2F HICs, visit the Family Voices website: [www.familyvoices.org](http://www.familyvoices.org)



Raising Special Kids  
5025 E. Washington, Suite #204  
Phoenix, AZ 85034

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*5th Annual*

# Dandelion Golf Classic



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**All proceeds  
to benefit  
Raising  
Special Kids**

**Sponsored by CareScape, Inc.**  
**Saturday, October 1st, 2011**  
**Tuscany Falls at Pebble Creek Golf Resort**

16262 W. Clubhouse Drive, Goodyear, Arizona 85395, Pro Shop 623-536-2491

Golfers will receive:

18 holes of golf with cart, range balls, golf shirt,  
breakfast, lunch, player tee prize bag, one drink  
ticket, one door prize ticket

**6:30 am** - Registration, Breakfast, & Driving Range

**8:30 am** - Shotgun Start

**1:30 pm** - Lunch, Auction, Door Prizes, & Awards

Sponsorships available from \$300 to \$5000  
Individual players \$150, Team Early Registration Package \$600

For details visit: [www.dandeliongolfclassic.com](http://www.dandeliongolfclassic.com)

or contact: Marcy DeChandt at CareScape 623-583-8700 or [dandeliongolf@carescape.com](mailto:dandeliongolf@carescape.com)

[www.raisingpecialkids.org](http://www.raisingpecialkids.org)