

SPECIAL Parenting Matters of Westchester

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NEWSLETTER

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“Our publication is dedicated to parents of children with special needs. We offer options, guidance, awareness and validation for the diverse feelings and voices parents have for their children and themselves.”

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IF YOU SUSPECT YOUR CHILD HAS A DELAY

by Jenny A. Frank, CSW

Frequently, parents are the first to suspect their child may be “different” or having difficulty when their child “just doesn’t seem to be like” other children of the same age. You may have already been thinking my child:

- ☞ doesn’t seem to do certain tasks like children his or her age.
- ☞ seems to have difficulty with following directions or conversations. (S)he seems “out of it” at times.
- ☞ seems more sensitive or intensely reactive to the environment or people.
- ☞ doesn’t listen or respond to limit setting or “no”.
- ☞ appears limited in social play skills and/or interests.

Conversely, perhaps you have been approached by your child’s teachers who feel your child is having some difficulties or not achieving his/her goals. Schools are used to seeing many children and are often skilled and experienced in noticing children who may need additional support.

If you find yourself thinking about the above statements, perhaps you should consider having your child evaluated.

A parent’s “gut” feeling or instincts are gen-

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DISCOVERING YOUR CHILD HAS SPECIAL NEEDS

by Roberta Rachel Omin, CSW-R

Parenting is the most challenging, humbling and rewarding of life’s experiences. We are on call 24-7 and we take very seriously how our children fare. We have dreams, wishes and ideas of what our child will be like from pregnancy and birth onward. Having fantasies in anticipation of our child is natural and normal. We may not even be aware that we have these expectations until “the day” we learn that our child is different. Discovering our child has special needs starts a host of inner emotional reactions. It is painful, sorrowful and difficult because of our emotional attachment and because none of us want our child to have difficulties in life that having special needs entails. Parents tell me repeatedly how they feel “shattered” as the news sinks in.

Regardless of the origins of special needs, (ranging from congenital, developmental, genetic, neurological, accidental, chronic medical, acquired from illness, or any combination thereof), we have common reactions.

- ☞ **Denial.** In the beginning, we feel shock, numbness and disbelief, we are thrown off balance – “this just can’t be”. Our denial serves a healthy purpose. **It buys us time to discover and reclaim our inner strengths and**

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-erally correct and can be trusted. So many times a parent notices his / her child appears to be “struggling,” but, family member talks you out of it, saying “they’ll grow out of it, another family member was like that as a child and is fine now”.

Or, in your wish to believe nothing is wrong, you convey a “watered down” version of your concerns to your pediatrician who then encourages you to give it a few more months. Later you may feel perturbed that time was lost for not going with your original “gut” feeling.

It is troubling, and of course, frightening to take those first steps; however the sooner you start, the earlier the necessary and appropriate interventions (educational and related services) can be implemented for your child.

Under the federal statute the Individuals with Disabilities Education Act, originally enacted as Public Law 94-142 in 1975, provided for equal education to children with a “disability.” Subsequently, further reauthorizations of this law brought about mandated services for children ages birth -5 with disabilities. Today, any child identified as having a disability is entitled to appropriate services.

The evaluation process will entail testing as determined by your child’s presenting concerns. Your child may receive one or any combination of testing: speech and language, educational, psychological, occupational therapy, physical therapy and/or assistive technology to name a few in order to determine the level of need, if any.

For further information or to get a referral for your child age birth – 2.9 years, you should contact the Westchester County Department of Health at (914) 813-5095. For children between ages 3 – 21, contact your local school district’s chairperson of special education.

It makes a world of difference to seek support from people who know about special needs and to educate yourself as much as possible. This goes a long way in helping your child, other family members, caregivers and educators.

Asking for help is not easy. We expect and want our children to be “normal” and the range of feelings that can grip us at these times can be overwhelming and all encompassing. Finding good support and having someone to speak with can restore some sense of equilibrium that is essential to this kind of situation. Feel free to call Jenny Frank, CSW or Roberta Omin, CSW-R with any questions regarding your child and you.

*S*PECIAL Parenting Matters of Westchester

SUPPORT GROUP PRESENTLY FORMING FOR FALL, 2002

Within a supportive atmosphere this group will focus on the many challenges and feelings involved in parenting a child with special needs.

For information and registration



call: 914-939-6557

Services are available to:

- Schools • Parents • Families • Children
- SEPTA’s • Parent Organizations
- Medical Offices
- Consultation/Supervision for professionals
- Inservice Trainings

DISCOVERING YOUR CHILD

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to gather the outer resources and supports we need to face the truth. We can deny on several levels: the *facts* of the diagnosis; the *permanence* of the diagnosis; the *implications* of the diagnosis; and the *feelings* associated with this life changing situation. Prolonged denial on any of these levels prevents us from moving forward.

☞ **Guilt/blame/shame.** We often question if, in some way, we caused our child's handicap. We know the tendency for some conditions can be passed on or we have genetic anomalies we did not know we carried. Guilt also arises when we believe our feelings are unacceptable or negative. We might blame our spouse for something that may or may not have been within his/her control. Other times, we experience shame which manifests as an inner sense of badness, a sense of "I am being punished". Un-addressed guilt, blame or shame can block or depress us.

☞ **Fears and anxieties** translate into "what if's" concerning our child's future. They can immobilize us from getting help and prevent us from living in the "here and now" with our child and family. Or, they can mobilize us to channel our energy into constructive, manageable, time and age-appropriate tasks, such as learning how to help our child with realistic goals as well as current and anticipated needs.

☞ **Anger/rage.** There is a difference between these two feeling states. Sustaining a significant loss incurs pain which naturally makes us angry. If this taps earlier unresolved losses, "unfinished business" accrues and we may rage and rail out of proportion or in sudden outbursts. On the other hand, anger at this random injustice, can be displaced onto our spouse or professionals, often

onto the person or services we need the most. There may be times anger towards professionals is appropriate and this has to be dealt with. We may even feel angry with the child whose special needs has shattered our dreams. These are normal reactions. What we do with our anger is what matters. We need to work through this anger and not cling to it to the exclusion of moving on for our child's and our sake. Talking out our true anger will help us move through the core issue of how this could happen to my child and to me.

☞ **Sadness.** We feel profound sorrow and disappointment for how our life and the wishes for our child's life have forever changed. A **chronic sorrow** may be activated at times of developmental milestones or when we have reminders of what is not, of what is and what might have been.

All these normal, natural and necessary feelings are known as grief; whereby, we grieve for the child of our lost dreams and acknowledge the truth about our child. The wider the discrepancy between our wishes and reality, the more we have to mourn. Often our society doesn't acknowledge this grief, as no one has died. If we continue to deny, minimize, blame, carry guilt or rage, we will have greater difficulty accepting our child as (s)he is which negatively impacts our adjustment in meeting his/her needs. We have sustained a "life changing loss"—our world will never be the same.

Experiencing our feelings with compassion is the solution. Opportunities are needed to talk openly and authentically about our child and his/her needs and how this impacts us as individuals, as a couple, and as a family. It enables us to face the challenges, make the necessary adaptations for our child and our life and create new hopes and dreams. As our parental awareness and coping increases we become stronger

"The wider the discrepancy between our wishes and reality, the more we have to mourn".

and more liberated to sufficiently and appropriately meet our child's special and normal needs. We learn to adjust our parenting style and in the process obtain our own special education and training. Through this we affirm, accept and love our child for who (s)he really is. In grappling with our reshaped life's direction and priorities, we find new meanings and rewards than we ever imagined possible. In this process, we are transformed.

Let Us Know

*A Column For Parents To Write
In And Be Heard*

If you think a friend or family member has a child with a delay, how do you handle it?

All of us have had to talk to a family member or friend about something truly difficult. We weighed the pros and cons along with the potential pitfalls of bringing up something uncomfortable. How should one handle it when one thinks a friend or family member has a child with a delay ...if at all?

We would love to hear from you, whether someone spoke to you regarding your child or you approached, or are presently thinking about approaching someone else.

Write or Email us at goodomin@bestweb.net. We would like to incorporate your ideas in the upcoming issues of *SPECIAL* Parenting Matters of Westchester to help others dealing with these issues. Thank you.

Roberta Rachel Omin, CSW-R, psychotherapist, has her MSW and post masters certificate in Advanced Clinical Social Work from Hunter College School of Social Work. She is a graduate of the Gestalt Center of Long Island. Roberta has extensive experience working with parents and children with special needs and childhood difficulties as well as working with individuals and couples. She is past President and Program Chair of the Westchester Chapter, New York State Society for Clinical Social Work, Inc. Roberta maintains her private practice in Ossining (914) 941-8179.

Jenny A. Frank, CSW is a graduate of Fordham University Graduate School of Social Work. Jenny works with children birth through age 5 in their homes and pre-school settings. Her private practice includes family treatment/training, working with children, and working with parents of children with special needs. Jenny's clinical experience is also with the adult mentally ill. She is an active member of the Westchester Chapter, New York State Society for Clinical Social Work, Inc. serving on its Conference and Student Affairs committees. Jenny's private office is in White Plains (914) 939-6557.