

The BEST PRACTICES

Newsletter
Of

*The Interdisciplinary Council on
Developmental & Learning Disorders*

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The Best Practices Newsletter of the Interdisciplinary Council on Developmental and Learning Disorders, sponsored by the Unicorn Children's Foundation, is written to provide regional updates and networking opportunities to professionals and parents working with young children with communication and relating challenges. We hope to provide information and support and welcome any feedback or contributions that you may have. Please address your comments to Jo Raphael, MSW, LCSW-C, Editor at: 3213 Midfield Road Baltimore, MD 21208, E-mail at JO@ICDL.COM, phone or fax at (410) 486-1251. *Thank you.*

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Editor's Note

Jo Raphael, MSW

Molly Romer Witten, Ph. D.

Due to the recent world events we have decided to depart from our planned newsletter to bring you this special edition which is dedicated to helping our children during these difficult times. We have gathered articles from clinicians, educators and parents detailing what our new world feels like and how to cope with the changes.

At this point in time, the meaning of the terror of 9/11 has expanded to understanding how we can continue to build our futures, and grow through a crisis. All of us are affected, but, as parents and professionals who work with children who have special needs, it is not the first or the last crisis we must integrate. The terror highlights that we are limited in our ability to insure the safety and lives of our children and of ourselves. The terrorist attacks have the potential to disrupt our sense of agency, our hope for ourselves in the present, and for our children in the future. This issue explores ways to restore our hopeful perspective, and our organization after the tragedy of 9/11. This issue highlights that we can sustain hope through our awareness of diversity (Naseef), through our relatedness to one another (Witten), and through our acknowledgement of the limited power we have to comfort (Brazelton), to listen (Sparrow), and to witness (Osgood), and to understand the meaning of our childrens' behavior (Greenspan). Our relationships with one another have the potential to provide satisfaction, cultivate our sense of self-agency, and support us to think about the future.

We hope that the articles included in this newsletter provide some ideas for you to expand on, in your dealings with children, either your own, or those you know through your work. And we hope that you derive some sense comfort and community in reading them.

During this holiday season we want to thank you for your continued support and patience as the Interdisciplinary Council on Developmental and Learning Disorders continues to grow. Please write to us to post information, to submit an article for consideration or to share your thoughts.

You can reach us by e-mail at: (Molly) besobeso@enteract.com or (Jo) jo@icdl.com.

Best regards,

Jo & Molly

Medical

Richard Solomon, M.D.

Talking to Children about September 11th

Richard Solomon M.D.

The September 11th terrorist attacks on the World Trade Center and the Pentagon left indelible, traumatic images in the minds Americans, including many of America's children. Here are some basic recommendations from a developmental-behavioral pediatrics perspective to help families deal with their children's experience of the terrorist attack.

How children understand world events depends, of course, on their age and stage of development. Pre-school aged children won't understand the *meaning* of the terrorist attacks. They will, however, understand the emotional reaction that adults have and may ask, for instance, why mommy or daddy is crying, sad or upset. School age children can understand that an attack occurred, that 'bad' people flew airplanes into buildings to hurt 'good' people and may ask for reassurance and/or a simple explanation as to why this happened. Pre-adolescents and adolescent aged children may have quite sophisticated responses to the event and want to share complex feelings about personal fears, issues of morality, justice, national and world politics, and so on.

Regardless of stage of development, the first and most important adult response is to reassure children and help them to feel safe and secure. Given what they may have seen on television or read in the news, children need to know that the odds of being harmed by a terrorist action are extremely remote even

though it may *feel* threatening. Children should not be allowed to watch the footage of traumatic events over and over as this can have emotionally traumatic effects or, paradoxically, desensitize children to the horror. An adult attitude that says 'TV was scary but what you saw on TV is not going to happen here. You are safe here at home.' will go a long way to helping children feel safe and secure. It's fine for parents to be more certain than they feel.

But, reassurance about safety will not necessarily remove all fears (parents' fears included!). So the second thing parents need to do is find out how their children feel. Children at any age may *show* how they feel and not be able to talk about it. Their drawings or play might reflect aggressive themes; their sleep might be disturbed and they might have nightmares; they might seem more clingy and insecure. Parents and adult caretakers should be on the lookout for these more indirect expressions of emotional upset. Older children could have similar symptoms of withdrawal, fatigue, change in routine or sleep disturbance but they are more likely to verbally express feelings of fear and insecurity. Simply asking adolescents what they think or how they feel about the terrorist attack and letting them know that it's OK to talk about their feelings any time may bring out further discussion.

So the third thing to do in the aftermath of traumatic events is to make time to

discuss the events. Talking about feelings and thoughts will help children understand their feelings. It is wise to let children share their feelings first before parents express opinions. This will open the discussion up. Adults should watch TV on the topic *with* their children and use the news to broach sensitive topic areas. Discussing the facts and significance of the events and the child's reactions to the events is critical. Discussion of 'why' this happened should once again be geared to the developmental level of the child and should be based on the child's questions. Questions like 'Why do bad things happen to good people?' offer families an opportunity to grapple with one of the most difficult moral questions we face. Young children may simply accept that there are 'bad people' who do bad things. Adolescents will probably want a more in-depth understanding. Exploring what they think first will give adults an entry into the discussion. But some adult editorializing is fine. For instance, older children and adolescents should be told that not all people in a particular group are bad, that lashing out

at members of a particular religious or ethnic group will only cause more harm. On the other hand, discussion may turn to the victims. It's natural and normal to feel very sad for those families who lost a loved one in the disaster. As a result of these discussions, there might be a patriotic desire of children to help out by sending allowance money to charities, writing letters of support to those who suffered at 'ground zero', etc. By addressing questions, issues and concerns and encouraging constructive actions children learn that they can understand and cope with adversity.

Ironically, out of disaster may come closeness, compassion, coping and even wisdom. When parents and other adults sensitively respond to their children about the events of September 11th, children can learn that that life is precious and sadness a natural response to other people's losses; that all their feelings matter and they are not alone; that there are ways to understand and cope even with horrifying events; and that they can regain a feeling of safety in times of national threat.

Helping Children Deal with Catastrophes

T. Berry Brazelton, M.D.

Reprinted with the author's permission from an article that appeared in the NY Times

We are all stunned beyond believing at the terrible tragedies which have just happened in New York, Washington D.C., and Pittsburgh, Pennsylvania. None of us, as parents, can understand the dimensions of its horror. We can't comprehend "why," nor can we see what it will mean to our country's future-and to our children. We do know that the United States will never be the same again. As a country, we are indeed not invulnerable or isolated, and we have obviously amassed enemies in other

parts of the world. We are all frightened and anxious about our country's future.

As parents, our hearts and minds immediately go to our children. What will this mean to their future? All of us have been raising our children and grandchildren to a less and less predictable and a more violent world. But none of us, I suspect, ever dreamed of such destruction. Our children have, because they've watched Hollywood versions of this. They must wonder now about how much they can trust our

assurances that “it’s just in movies. It will never happen here.” This horror goes even beyond those films of violence, because it is our own. Our children will have seen the World Trade Center blow up and they will have seen the shock and horror on our faces. This immediately carries them beyond the wall of fantasy and to have to face its reality.

I remember when Kristi MacAuliffe blew up in space. She was a teacher and a mother. Every child wondered, and many dared to ask, “Was she a bad mother or was it because her children were bad? Why did the president blow up a mother and a teacher?” (In our book, *Touchpoints: Three to Six*) We point out how children in this age group take responsibility for such events. They feel as if their newly recognized power in the world can lead to such events. As they see and share our anxiety and our horror, they feel somehow responsible. Are they bad, and if they are, will we blow up too?

Older children begin to wonder what kind of world would it be that allows such a horrible event. The impulse control that adolescents and preadolescents are working so hard to master is shaken by their inability to rely on adult models around them. As we wonder, they will wonder, “What kind of world am I growing up in? Will I ever feel safe again?”

Don’t let the defenses of small children fool you. They may well say, “Why are you upset? It didn’t happen to us.” I still feel that parents need to sit down with their children after such a catastrophe- to share their fears and their anxiety and to be ready to listen. Wait for them if you need to. They may well not be ready yet to share their upset with you until they are ready. That may be not until next week or so. But you want them to know you can be ready- and you will share their questions and even their fears.

Be ready to share a small child’s questions about responsibility and an older child’s anxiety about the kind of world we live in. “Will it happen to me? Will it happen to you? It did to all those other families.” I do not feel we can protect a child from these fears and our horror, but we can surely share it. This is a time to turn inward, to gather our families, and to share our value systems and our religious beliefs. We must assure children that we intend to protect them, and that we intend to protect ourselves so we can be here for them. They need to hear that and to believe with us that we can still believe!

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Dr. Brazelton, internationally recognized pediatrician, writes a weekly column for New York Times Syndication, and is the author of numerous books for parents on child development, including *Touchpoints 3 – 6, Behavioral and Emotional Development*.

www.touchpoints.org www.brazelton.org

Our National Disaster: What It Means To Children

Joshua Sparrow, MD – September 12, 2001

Reprinted with the author’s permission from an article that appeared in the NY Times

On the night of Sept. 11, the day terrorists attacked our country, my 14-year-old daughter lay in bed, unable to sleep. There were rumors, she told me,

that both parents of one of her classmates had boarded American Airlines Flight 11 in Boston which was hijacked and then crashed into the

World Trade Center. "These people were no different from us," she wept. "How could this happen?"

What can we tell our children when we don't know the answers to their questions and cannot ourselves comprehend (or even fully face) what we do know?

First, we must listen to their concerns and be ready to share their fears. All children are bound to ask: "What happened?" and "Why?" Some young children will have trouble sleeping, wake up with nightmares or cling when it's time to say goodbye. They are wondering: "Could it happen to me?" and "Could it happen to my parents?"

Children's reactions will vary with their age. Mercifully, perhaps, many young children will be unable to see this as real. Older children are likely to protect themselves by avoiding the subject. Or they may stir up trouble to draw attention away from our immediate national preoccupation and use our reactions to reassure themselves that life can go on. Adolescents may question our world. Children who have lived through earlier losses or trauma are likely to have to face their memories of those events again. In some strange way, many children are likely to feel vaguely responsible for what occurred.

But whatever their response, children will need to know enough about what happened, and why, to feel reassured that they and the people who care for them are safe and can still be counted on. Children who have lost a parent, relative or other caregiver will need to be allowed to face their feelings but also to retreat from them when they are too much to bear. They need to know who they can rely on to take care of them and to comfort them as they mourn.

It's tempting to try to deprive children of information to protect them from the painful knowledge of our world's frightening unreliability. But even if we keep our children away from TV and radio reports, they are bound to read on our stony faces how much the world and our perceptions of it have been so suddenly scarred. We cannot try to protect them from our adult responses. Instead, we must acknowledge our own grief, and understand its effects, if we are to help our children with their reactions. Seeing that we care, and that we are all profoundly affected by this tragedy, helps children continue to trust in us and in the future of humanity. We may even find that it is our children who are comforting us - and they will be reassured by knowing that they can help.

In the absence of information, children are bound to fill in the gaps with their own fantasies and worst fears. So even though there is little information right now, we must tell our children what we do know in terms they can understand, and with no more detail than they ask for. We can say that something terribly sad and scary happened and that we hope the world will learn from this how to make sure that it will never happen again. And we can take comfort in our children's capacity for compassion, as they look for shreds of humanity in the horror.

"Daddy," my daughter sobbed, "I saw the pictures of the people jumping out the window. They jumped, and they were holding hands."

Now is a time to gather together as families, as communities, as a planet to share our shock and horror and to face our loss together. We must hold our children as they weep, unable to sleep, or when they wake up with nightmares.

"Just call for us," I said to my daughter as I turned out the light, "if you need us during the night." I'm sure we were both thinking about the girl at her school, about who would be with her that night. But all we can do is comfort our children and let them know that we are there. And then we must keep on going, especially with the activities that we care about, that make sense, that have a purpose, that we believe can make a difference. Our children need us to continue to dream of a better, safer, more peaceful world.

The morning after the tragedy - Wed., Sept. 12 - husbands and wives hugged as they went off to work, holding each other for a moment longer than usual. On their way to school, my daughter and her friends talked about who they knew who knew someone who had been killed, about someone who hadn't been heard from and about someone who was saved by getting up late to go to

work. They recited the horrors they'd heard on television, but their attention gradually converged on the firefighters, the policemen and the other rescue workers whose tragic heroism reassured them.

"I want to be a firefighter," said one. "Or a doctor," said another.

Human goodness, these girls knew, was still everywhere in the attempts to salvage lives on the scene and in their own responses.

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Joshua Sparrow, M.D. is a child psychiatrist at Children's Hospital, Boston, associate director of the Brazelton Touchpoints Center, and co-author with Dr. T. Berry Brazelton of Touchpoints: 3 – 6: Your Child's Emotional and Behavioral Development

www.touchpoints.org

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Regional Networks

Jo Raphael, MSW

Starting almost immediately after the World Trade Center was attacked on September 11th the ICDL began to receive e-mails from all over the world inquiring as to how we were and wishing us all well. The spirit of sharing and community was overwhelming to me as I read notes from Argentina, Holland, Indonesia, England, France and Sweden.

We are a special community of people drawn together by our shared desire to help children and families with special needs with problems of relating and communicating. The Interdisciplinary

Council on Developmental and Learning Disorders is an organization that has always welcomed people from all over the world who live or work with children with special needs and learning challenges. We are an international group of people working together for a common cause.

We wish all of you well. We thank you for your good wishes and support and hope that you are all safe and are able to continue to help our children to learn and grow and to feel safe.

Parent Network

Deborah Flaschen

“Mommy will the children who lost their mommies and daddies feel sad ALL their lives? How long will it be before they can feel happy again?”. “Do terrorists live in Ottawa?”. “Do terrorists go to school?” “Will they come to my school?”

Cindy Harrison

Never did my husband Don and I imagine that we would be asked questions like this – by our six year old (we are blessed to parent two wonderful children – our six year old daughter who is developing typically and our son who has special needs). Quite honestly, we hesitated, tried to catch our breath, stumbled on our answers before we could *start* to answer her questions. We tried to reassure her that she was safe, that our family was safe, that her school was safe. We talked of terrorism, what it is, why it is. We talked about feeling sad. But despite our best efforts it seemed that our assurances were not what she needed. “But if they tried to kill lots of people then why wouldn’t they try to kill us?”. In the end, if it makes no sense to us as adults, as people with many more coping skills than a child then how could it make sense to a six year old?

What our daughter needed was “hanging out time” time where she could ask questions if she wanted, *not* ask questions if that is what she wanted, talk about September 11 if she wanted. She needed what she always has needed. Floortime and together time. But more of

it. She needed to know that even though horrible, scary things happen in the world that *her* life was pretty much the same.

It was through spending more time together, through play, through discussions that could take place without starting with “we need to be at swimming in 20 minutes – let’s talk after that” that her anxiety started to decrease. She still visits the issue – sometimes it is obvious – where Barbie’s mom doesn’t get on the plane to fly to a conference because her kids are scared that her plane will crash”. And sometimes it is not so obvious - like separation anxiety at her very familiar ballet class or not wanting to go to a playdate unless “mommy, daddy and Gray can come too”.

This process for her is not over. She is still troubled by the events of September 11, 2001. For now, as we struggle to come to grips with the events of the past month, it feels good to hang out more, to play more, to listen better, to rush less. Perhaps this is one of the positive messages to emerge during such a sad, sad time.

Education

Barbara Kalmanson, Ph.D.

“The Army Men are Watching Us”

Monica Osgood

On September 11th, 2001 it was “business as usual” in classrooms at the Decker School in North New Jersey. Although the phones were frantic, and a few parents came to pick up their children, teachers kept teaching and the children experienced a typical Tuesday. It was the days that followed that shed light on how this event was effecting even the youngest of minds.

The principal met with the staff and asked them to downplay the situation. Our public school serves children pre-k through second grade (special and regular education) and she felt these children were too young to be exposed to the details. However, being in close proximity to New York City, many of our children were affected in some way. What staff did do with the first and second graders included:

- Discussions about the emotions/feelings related to the event
- Discussions about how we can make people affected by the event feel better
- Discussions and activities targeting “remembering”
- Discussions about safety, unity and what should happen next
- Real contributions to the people affected

As I walked from classroom to classroom I participated in several discussions and activities. It was interesting to see how children of different ages and levels of children

responded. There was a range of responses from hidden fears to attention-seeking, anxiety-based behaviors. Most children talked about the event enthusiastically while teachers took special care to maintain a feeling of peace and safety. The children enjoyed making cards for the fire fighters and policemen and other tangible activities that made them feel like they were a part of the process. Some children needed special attention and are still receiving this. Several of these children are showing fears such as being afraid of heights (going above the first floors in buildings). Children are asking a lot of questions about planes and buildings in general and want to know if we are safe. Other children are obsessively drawing pictures or acting out the event with toys. Some of our children with developmental challenges are trying to process the situation by engaging in behaviors to see what type of responses they will get. These behaviors include nervously laughing and calling out “Osama,” calling out other shocking statements, giving drawings of the event to people, standing on a desk and yelling “I’m the World Trade Center!” etc.. All of these children are receiving individual intervention that targets attaching the appropriate affect to the meaning of the event. By facilitating understanding with these children, we have seen improved regulation, seen less impulsive behaviors and more sympathy and realistic expressions of emotions. Social stories and role play are used in these sessions and parents

are involved to give consistent support at home.

I wanted to conclude by sharing some wise words with you. Children give us new insights into even the grimmest of situations and these are no exceptions (Decker children ages 6-8):

- “Our country is one big family. When some of them are hurt, we all feel sad.”
- “It made me feel better to put out candles so I will never forget those people.”
- “Those terrorists should be ashamed of themselves!”
- “It makes me feel better to sing The Grand Old Flag.”
- “The terrorists shouldn’t have knocked down the World Trade Center. They should be in jail and throw away the key and only feed them octopus! It hurts our country.

They will not do this again. Bush demands this!”

- “It made me feel bad. I hope the firemen feel better soon. We sent letters to them and the army men who are fighting for our country. They’ll probably be happy.”
- “I feel safe because the army men are watching us!”

Children have a unique ability to make us feel better in the toughest of times. They give us a reason to keep going and to work towards making this world a better place. They are also our future and it is crucial we give them the tools to process their emotions effectively, reflect, reason and make good decisions. Knowing that our goal is to help them learn to deal with the world is what makes ME feel safe!

Monica G. Osgood, Director
Celebrate the Children

Clinical Insights

September 12: The Mourning After

By Robert Naseef, Ph.D.

As a new day dawned, blurred fiery images flashed before my eyes. I ate my cereal and turned on the television which confirmed that it was no nightmare. My eyes glassed over as the image of the inferno burned in my brain. What about the injured? The walking wounded? The living? Their families and friends left behind? The rescuers with their battered senses? And what about the rest of us forced to watch helplessly? Can we ever heal from this?

September 12 was the first day of the rest of our lives. September 11 had

begun as a typical day. We went to sleep, if we could, with New York and Washington smoldering, a nation bereaved—with new and special needs. We will all remember where we were when we heard the news. Like any great loss, that moment will punctuate our lives into a before and after.

I was in my office in Philadelphia listening as a psychologist to people’s problems when my wife called me with the news of what she was watching on television. The city was being evacuated; schools were dismissed; I

just wanted to be home with my family to see their faces and hear their voices. I wanted to feel the sun on my face and smell the fresh air of a late summer day and share it with those I love.

Now on the morning after I struggled to comprehend what I had seen and heard. Tears welled up as I heard the news that had accumulated overnight. As I listened to others today, many of whom have children with disabilities and chronic illnesses, I struggled with them to place the events in the context of the life I have known so far.

Everyone said that the tragedy was giving them perspective. These folks have known personal tragedy. Some of them have lost a healthy child. Some of them have lost the child they dreamed of. Some of them are waiting for their child to die. Others are recovering from a child's death.

What was the same? The numbness, unreality, fear, worry, sadness, helplessness, and a consuming anger. You want a target to strike back against--like the doctor who gave you the news or the hospital where your child was born. You are powerless, and yet you want to believe you have power. You have a mindset that seems as if it would never change for life would never be joyful again.

What was different this time? I wasn't alone as I was when I found out my son had autism and that the condition would last for his lifetime. I can remember believing that I would never smile or laugh again. I wanted to be alone then. I didn't want to believe what was happening. This time I wanted to be with people.

The Japanese writer and Nobel Prize winner, Kenzaburo Oe, has eloquently described this kind of very intense and exceptionally personal loss. In 1964,

Oe's first child was born with brain damage. He described their bond in a story called "Teach Us to Outgrow Our Madness." Oe and his fragile child became so close that Oe believed he would die if Pooh died. Oe perceived his child's impact on his hopes and dreams as a nuclear explosion--a personal holocaust. Coming from a man who grew up in Japan in the aftermath of Hiroshima and Nagasaki, this is a powerful metaphor. Often people have spontaneously described to me how the diagnosis of their child's disability was a bomb that exploded life as they had known it.

Now there is a bomb to our group psyche. Healing the hurt from our losses, both individual and collective, will take time measured more in years than days. We will need support and courage and love to make it. The intense feelings evoked by the terror will cycle through us in myriad individual ways. We have to experience this remarkable pain in order to accept the reality of our losses.

In the time that has passed since September 11, I have struggled to gain perspective. Whether you are in the 90% who are in favor of the military intervention or the 10% who are not, we all want peace although we may differ greatly in how we believe we can get there. The anger and the wish for revenge are normal and natural responses to the disaster. The trouble sleeping and the jitteriness of further disasters are common.

What helped each of us before? Will it work now? What new things must we learn? As parents, we need to guide our children. As healthcare professionals, we are called on to help our patients and clients. Can we help each other, whatever our station in life? Where do we find the emotional shelter?

We can go on with our lives, but we are not the same. Ancient philosophers--eastern and western alike--believed that there could be redemption born from tragedy. Perhaps this can be an occasion for us to show our children how to make the world a better place.

But where do we start? We live in small everyday worlds. More and more I am finding that the simple warmth of human kindness is the best antidote for what ails us right now. People are telling me that little things like more eye contact

from strangers brighten and lighten their days. What helps you?

For me, I have to hope that in our little worlds one of the most profound things we can do is to make peace one heart at a time. Shalom, Salaam, Pax, Friede, Peace.

Robert A. Naseef, Ph.D., is the author of *Special Children, Challenged Parents: The Struggles and Rewards of Raising a Child With a Disability*. He can be contacted at rnaseef@alternativechoices.com or through www.specialfamilies.com.

What To Do With The Future?

Molly Romer Witten, Ph.D.

Reprinted with the author's permission from an article appearing in *Zero to Three Journal*.

The car radio gave me the news about the terrorist attacks on the World Trade Center and in Pennsylvania, when I was ten minutes away from my office that Tuesday morning. I pulled to the side of the road, because I did not think I would be able to simultaneously drive and decide whether what I was hearing was a hoax or not. After a few minutes of listening, it finally became clear that the tragedy was all too real. Because my first patient was probably hearing the news in the same manner that I was, on her way to my office for her appointment, I continued on to my office.

My first patient: Abigail (I have protected her privacy by changing names and certain details) is the mother of two children diagnosed as having autism. Each child had a comprehensive treatment plan in place, with multiple therapists and a therapy/FloorTime schedule that would make a CEO of a multi-national corporation appear lazy. Three months into their intervention process, their mom worried that she was 'going to lose it soon', if she did not get

some relief from the stress she felt. It was then that she decided to begin psychotherapy for herself. That was four years ago. Both children are currently included completely in the regular education system, with IEPs in place to address their individual learning needs. They enjoy school and their relationships with their friends. Neither has a diagnosis of autism. Over the four years of intervention, Abigail and her husband rearranged their lives, their livelihoods, and their personal goals to support their two children to have the best chance at effective development. In the process, Abigail reports that she has found an unexpected, deep, satisfaction in her relationships with her children.

Abigail and I arrived at my office at about the same time. She was close to tears. We sat together listening to the radio. Abigail spoke only to express her confusion, and sense of dread. After about fifteen minutes, she called her husband. Together they decided to pick the kids up from school and stay at home until they could perceive the scope of this wanton violence. What

could help in this moment of real and present danger, and what did she need in order to support herself and her family? She asked me “How do I explain this situation to our kids so that they can feel safe? How can I keep the kids safe?”

I alerted her to the issue of traumatic stress and ineffective re-enactments. We discussed what has, by now, become a mantra: “Don’t watch the TV very long, and don’t let the children watch the TV”. You, the parent, be the one to explain the situation to your children. Let them get the news through you. And, emphasize that you, the parent are still in charge of your family. A small child’s world revolves around their parents: their world is framed by what they experience with their parents. Each time you witness the horror over again, you hurt your body with the re-experience of horror, and any other body who attempts to make sense of the situation by watching it over and over again. Abigail commented “Boy, it sure is a good thing that we already struggled with limits, and that our kids feel ok with us setting limits. Otherwise, keeping the TV off would be a nightmare.” Abigail narrowed her focus of the catastrophe to her children’s needs. Not only did her insistence that she take care of her kids help her modulate her own fear and despair, it helped her maintain a focus on “what’s next”. Abigail found a way to integrate the awful horror of 9/11 as it unfolded by staying related to the future. By constructing an understanding of what her children needed in this moment, she created for herself a future oriented response to the horror.

By late afternoon, two ‘moms’ had cancelled. As the day progressed, fantasies, the evolving news, and rumors swirled underneath the surface of our therapeutic collaborations. At irregular intervals, whenever a moment to reflect occurred in the rhythm of my

day, an immediate question surfaced. What balance to this senselessness I could provide for my patients? What would allow them to work through their own association of feelings? What focus of my work could bring comfort, or at least a sense of agency in this unimaginable situation?

The day after the attacks, and the second day after the attacks, more parents and children called to ‘just check in’, to confirm appointments or to explain their absences from our appointments. In the clinical context, the tragedy of 9/11 distinctly burdened the parents of small children with disabilities. Three more mothers, individuals who I would not have judged to be more than mildly or situationally depressed, called to cancel their appointments. These moms usually come so consistently that I can know the time of day and day of the week by their arrival. They each gave a similar answer: we put so much energy into trying to help our small children join the world, and relate to us, and for what? So that some terrorist can blow them or all of us, up? To varying degree, each of these mothers was teary and unable to function for up to three days, in one case. For these three mothers, helping themselves or their children maintain a sense of safety, and agency through the immediate crisis and aftermath, was extraordinarily difficult. The terrorist attacks exposed the fragility of our perception of safety and our sense of agency.

Safety. We guard our children to keep them safe to grow up and reach adulthood as fully as they can. When we are children, we look to our parents to keep us safe. It is a biologically organizing goal of the attachment process. When we become adults and parents, especially adults steeped in the culture of the United States, we alert

ourselves to the need to keep our children safe, and we do it by staying related to them and their needs. We presume that we can always relate to them, and thus always keep them safe. The parents whose abilities to function in the parent role were most affected (temporarily), seemed to lose sight of their own sense of agency in the world, and the power of their choice to relate to their children. They seemed to experience safety as a condition that somebody else is responsible for providing. They did not find a sense of safety or agency in promoting or protecting their relationships with their children.

By the end of the fourth day, each of the three mothers called me to thank me for calling them back (when I called to acknowledge that they had canceled their appointments for themselves and their child). They seemed surprised and curious that I would call. One of the mothers asked me "Why did you think calling would help? Just hearing your voice did help. But, how did you know that it would help?" Truthfully, I didn't absolutely know, but I hoped.

Irene Stivers' work through the Wellesley Center for Women has suggested that the effect of violence is to create an interpersonal disconnection. My intent in calling each of my patients (who did not come for their appointment) was to remind them that we were connected around other deeply painful issues in the past. I wanted to express my impulse to maintain our relationship now, during this bewildering and painful time. My calling reflected my knowledge that, interpersonal relatedness is an individual choice, not an automatic reflex. Any sort of violence, such as the terrorist attacks, provokes interpersonal disconnection and interpersonal distance. We physically and emotionally distance to preserve safety. Three days following the nightmare another of the

parents that I work with suggested that he and his wife were thinking of moving to Canada. If an entire community engages in this distancing, without physically leaving, we are unable to attune to each other, find empathy, or communicate. When that situation occurs only more violence and disconnection can ensue. For those of us who are not in charge of whole countries, and do not have armies at our disposal with which to protect ourselves, our best tool is our ability, and our choice, to pursue the process of relationship. Parents caught up in their own struggle to raise children with disabilities can lose sight of their core power: to relate to, to understand, and to connect with their children.

Another patient, a mom with whom I collaborate in dyadic treatment with her small son, put her struggle with the terror succinctly. "As a mother of a small child with behavioral issues, I am already operating at the fringe of my energy level, my ability. When something like this happens, I have no reserves with which to maintain my hope." The effect of the terrorist attacks was to rob some of my patients, and some of the parents of my patients of their hope, built moment by moment through satisfying interaction with their children. This disruption to their daily routines threatened despair and hopelessness. Four days after the attack, another mother, vulnerable in her inability to hold onto hope, questioned the efficacy of the intervention process in which she and her family had engaged for twenty-two months. She questioned whether she ought to continue the emotionally grueling, time consuming, interpersonal juggling act of bringing her son to his therapies that just one week earlier she had judged to be 'therapeutic' and promoting development. Her fear distanced her from her own awareness of the strength of her son's relationships with his

therapists, and her relationships, also with her son's therapists, and most importantly, the power of her relationship with her son.

Intervention embodies our desire to help children become all that they can become. Our desire to intervene also reflects our fervent hope that in doing so they will enjoy their relationships to others. It is this hope that parents and professionals share in common. Intervention is the embodiment of all that we as a culture hope for our most vulnerable babies and children. The terrorist attacks had the potential to disrupt our personal sense of safety and power. Our fear of danger, and the heightened awareness of risk, robbed many of the parents that we collaborate with of a sense of hope that our children can find meaningful relationships with others. Hope grows easily in an environment of safety and personal agency. It has a harder time enduring in a context of terror.

Safety is not the only ground in which Hope can grow, however. We nurture

hope, through our relatedness to each other. In our satisfaction, born of relating, we can also develop a sense of self-agency and personal power to protect ourselves. We are capable of acting on the very fringe of our energy which the mother of my patient spoke of, to reaffirm our relationships with each other. These are concrete actions that function as a counterbalance for the terror we all felt on September 11th. As therapists, we can help the families that we work with give meaning to their and our desire to intervene with infants and children. To understand that in our work together, we grasp onto our hope for the future, and we demonstrate our own power to dream, to make a difference. Our hope is that we can help children grow up to be productive, surprising, delightful, members of our community. Our dream is that each child, regardless of disability or environmental limitation, experiences a robust sense of self-agency and a capacity to relate to others in meaningful and satisfying ways.

Helping our Children in These Difficult Times

Stanley I. Greenspan, M.D.

The past several weeks have been difficult ones, at best, since the terrorist attacks began on September 11, 2001. The uncertainty and stress of the times affects all of us and has a significant impact on our children. Parents, teachers and other caregivers need to be aware in times like this, when everyone is worried and scared, children require a number of basics.

The first basic they require is an *enhanced sense of security*. For children security comes from relationships, particularly with their parents or caregivers so they need more

time with their parents. That time needs to be a soothing and comforting time, as opposed to a chaotic time. This is good for the whole family, because adults need time with their spouses and time with the children to create a sense of security for the entire family. So that's the first step, *to increase the security through family relationship*.

The second step is to *help children articulate their concerns*. This applies to preschoolers, school age children and teenagers helping them talk about their scary feelings. Be sure to listen to all their feelings. Don't cut them short and

don't refer them too quickly. Help them verbalize all the scary feelings and angry feelings and the disappointed feelings, depending on what the child wants to talk about. Don't press the child who's avoiding talking about it to talk about it, but give him opportunities. Come back to it periodically and just open up the subject, but if the child really wants to avoid it, or changes the subject to talk about sports, or talk about a favorite TV show, go with the flow, and maybe emphasize the fact that this is scary for everyone. But don't press it on the child who's avoiding it. Keep giving him opportunities and for that child provide even more security.

In addition to helping the child feel secure and express his feelings, let the child know what you're doing, and also what the government is doing to provide extra safety and help the child understand the fact that they are safe. That there are steps being taken and that they may even see signs of this, like more police at airports and things like that, so that these things won't reoccur. So, let them know the concrete steps that you are doing as a family, what the police are doing and the government is doing.

Children of all ages like to do things to contribute and be part of things. They feel better when they're a part of the process. Some schools are promoting doing this with kids by helping them raise funds for families that have been directly involved in the attacks. Others are making up cards for people in the

hospital. Children like to do things so having projects where they can contribute is very, very good.

Remember that everyone is very sensitive to the emotional climates in their homes and in their communities and so, even if the children are not being exposed to the images on TV, or not being exposed to direct conversation that their parents are having, they're going to feel the emotion and the tension and the worry and the anxiety in the atmosphere. You should certainly protect them from the more violent images and the direct conversations. Just be as soothing and as nurturing as possible, but assume they're going to pick up, to some degree, what is going on around them.

The only way that adults, teenagers and older children are going to be able to create an atmosphere for the younger children which is soothing and more regulating, is to also feel some confidence in the long term plan that the country has for tackling this problem. Most teenagers I talked to want a balanced approach which included not only appropriate protection but also reducing the conditions that lead to terrorism and violence.

In general, since everyone is feeling anxious, the same steps should be followed: enhanced sense of security, articulate concerns and feelings, pitch in and be part of the recovery process in some way.



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