



# **The BEST PRACTICES**

Newsletter  
Of

*The Interdisciplinary Council on  
Developmental & Learning Disorders*

*Vol.7 No. 2*

*4938 Hampden Lane • Suite 800  
Bethesda, Maryland 20814  
Phone: 301 656-2667 • Fax: 443 738-0350  
Website: [www.icdl.com](http://www.icdl.com)*

*Stanley I. Greenspan, M.D., Chair  
Serena Wieder, Ph. D., Associate Chair*

*Jo Raphael, M.S.W., Editor  
Molly Romer Witten, Ph.D., Clinical Editor*

*The Best Practices Newsletter* of the Interdisciplinary Council on Developmental and Learning Disorders 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 E-mail your comments to:  
Jo Raphael, MSW, Editor: [jraphael1@comcast.net](mailto:jraphael1@comcast.net).





## EDITORIAL NOTE

*Jo Raphael, MSW and Molly Romer Witten, Ph.D.*

Dear Readers,

As the summer comes to a close we find ourselves moving through transitions with our children. Your summer probably included many changes in schedule creating opportunity for growth and change. One change many of us tackle in the summer is toilet training. We start the process hoping that we can help our children achieve success at toileting skills quickly. From the DIR® perspective the process of achieving success is as important (if not more so) than actually becoming toilet trained.

We will focus on monitoring all three facets of the child's spontaneous functioning: that they are developmentally ready for toilet training, that they learn about their individual differences, and, finally, inevitably, our response to our child strengthens our relationship with our children for the better.

Toilet training is a marker of growth, development and becoming a 'big boy' or 'big girl' for most children. Our children often have difficulties related to their individual differences (their capacity to experience their own internal cues and their capacity to communicate what their experience is). Our children's bodies inform them as to what and how they feel, what is comfortable and what is not. In this, as in all development, we must base our supportive actions on what our children communicate to us, verbally and non verbally. Pressures from camps, schools and our own toileting experience may push us to urge our children into training before they have the capacity to alert to their own internal cuing that tells them "I gotta go". We then go looking for some magic formula that will promise us quick learning and instant success with our children developing bladder and bowel control. In taking this perspective, we are privileging our memories over our relationship with our child.

Finally, if our child has the bodily capacity to 'hear themselves' when they have to use the toilet, and we are on board in supporting them to 'do it their own way', we still have to be certain that our son or daughter WANTS to take on this developmental task from lower self-reflection to greater self-reflection. It takes self-reflection to put all the cues together, and sequence the emotional and physical actions that indicate to a boy or girl that "I gotta go". We have to wait until they are ready – both emotionally and physically.

We have dedicated this edition of the newsletter to exploring a DIR perspective on toilet training. We introduce our perspective with an article based on questions from a parent and continue with articles from a team of clinicians who might be like those working with your children.

As always, we look forward to hearing from you. Your feedback and contributions are important to us. Please write with questions, comments or contributions to [jraphael1@comcast.net](mailto:jraphael1@comcast.net) or [beso1948@sbcglobal.net](mailto:beso1948@sbcglobal.net).

Best regards,

*Jo & Molly*



## DEALING WITH DEVELOPMENTAL MILESTONES:

### FAQ on Toileting

*(Questions graciously submitted by a parent from Chicago)*

#### **1. How will I know that my son is ready to train?**

When your child is related to you and wants to please you, as well as himself, when he alerts, orients to and listens to his own individual cues and communicates them nonverbally or verbally, He will respond to wooing in this regard.

#### **2. Given his sensory issues, how will I know if he is reading the internal signs that he needs to use the bathroom?**

He will let you know in many ways, that he has developed the capacity to communicate his wants, needs, and ideas. You will find yourself in situations with him where he says “mama, I’m thirsty” or takes your hand when he wants you to play with him. When he knows what he wants in other situations, and he can communicate that to you, he will be ready to begin gaining control of his toileting habits. Again, this is function of him being developmentally ready for mutual communication, having an on-going awareness of his own individual cues as well as his own motivation to experience this growth within his relationship with you. (Level II of the Tasks of Early Emotional Development)

#### **3. Given his challenges in staying focused and difficulties sitting still, how can I help him stay seated long enough to allow his body to work?**

Make sure that it is enjoyable and consistent-and be persistent. Build up slowly to sitting for a reasonable period of time, taking his individual differences into account. Pair your knowledge of his tolerance of quiet sitting with your capacity to enjoy being with him, so that he doesn’t think of it as sitting, but he

thinks of it as relating with mommy or daddy, and finally make sure that he is eager for the developmental step of becoming a ‘big boy’ in your eyes.

#### **4. What should I do to help with the process without creating a “pressure to perform” issue for him?**

Pressure becomes destructive only when the child is not developmentally ready to be a ‘big kid’, when your son or daughter has individual differences that slow their learning to orient to their own internal tension. Finally, and maybe most difficult of all, learn to cope with your own anxiety around toilet training without allowing it to spill into your relationship with your child, so that your relationship with your son supports your son’s attempts whether they are successful or not.

#### **5. What words and actions are appropriate praise for his successes?**

Just like you would for any other activity that your son is participating in, observe how he is engaged in the process, not the outcome. Use your relationship with him to let him know that you see how hard he is trying to learn this skill. Encourage him to find his own individually meaningful sources of self-esteem, rather than simply praising him. For one child it may be that he did ‘what papa wants me to do’. For another child it may be that his individual differences make it extra hard for him to feel the good feelings of accomplishment in his body. For that child you might want to find many many moments of accomplishment in-the-moment, so that he builds an internal memory of ‘I can do this’.



**6. What words and actions are appropriate for times when he has “accidents”, so that we don’t compromise his self-confidence?**

Follow your child’s **Individual differences** and let him know that you understand his bodily needs and everybody has accidents, all their lives. Rather than avoiding the disappointment of not being ‘master’ of his body, use this opportunity to deepen your relationship with him so that he can learn to repair his self-esteem.

**7. Is an award system appropriate for a child with sensory challenges—such as a gift of stickers for each success on the way to learning to use the potty (from sitting on the potty to actually using the potty)?**

External reward systems can be useful, but most children figure them out within a week of being implemented. They are a sort of script that does not support the on-goingness of intentional toileting capacity that you are encouraging with the relationship with your child. It rather helps develop the initial developmentally supported intention to ‘try sitting’ on the potty, and then using it to explore a new way of ‘letting go’.

**8. Should he watch videos and should we read him books on the subject?**

If this activity is one that you and your child already share, yes, by all means

use whatever activities you and he find mutually engaging and satisfying to help you help him develop the capacity to persist at an activity in relationship with you. Often rigid consistency in our actions leads to a lack of developmentally appropriate exploration and we do not want to go down that road.

**9. Should we encourage him to use the potty at various routine points during the day, for example, upon waking in the morning, before a nap, waking from nap, before a bath, before bedtime, after a meal...?**

Yes-consistently but not rigidly. When we adhere to a ‘rigid schedule’, we rob our child of learning about what happens if he doesn’t listen to himself when he has to go. We assume the responsibility for his success, rather than using our relationship to help him grow into that responsibility. Helping our children develop the capacity to be consistent in their orienting to their own individual ‘I gotta go’ cues can be supported by our noticing that they need to eliminate around the same time every day. But, helping them develop this awareness has to be paired with enticing them, or wooing them into making it their own responsibility is the developmental step we want them to navigate.

***CONSIDERATIONS FOR TOILET TRAINING***

Lisa DeFaria, MSW, LCSW

When considering toilet training there are a number of things that must come into play with any child before they are “ready.” With a child who has challenges, in communication, sensory dysfunction and/or motor skill delays we have to be particularly patient.

There are a number of comprehensive books available on the subject of “toilet training” typical children as well as children on the autism spectrum (Go to [www.SpecialNeedsProject.com](http://www.SpecialNeedsProject.com)). In these books and with every person you



talk with, you will find that there are many ways to approach toilet training, I typically recommend starting with the question of "readiness."

Ask yourself - is my child truly "ready" to use a toilet for bladder or bowel elimination? This is developmental milestone, just like others, requiring a hierarchy of skills in place before toileting can be achieved successfully. Here are a few tips. If your child is not ready in the following areas, please don't push it. Perhaps begin to introduce one or two readiness strategies at a time, and be prepared for a long run (however, he or she may just surprise you!). Remember, every child is different.

**1. *Can your child sense that he/she has to relieve him/herself?***

Many children with challenges do not have the sensory feedback that tells them their bladder is full or their bowel is about to move. And today's plush wick away diapers don't promote this awareness. Consider a few strategies to help inspire more awareness. Cut out the elastic on your paper diapers by day. When your child urinates, that will catch the bulk of it - but the wetness will be more apparent. (Children with sensitive skin, prone to rashing, will need help cleaning and drying off quickly.)

A couple of sunny days (that's why people often wait for summer) where he or she can trot around the backyard sans clothing - eliminating spontaneously - may help your child begin to be more aware of his "output." Be there with your child - draw his/her attention gently, "Jason, look the pee came out of your body and onto the grass."

**2. *Is your child comfortable with his/her pee and poop? Meaning not upset by it....?***

Use whatever term you and your family are most comfortable with labeling the elimination ("pee" and "poop," for example.)

You can help reduce any anxiety he/she might have about eliminations by avoiding terms like "yucky," or by acting revolted. (That may scare your child and increase dependency on the diaper.)

Use terms like "wet", "sticky", "uncomfortable", with facial affect that mirror the same and suggest that you empathize with his/her discomfort, but are not disgusted by it. (Note, in Floortime fashion we are providing "intentions" where they may not yet exist...he/she may not yet identify a feeling of discomfort, but with a bit of practice and attention to the process, he/she may in fact become more aware, if not a bit uncomfortable.) "Jason, that is a very wet diaper. Let's get you a fresh one."

**3. *Is your child ready to be brought into the diapering process?***

Encourage your child to fetch the diaper or the wipes, and dispose of the soiled one, shake the poopy diaper refuse into the toilet, and flush.

**4. *Is he/she curious about the potty habits of others?***

If you are comfortable, let him/her watch you or other family members use the toilet. If he/she is in a preschool, where other children are using the potty (often an open-door activity) - encourage him/her to notice, "Jason, Luke is using the potty to pee in." And suggest matter-of-factly that, "Someday you will be a boy/girl who uses a potty too."

(Note the sound of a toilet flushing - particularly in cavernous public restrooms can be quite upsetting to some children. Make a habit of "casually" visiting bathrooms at friend's



homes and public restrooms, just washing hands, perhaps. If comfortable, use the potty yourself, invite your child to do the flushing. Don't force it.)

**5. Does your child signal that he/she has to go?**

For example, is he or she beginning to move away from others when pooping in the diaper - to a corner perhaps? Does your child's face grimace, or are there gestures, even words perhaps, he/she uses? Note the obvious in a matter-of-fact tone, "Jason, you are in the corner. Maybe you are making a poop. When you are finished, you can tell me. Then we can change the diaper."

For the child who's overwhelmed by too much language, consider using "Boardmaker," (your child's speech therapist may have this computer program) or even still photographs that you paste down - a visual schedule - that step by step sequences the actions: Jason in corner squatting to poop (wearing clothes and a diaper), Jason taking mom or dad's hand and walking, Jason on changing table while a new diaper is put on, Jason and mom/dad smiling happily.

**6. Can your child pull his/her pants down and up again?**

Time to move to easy elastic waists if you haven't already.)

**7. Can your child climb up and onto things in general comfort?**

Some parents prefer to start with a potty chair, others try an adaptive toilet seat on the regular potty, with a step up stool or attached "ladder." However, if your child is feeling off balance or at risk of "falling in," he/she will be resistant. Make sure your attachment is a very steady one.

**8. Can your child sequence (motor plan) the steps involved?**

Consider sharing highly visual "potty books," (such as "Every-one Poops"). If you have access to "Boardmaker" - create a visual schedule to post by every toilet in the house that sequences out the steps involved: from pulling down pants, to climbing on potty, to urinating, wiping, climbing down, pulling up pants, flushing and washing hands. Carry one with you when out and about. Let him/her eye the strip, long before you are hoping he/she actually does something with it.

Your child needs to have the opportunity for gentle, non-directive, exposure to the toileting process, before any expectations are put on him/her to begin attempting it. In fact, it is ideal to wait until your child initiates it - by climbing on the toilet and imitating you for example. Much applause, for you are on your way....

Do note - when a child is ready, most children start with some control over urination, by day, progressing to being dry at night, and even later still day and night control for bowel movements.

**TOILET TRAINING – Suggestions for the Child with Challenges**

Beth Osten, OTR/L

For all children, toilet training represents the transition from the dependency of infancy and toddlerhood to the independence of a preschool child. The skills involved represent the integration

of many functions including sensory modulation around bodily functions, body awareness and control of the sphincter, communication, the motor planning needed to walk to the toilet and



manage clothing, cognitive awareness of causality and the emotional maturity to psychologically separate and become independent from one's parents. For children with challenges in communication and/or sensory processing, the training process can be long and frustrating both for parents and for the child. With attentive planning and patience, it can also be a shared and rewarding success experience.

Awareness of the child's challenges can ease the transition from diapers to underwear. Parents will find that this is an excellent time to use Floortime as they negotiate and help the child to regulate. Circles of communication and back and forth interactions will help the child to wait on the toilet for something to happen. Engagement with the child serves to remind the parent that their presence is so important for keeping their child calm and regulated around all of the sensations that occur during toileting.

Well thought out preparation is critical. Select a potty that provides support for the feet and handles to stabilize while bearing down. Help the child practice the sequence with a doll or stuffed animal. It helps to familiarize the child with the process by watching siblings or parents use the toilet. Signs that the child are ready include staying dry for two or more hours, awareness of needing a change, observable facial expressions or behavior that signals that the child is voiding, and regular and predictable bowel occurrence of bowel movements. The child should also be able to follow simple directions and communicate basic needs and wants. Establish a hand washing routine. This is particularly important if the child is or will be going to school. Schools often insist on hand washing after toilet use.

Just as you might have worked to establish routines around sleeping, eating, napping and toileting, try to stay within a familiar routine during toilet training. Offer the child opportunities to try at times that they might be likely to void such as after meals, before bedtime, when waking up from a nap. Before moving the child into underwear, start to connect diaper changes with the bathroom. Pull-ups can be useful at this time. If the child does not have awareness of being wet, wearing underpants under the pull-up may increase the sensation of being wet. There are training diapers on the market that are also designed to enable the child to experience a wet feeling.

When the child needs to be changed, do it in the bathroom. If possible, change the child in a standing position. If the child is wet, let him see the diaper before disposing of the diaper. If the diaper is soiled, show the child the diaper, shake the stool into the toilet and let the child flush the contents of the diaper in the toilet. Allow the child to participate in wiping. Moist Baby wipes may be easier for the child to manage than toilet paper but either may be used. Involve the child in clothing management during changes and practice dressing and undressing when getting dressed in the morning and undressed at night. Praise interest that the child shows but avoid pressuring the child. You can support the child's self esteem by emphasizing the steps and skills that make up the process and downplaying the final result. It takes time to learn our own cues for elimination. We learn to use the toilet by listening to our own cues first and foremost, and by developing the capacity to create a plan to act on our cues. When you praise the interest that the child shows in trying, you support the process and the resulting capacity to predict and successfully use the toilet



will happen.

Prepare for the move into underwear. Let the child select his or her own underwear or pick underwear with a favorite character. Choose a time that will be free from pressure. Summer is often a good time because there is less clothing involved and time can be spent outside where a wet diaper is less likely to be a problem for parents. Have a supply of the child's favorite books and toys near the toilet so that they are likely to stay longer. Blowing toys like horns or bubbles are good because the blowing facilitates sphincter release. Visual supports can be useful for all children for communication of need and the sequence of the process. Some parents find it helpful to leave water running to encourage urination. Stay with the child and be reassuring if there are fears. When the child is finished, let him leave the toilet even if he has not voided.

Reference:

Wolraich, M.L. and Tippens, S. *American Academy of Pediatrics Guide to Toilet Training*, 2003. Bantam Books: New York.

Accidents can be expected. Watch for facial expressions that may indicate that voiding is about to happen and suggest to the child that it is time to use the toilet.

It is best to avoid a "power struggle". The child will usually win. Try to maintain a calm, positive, and encouraging attitude. Continue to use diapers at night until the child consistently awakens with a dry diaper. Make a plan for managing accidents both at home and when the child is out of the home so that accidents are not experienced as crises. It is critical at this time that parents manage their own feelings. Children quickly pick up on over eagerness, pressure and disgust. They can be easily shamed by parental responses. With patience and a positive attitude, the process usually proceeds successfully.

## SAVE THE DATES!!!

### **September 14-17, 2006: Amsterdam, The Netherlands**

*DIR/Floortime: Introductory Training Course for Professionals and Parents.* The first congress in Europe about the DIR® Model & Floortime. Presented by Faculty from the DIR® Institute: Serena Wieder, Ruby Salazar, Rosemary White and Sima Gerber. For further information and registration materials, visit <http://www.rino.nl/floortime>.

### **September 29-30, 2006: Wilmington, NC.**

*DIR/Floortime Approach.* Presented by Rosemary White, OTR/L. Sponsored by the Open Doors Foundation in partnership with OT Solutions, Inc. For conference brochure with registration materials, click here ([doc](#)) ([pdf](#)). For more information, visit [www.opendoorswilmington.org](http://www.opendoorswilmington.org) or email [nantonelli@ec.rr.com](mailto:nantonelli@ec.rr.com).

### **November 10, 11, 12, 2006**

### **Pre-Conference Workshops, November 8-9, 2006.**

*ICDL 10th International Conference on Autism and Disorders of Relating and Communicating.* Hilton McLean, Tysons Corner Virginia (Washington DC Metro Area). [www.icdl.com](http://www.icdl.com).



PLEASE VISIT [WWW.ICDL.COM](http://WWW.ICDL.COM) and [WWW.FLOORTIME.ORG](http://WWW.FLOORTIME.ORG)  
FOR UPCOMING EVENTS.

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Stanley Greenspan, M.D., Chair

Serena Wieder, Ph.D., Associate Chair

Dear Friends of ICDL,

In November, The Interdisciplinary Council on Developmental and Learning Disorders (ICDL) will celebrate its 10<sup>th</sup> anniversary. ICDL, founded by Stanley Greenspan and Serena Wieder, has been a pioneer in its work to advance the identification, prevention and treatments of developmental and learning disorders. Through its research, training and publications ICDL has created a cadre of world class professionals across multiple areas of expertise who are extending the reach of the DIR® model and the framework of Floortime™ as a fundamental component of intervention programs for individuals with difficulty in relating, communicating and thinking, including autism spectrum disorders.

ICDL welcomes your contribution to this Tribute through: 10 an editorial contribution. Briefly, the Tribute book will be comprised of written pieces or artwork relating moments of connection, of understanding, of insight, or even of frustration. Through stories, poems essays and artwork, accounts from children, their parents, grandparents or siblings, will give glimpses into the unfolding of a profound journey. Together these contributions will represent a tribute to the DIR method and to the essential role of emotions as a critical building block for the progress for children with developmental and learning disorders. We hope that this Tribute Book will create a permanent record to help others understand the importance of DIR to a child reaching his or her true potential.

In addition to, or instead of an editorial contribution, you may also wish to consider making a financial contribution. All levels of contribution will receive acknowledgement in ICDL's 10<sup>th</sup> anniversary Tribute Book. The attached guidelines provide information regarding levels of support from which you may choose.

Lastly, we invite you to join us at our anniversary reception to take place during the fall conference, on Saturday evening, November 11, 2006 at the Hilton Tysons Corner, McLean, Virginia. If you are on our mailing list for the conference program, you will receive information concerning the reception via that mailing. Otherwise, in the coming weeks, you will find details and RSVP information on our website at: [www.icdl.com](http://www.icdl.com).

On behalf of ICDL, please accept our sincere thanks for your generous support and contributions in helping create enduring memories of hope and promise from this special occasion.

*ICDL 10<sup>th</sup> Anniversary Event Committee.*



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**GUIDELINES FOR CONTRIBUTIONS TO  
ICDL'S 10<sup>TH</sup> ANNIVERSARY TRIBUTE BOOK**

**(1) Editorial Contributions**

An editorial contribution to the ICDL Tribute Book can be made in one of a number of ways. Text contributions, limited to 400 words or less, may take the form of a letter to a child, a letter from a child, a poem, a brief essay, an anecdote, or a simple note of thanks. Options other than text can include, for example, a piece of children's artwork or a special photograph. Most important is that each contribution convey a personal message from the contributor, an observation, insight or bit of wisdom on the impact of ICDL's work on their life or that of someone close to them.

There is no cost to submit a piece. However, an editorial board will review and select submissions for inclusion. All selected submissions will be subject to editing based on content and book capacity, and to ensure thematic balance. If you wish your submission to remain anonymous, please state so when submitting. Contributors of the selected pieces will receive a copy of the Tribute Book.

Submissions should be sent by email no later than September 20, 2006, to: [tribute@icdl.com](mailto:tribute@icdl.com). Please be sure to include your contact information (name, address and telephone number).

**(2) Financial Contributions**

ICDL's 10<sup>th</sup> Anniversary celebration is an opportunity for you to acknowledge past accomplishments and to support future research and education initiatives. All levels of contributions will be acknowledged in the Tribute Book. You may choose from the following contribution levels:

- |                                      |                   |
|--------------------------------------|-------------------|
| I. Shared Attention and Regulation:  | Up to \$500       |
| II. Engagement and Relating:         | \$500 - \$1000    |
| III. Two-way purposeful interaction: | \$1000 - \$3000   |
| IV. Complex problem-solving:         | \$3000 - \$5000   |
| V. Creating ideas:                   | \$5000 - \$10,000 |
| VI. Building bridges between ideas:  | Over \$10,000     |

To close the circle please make your contributions no later than September 1, 2006. Checks should be made out to: ICDL – 10<sup>th</sup> Anniversary Celebration and mailed to:

ICDL  
10<sup>th</sup> Anniversary Tribute  
4938 Hampden Lane, Suite 800  
Bethesda, MD 20814

Please provide your full contact information: name, address, telephone number and email address.

For information on how to make financial contributions via the web please visit: [www.icdl.com](http://www.icdl.com).

*Thank you.*



## **NEW PUBLICATIONS ON DIR®/FLOORTIME**

### ***Engaging Autism: Using the Floortime Approach to Help Children Relate, Communicate and Think***

By Stanley I. Greenspan, M.D. and Serena Wieder, Ph.D., DaCapo Press.  
For more information on how to order this book, go to [www.Perseus Books.com](http://www.Perseus Books.com)

### ***ICDL Diagnostic Manual For Infancy And Early Childhood (ICDL-DMIC)***

Diagnostic Manual for Infancy and Early Childhood (ICDL-DMIC).  
The first comprehensive, developmentally based classification system for neurodevelopmental, (including autistic spectrum) mental health, language, and learning disorders. The ICDL-DMIC opens a new era in our approach to social, emotional, language, regulatory-sensory processing and learning challenges. For more information on how to order this book go to [www.icdl.com](http://www.icdl.com).

### ***New Second Edition***

***The Affect-Based Language Curriculum (ABLC):  
An Intensive Program for Families, Therapists and Teachers. 2nd Edition.***

By Stanley Greenspan, M.D. and Diane Lewis, M.A., CCC/SLP. An innovative approach to the development of language that integrates the affect based model of human development, developed by Stanley I. Greenspan, M.D. (e.g. the Floortime Model), with the development of receptive and expressive language, imitation, pragmatics, and engagement. The curriculum incorporates the principles of Systematic Instruction and Applied Floortime as the primary teaching strategies. It also includes supplemental oral motor and augmentative communication techniques that support the development of language. The new, Second Edition, includes updated and revised chapters as well as new sections on ABLC in the Classroom, Support Groups, and Foundation Activities with Expanded Elicitations for every skill from the checklists. The Second Edition also includes a CD with all Checklists, Tracking Forms, Systematic Instruction Skills and Applied Floortime Activities in Microsoft Word format for easy application.

## ***Participate In An Important New Research Study***

ICDL is looking for videotapes of children who have been diagnosed with autistic spectrum disorders showing the early months and years of life. If you are able to assist with this study by providing videotapes and background information, please call or write for more information. ICDL Early Detection Study, 4938 Hampden Lane, Suite 800, Bethesda, MD 20814, 301-656-2667.



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**DR. STANLEY GREENSPAN'S WEB-BASED RADIO SHOW**

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**Infants, Children and Families** is hosted by **Dr. Stanley Greenspan** and features a variety of guest speakers and topics; practical advice for parents, professionals and policymakers. Topics include early recognition and treatment of developmental difficulties; the misdiagnosis of autism spectrum disorders; learning to regulate moods and impulses; and pathways to empathy and thinking.

Call in live with your questions at (877) 907-8889, or email them ahead of time to [webradio@floortime.org](mailto:webradio@floortime.org). You can also email suggestions for topics and guest speakers.

**NOW AT A NEW TIME. THURSDAYS FROM 10:00 – 11:00 AM EST**