

## Children with Special Needs

Every child is special because every child is unique in personality style, appearance, adaptability, cognitively and emotionally.

Every child is valuable beyond measure.

These are the essential starting points in relating to children regardless of their life circumstances or their needs.

The basic needs of children include food, clothing, shelter (physical, social and emotional safety) and love at the minimum. When children have needs that go beyond the ordinary, families are usually overwhelmed in the near term and often overwhelmed for the long term as well.

In these situations, the challenges are many. They seem to come and go in intensity, making the conservation of time and energy very difficult.

Thus the first long term priority that should be considered is for parents and caregivers to determine to take good care of themselves physically, emotionally, socially, and spiritually. If the adults are not in good condition, they will be dissatisfied with the level of care that they are providing.

Effective parenting requires full agreement between the adults in this role, and this principle is even more important when it comes to parenting children with special needs. Problems seem to always be present, and it is easy to slip into life becoming "problem centered". When adults practice "Opportunity Based Problem Solving" and begin to see every problem as an opportunity looking for a solution, a positive outlook will gradually develop.

Our society is largely discouraging, emphasizing the negative. One of the best ways to be encouraged is to encourage someone else.

It is extremely important for families to develop a community of caring, supportive and positive people. These are people who have not bought into the 3 "B"s false foundation of personal esteem (Beauty, Brains, and Brawn), or the equally false foundation of performance.

Look for strengths and/or areas of function that are spared.

Strengthening a strength is usually a fairly rapid process, compared to remediating a weakness, which is often much slower and more energy consuming.

Relationship building is essential for all families. An in depth presentation of relationships and issues can be found on the Foundation page of this website.

A support group of families of children with special needs can be very helpful if the focus remains positive, there is mutual caring and oriented to being solution focused.

Families also need to incorporate compassionate and caring adults who do not have children with special needs into their social circle. These adults will often have more discretionary time and energy to be of assistance in time of need and can provide respite child care. Along this same line siblings need to participate in general social activities outside the family.

We trust that you will find a resource in The Family Resource Library that will be helpful. The application of basic principles can be individualized for each child. Also you are invited to check out Tips For Parents, A Note To Encourage, S.A.F.E.R. Homes, From My Desk, the Discussion Board and the other resources of GROWING BETTER FAMILIES. We hope to be able to serve you.

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## AUTISTIC SPECTRUM DISORDERS

A Framework for Developing Individualized Treatment Plans for Autistic Spectrum Disorders.

(Taken from Highlights from the American Psychiatric Association 2008 Annual Meeting)

As with many other psychiatric disorders, we now realize that autism is really a spectrum of disorders. Bryna Siegel, PhD, University of California, San Francisco, CA, provided insight into how clinicians might go about developing a functional model for treating patients with autistic spectrum disorder (ASD).

"Rather than spending a lot of time on the diagnosis," Dr. Siegel told the audience, "begin by cataloging the individual's deficits and strengths." Each individual with ASD is different, and an effective treatment plan will take into account how the individual perceives, processes, stores, and retrieves information. The plan should be based on the interrelationship between the individual's specific 'autistic learning disabilities' (eg, his social, verbal and non-verbal communication, and play and exploration deficits) and the 'autistic learning styles' that have automatically developed to compensate for these impairments. Dr. Siegel provided several examples. For patients who have a strong need for routine, rather than thinking of the routines as bad, make them functional and use them as a way to make the environment more predictable; for individuals who have verbal communication deficits, encourage affiliative contact by focusing conversations toward topics that are of interest to the patient.

In concluding, Dr. Siegel told the audience that each individual with ASD will be different and that it is necessary to go beyond diagnostic checklists. "Individualized interventions for the best outcomes are those that exploit relative strengths to compensate for relative weaknesses. Selection of tailored treatments should be based on this profile."

Commentary by Lowell E. Becker, M.D. "The above perspective is in good agreement with the general position of Growing Better Families regarding parenting and personal growth which is to "Strengthen a strength, change a concern into a strength and repeat".