

# SEPTA NEWS

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## PRESIDENT'S MESSAGE — JANE HELLBERG

Our biggest news at the moment is the imminent retirement of Barry Whalen. Barry has devoted many long hours to benefit the children of the Somers School District. It is going to be hard to replace him. We appreciate all he has done for the parents and children in Somers and extend to him our wish for the very best in all that is to come.

The school year is winding down, but there is still a lot happening in the school district. One of the most important items is a \$54.5 million bond that is being proposed for renovations to the schools. You can stay updated on the happenings throughout the summer by reading the North County News, The Journal News, watching cable channel 18, or checking the district web site.

Summer vacation is almost here. It is the perfect time to say

thank you to each and every person who made a difference in SEPTA this year. THANKS... for being a member of SEPTA; for attending the meetings; for reaching out to someone who needed help; for being a parent representative; for using the web site; for reading the newsletter; for buying plants at the Holiday Happiness Plant Sale; for making a contribution to the resource list; and most importantly, for SHARING.

Thanks to Barry and Alethea for their support; to the special education teachers who took time from their busy evenings to attend a meeting; to the SIS custodians who are ready and able to do whatever it takes to make everything go smoothly; to Maureen, Clare, and Manuela in the main office at SIS who answer questions, fill out forms, and provide help whenever it is

asked for; and to a fabulous executive board that kept everything moving in the right direction.

SEPTA is a network of parents and teachers whose most valuable resource is the knowledge they possess. Providing a forum to share that knowledge is what makes SEPTA so special.

SEPTA still needs a president for next year. If you think you might like to try the job, contact Nicole at [NicoleHorowitz@aol.com](mailto:NicoleHorowitz@aol.com) anytime. She will be delighted to hear from you! A great deal of help and support is available. We are going to try to keep things going until someone takes the job.

Hope your summer is filled with fun, relaxation, family time, adventures, and lazy days. It's been a busy year! Enjoy every minute of it.

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## MESSAGE FROM SPECIAL SERVICES Barry J. Whalen, Director

Dear Parents,

Eighteen years ago I was given the opportunity to serve as the Director of Special Services in Somers. In this role I have faced many challenges and have experienced many rewards.

At the end of June I will be retiring and look forward to new challenges. I am leaving this position confident that our special needs students will continue to receive the high quality education you have come to expect in Somers.

Since 1987, when I began working here, the special education opportunities have expanded with the

school population and have been adapted to meet the continually changing needs of our students. I am happy to be able to report that through our inclusion program the number of classified students taking and passing regents level classes has increased dramatically. The self-esteem of these students has also grown significantly. It is also a pleasure for me to be able to visit self-contained classes in Primrose, Somers Middle School and Somers High School that serve students who had previously been placed in out of district programs. I am happy to report that a new class for this stu-

dent population is in place for September at Somers Intermediate School.

As a district, Somers is unified in its desire to provide the teachers with a high quality of staff development so that they can be equipped with the best information to serve our children. Next year a number of special education teachers will receive specialized training in a reading system that has proved beneficial to a large number of learning disabled students throughout the country. It will be a new strategy that will be added to

(Continued on page 2)

**MESSAGE FROM SPECIAL SERVICES (CON'T)**

the variety that is already employed by these teachers. As always, the goal will be to address the learning styles of a variety of students with special needs. Our teachers are looking forward to learning about and implementing this new methodology in the classroom.

During my time in Somers, I have been extremely fortunate to have worked with so many outstanding educators. I will miss seeing them on a daily basis, but will receive comfort from the fact that I know they will continue to work with you and your children in the same dedicated manner they have been doing already.

Since I announced my intention to retire I have received some very nice calls and notes from a number of parents and even former students. There may have been times when we did not agree on certain matters but these calls, notes, and personal meetings have assured me that you knew that I was always available and ready to help. Believe me, the hugs and handshakes that I have received from you are extremely gratifying. I have always tried to be fair, caring and concerned for you and your children and appreciate your support of me throughout the years.

I wish you and your children the best of everything in the years to come.

Sincerely,

**Barry J. Whalen**

## CHANGES TO SEPTA NEWS DISTRIBUTION

As of the 2005-06 school year, only the September issue of *SEPTA News* will be sent home to all the parents of Primrose and SIS. All subsequent issues will be posted on our website - [www.SomersPTACouncil.org/SEPTA](http://www.SomersPTACouncil.org/SEPTA).

SEPTA members will have the option of having the newsletter e-mailed or snail mailed to them. The appropriate information for these options will be included on the 2005-06 membership form.

## New Reports on No Child Left Behind Implementation

From the National PTA publication, *This Week In Washington* - April 1, 2005

The Public Education Network (PEN) recently released "Open to the Public: Speaking Out on 'No Child Left Behind'," a report on public hearings PEN held around the nation and an online survey it conducted on NCLB. The purpose of the hearings and survey was to hear from parents, students, and community members about their experiences with NCLB. One of the key findings in the report is that NCLB is not fulfilling two of its major goals - to provide more information to parents regarding their children's education, and to provide parents the opportunity to have an impact on their children's schooling. The report also found that even when schools are providing the required information on school status, teacher quality, transfer options, and supplemental educational services, the information is often confusing and not available in par-

ents' native languages. Parents also expressed frustration that money is not being provided for programs that would truly help get parents involved, especially those parents who do not speak English.

The Center on Education Policy (CEP) released its third annual in-depth analysis of NCLB's implementation, "From the Capital to the Classroom: Year Three of No Child Left Behind Act." CEP reports that although the findings point to preliminary signs of improvement, there are serious problems that must be fixed. Jack Jennings, president of CEP, stated that "the law runs the risk of being good at identifying problems, but not being good at providing the help to solve those problems." The findings are based on surveys of education officials in 49 states and a

nationally representative sample of 314 school districts, and on case studies of 36 districts and 37 schools.

These reports support National PTA's position that without better implementation of the parent involvement provisions, NCLB will not succeed in changing the climate of mistrust that exists in some communities between parents and school officials, and will not fulfill its promise to provide quality educational opportunities to all children. National PTA is committed to working with Congress and the US Department of Education to ensure that parent involvement provisions of NCLB are fully implemented.

## LEGISLATION

### Combating Autism Act of 2005 - Update News from [www.naar.org](http://www.naar.org)

In a move to address the growing epidemic of autism in the United States, landmark legislation was recently introduced which would greatly expand the federal government's role and response to the developmental disorder. The Combating Autism Act of 2005 (H.R. 2421), the House version of Senate Bill 843, was introduced in the House on May 18th by Congresswoman Mary Bono (R-CA) and US Congresswoman Diana DeGette (D-CO). The legislation would authorize \$110 million annually over the next five years to combat autism through research, screening, intervention and education efforts.

"Autism is the fastest growing developmental disability in our nation," said Congresswoman Bono. "Fortunately, the medical community is responding by increasing their efforts to effectively diagnose, treat and cure this disorder. Currently, both the cause and cure are unknown, often leaving families with feelings of frustration and hopelessness. The goal of this legislation is to support the medical community by augmenting current federal efforts by reauthorizing federal funding and allowing for better coordination of the federal response to autism," added Bono.

"Right now, autism is a disease that leaves families with far too many questions and far too few answers. While the medical community has made important steps in addressing this disorder, there is still much more to be done," said

Rep. DeGetter. "That is why it is so critical that we put this full weight of the federal government's scientific resources behind efforts to develop better ways to diagnose, treat and hopefully cure autism."

The Combating Autism Act of 2005 would provide grant programs for every state to develop autism screening, early diagnosis and intervention programs for children. The Act would additionally provide money for the Centers for Disease Control (CDC) epidemiological surveillance programs. And, the legislation would reauthorize the Interagency Autism Coordinating Committee (IACC), established in the Children's Health Act of 2000, to coordinate all efforts within the Department of Health and Human Services concerning autism, including activities carried out through the National Institute of Health and the Centers for Disease Control.

Companion legislation was introduced in the U.S. Senate under the same title by Senator Rich Santorum (R-PA) and Senator Christopher Dodd (D-CT).

"Unraveling the mysteries of autism demands a large, collaborative effort on many fronts," said Prisca Chen Marvin, board chair of the National Alliance for Autism Research (NAAR) and the mother of a child with autism. "This legislation is critical to our ability to continue advancing our search for answers - for children and families today and for future generations." Autism is considered the fastest growing developmental disorder in the United States, occur-

ring in as many as 1 in every 166 births. Despite this strikingly high prevalence, autism research remains one of the lowest funded areas of medical research in both the public and private sector. Our government must rise to the challenge faced by an absolutely overwhelming number of our children.

Much appreciation goes to all the friends and families of the autism community who wrote their Senators about the importance of the Combating Autism Act of 2005, S-843, and we urge you to continue this effort. With the introduction of this bill to the House of Representatives, NAAR is asking for your support once again to write your local Representatives about the importance of the Combating Autism Act of 2005.

To locate your Congressman or Congresswoman in the US House of Representatives and for a sample e-mail to urge him/her to support this request for research go to [www.house.gov/writerep](http://www.house.gov/writerep).

To locate your Senator in the US Senate and for a sample e-mail to send to urge him/her to support this request for research, go to [www.senate.gov](http://www.senate.gov).

Please remember to let us know which elected officials you have sent requests to on behalf of this issue by sending an e-mail to [naar@naar.org](mailto:naar@naar.org). We'll keep track of which members of Congress sign on to this effort.

...letting kids discover things for themselves is as important as anything you can teach them.

### High School Reform Put On Hold

excerpt from *This Week In Washington*, May 6, 2005 issue

President Bush's high school reform initiative faced a major setback in May when Rep. John Boehner of Ohio, chairman of the House Education and the Workforce Committee, said that no legislation to authorized the president's initiative would be considered this year by the committee. Boehner said that he supports the president's desire to reform high schools in principle but added that it is too early to expand the No Child Left Behind Act (NCLB) into high schools.

Echoing these sentiments, Rep. Mike Castle of Delaware, chairman of the Education Reform Subcommittee, said that he was unsure how to extend NCLB into high schools. Castle also said that there is political opposition to the expansion of NCLB into high schools from both Republicans and Democrats.

Bush announced his plan to allocate \$1.5 billion in his fiscal year 2006 budget for the expansion of the testing and standards required under NCLB into high schools on January 12, 2005. Noting that American high school students lag behind

their peers from other countries, the president proposed expanding NCLB's annual testing mandates through the 11th grade. (For more information on the president's proposal, read the January 14, 2005, issue of *This Week In Washington* on the National PTA's website.)

Though legislation will not be forthcoming this year, Boehner will hold several hearings on high school reform in the coming months, with an eye toward legislation being introduced next year.

# Medical And Therapy News

## CHILDREN WHO DON'T FIT IN: It May Be Asperger Syndrome\*

Adam Shery is a dark-haired and soft spoken honor student who acts in his high school plays, likes to ski and was a state finalist for the National Geographic Bee three years running. Adam, 15, has a winning smile and a polite manner that masks his difficulty in relating to other people. Adam has a neurobiological disorder called Asperger Syndrome, in which the part of the brain that helps with communication fails to develop properly. Although Adam was a brilliant child who read the *New York Times* at the age of two, he could not make eye contact or converse appropriately with other people until only recently. His parents, recognizing early that something was wrong, brought in specialists to help Adam learn the social skills that come naturally to most people. He has done well, but still must work hard in his personal interactions. "I don't always know the right thing to say in a social situation," he says. "I

may not correctly read verbal cues. I have a few friends, but not as many as I would like."

Asperger Syndrome, which is genetically based, was not officially recognized in the US until 1994. Michelle Dunn, PhD, an assistant professor in pediatric neuropsychology at the Albert Einstein College of Medicine, said that the disorder may affect more than one in every 500 people, and that there is no blood test for the condition, which can be detected only by observing children's behavior.

Children with the disorder usually prefer to be alone instead of playing with other children. They may have impressive vocabularies, but speak repetitively about one particular topic. They may also be clumsy, use repetitive hand motions and talk in a monotone or with an odd singsong voice. These children have a hard time fitting in with their peers and are often bullied and teased for being different.

They are literally clueless because they cannot read the facial clues that are a cornerstone of effective communication.

According to Lori Shery, Adam's mother, who is president of the Asperger Syndrome Education Network, the disorder is thought to be a form of autism, occurring in people with normal to superior intelligence. When children are properly diagnosed by a neurologist and given special help in learning social skills, she said, they can live satisfying lives in mainstream society. In fact, Adam now says that one of this biggest problems in not knowing what to say to girls, as mainstream a problem for adolescent boys as there ever has been.

\*Source: *MonteKIDS News*, Spring 2005.

## ADHD drug may boost cancer risk, study finds Kids' hyperactivity treatment may harm DNA, researchers say\*

A treatment for attention deficit-hyperactivity disorder in children may cause damage to DNA that can raise the risk of cancer, according to a study of 12 children to be published in *Cancer Letters*.

The children, who took the drug methylphenidate for three months, had an average three-fold increase in the number of chromosomal aberrations, abnormalities in DNA that, while often harmless, sometimes lead to cancer, said researchers led by Randa El-Zein of the University of Texas M.D. Anderson Cancer Center in Houston. Other types of DNA damage also increased significantly, the study found.

U.S. sales of the medication, better known by the brand name Ritalin and sold by Novartis AG and in generic versions, surged in recent years, increasing five-fold from 1990 to 1999,

the report said. More studies are needed to determine whether the medicine, which has been used for more than 50 years, actually raises cancer risk, researchers said.

"The lack of research on the long-term effects of methylphenidate use in humans warrants great concern," the researchers concluded. "At present, it is not clear what the long-term effects would be for children who took methylphenidate 10 or 20 years ago or for those who are currently being treated with this drug."

Studies also may be needed to see whether related drugs such as Shire Pharmaceuticals Group's Adderall XR, pulled from the Canadian market because of sudden deaths, have similar risks, the study said. Shire, based in Basingstoke, England, also is developing a methylphenidate patch called Methypatch with

Miami-based Noven Pharmaceuticals Inc.

"We see no increased risk of cancer in the currently available literature, but we're taking the study seriously, and we'll further examine the results," Novartis spokesman John Gilardi said in an interview.

Johnson & Johnson sells a longer-acting version of Ritalin called Concerta.

"These findings have never been reported before, despite the number of years that methylphenidate has been on the market," Kathy Fallon, a spokeswoman for the Johnson & Johnson unit that makes the drug, McNeil Consumer & Specialty Pharmaceuticals, said in a telephone interview. "We agree with the authors that the study should be replicated in a much larger sample size."

\*Source: *The Journal News*, Saturday March 19, 2005

Children inhabit imaginary worlds, not for the sake of pure fantasy but to test their creative instincts.

- *The Book of Secrets*, by Deepak Chopra

# ADHD: THE GREAT MISDIAGNOSIS

Excerpted from the preface and introduction of *ADHD: The Great Misdiagnosis*, Revised Edition, by Julian Stuart Haber, MD

As indicated by statistics in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, fourth edition (DSM-IV), and by the American Academy of Pediatrics' definition of ADHD, the incidence of ADHD in the U.S. has remained between 3% and 5% for several decades.

However, in many schools, 15% or more of the student population take various medications for this malady. One mother with a student matriculating at a school for gifted students recently said that an entire class in that school was on medication at the behest of a teacher who believed that her students were inattentive and could perform better on psychostimulant medication. Common psychostimulants are Ritalin (methylphenidate), Dexedrine (dextroamphetamine), and Adderall (multiple salts of amphetamines).

In the fifty-county area in which I practice developmental behavioral pediatrics, until two years ago it was not unusual in some schools to see lines stretching down the hallway from the nurse's office, as children waited their turn to take Ritalin and related drugs. Since the advent of long-acting stimulant medications the lines have decreased. Nonetheless, the number of children on medication continues to increase. In some communities, the greatest increase is in the lower socioeconomic populations, where medication has become a replacement for adequate educational remediation and psychological and family services. In other areas, the greatest amount of stimulant medication is prescribed in the most affluent neighborhoods. At the 2002 annual meeting of the Pediatric Academic Societies, Dr. Marsha Rapley reported that a large quantity of stimulant medication was being prescribed to Michigan children without a recorded diagnosis of ADHD.

Indeed, in several states in the South and Midwest the incidence of Ritalin and Adderall use in the student population is much greater than elsewhere in the country. A study at a large referral center for child behavior and development in St. Louis revealed that more 30% of the children referred for

ADHD did not meet the diagnostic criteria for the problem. Nonetheless, almost 20% of the noncriteria group were already under treatment with Ritalin or similar drugs. In other words, many children were being medicated for a condition they did not have.

The US Drug Enforcement Agency production quotas for methylphenidate increased by more than 3,000 kilograms between 1990 and '95. More than 90% of methylphenidate is produced and prescribed for children and adolescents with ADHD. This represents an almost sixfold increase in the manufacture of this drug and perhaps is an indicator of the marked increase in the diagnosis of ADHD. The drug manufacturer Shire Richwood Laboratories reported almost a doubling in the number of prescriptions for Adderall between 1996 and 99.

According to a 2001 article in the American Academy of Pediatrics' (AAP) journal *Pediatrics*, the use of stimulant medications in preschool children between 2 and 4 years of age has tripled. A set of guidelines issued the following year by the AAP revealed that between 1990 and 2000 there was a sevenfold increase in the use of Ritalin and similar medications. ADHD had become the most prevalent neurobehavioral disorder in childhood, and one of the most common public health problems in children between 6 and 12 years old. 30% to 50% of all visits to the offices of mental health professionals are now for the diagnosis and/or treatment of ADHD.

The fear of misdiagnosis and overuse of medication led the AAP to develop a tool kit for the diagnosis of ADHD. Dr. Carole Lannon, chair of the AAP Guideline Implementation Efforts Committee, recently asserted that only 25% of clinicians use appropriate criteria when making the diagnosis.

"Sometimes doctors just sort of talk to people and put the child on a drug," she said. Five times as much medication is used in the U.S. as anywhere else in the world except Australia, which reported a threefold increase in the prescribing of stimulant medication between 1993 and '96. If the manufacture and usage of medication and statements from professionals are indicators, then perhaps as much as 15% of our child and adolescent population is being treated or evaluated for ADHD. The

implication is that America has an epidemic rivaling any that has besieged our population in the past century.

Do we really have an epidemic, or is an overzealous, entrepreneurial-minded group of people in the pharmaceutical, health care, and nonprescription drug industries promoting the disorder? Are well-intentioned periodicals presenting the public with partial and uncritical bits of information concerning ADHD that can be applied to many children who are normal?

If this is one side of the issue, then there are several other questions that need answering as well. Has the population of children, and young adults with ADHD increased to a greater extent than knowledgeable professionals are willing to admit? Has there been an under diagnosis of this disorder in the recent past, or has a large new population of young people with this problem suddenly arisen? Are professionals overdiagnosing the disorder by being intolerant of normal variations, or by using insufficient and inaccurate diagnostic criteria? Are parents, grandparents, and teachers intolerant of normal variants in motoric activity and inattention in children? Are experts in medicine, mental health, and education making the diagnosis of ADHD when other medical, sociological, or mental health problems are present instead? Lastly, is ADHD a relatively new disorder, appearing not long before it was first described in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-III)* in 1980?

A number of other disorders, diseases, and problems display the same sets of symptoms as ADHD. Frequently, children with these symptoms are treated unnecessarily, or at times given medication for the wrong problem.

This book is different from other ADHD books on the market because it address what Attention Deficit Hyperactivity Disorder is and what it is not. It exposes some of the chicanery that has led to an explosion of cases at epidemic proportions. Furthermore, it gives treatment options: medical, nontraditional, behavioral, and remedial. Finally, to make the text reader-friendly and understandable, I have illustrated complex concepts through the use of real events in people's lives.

**OFFICERS**

**PRESIDENT** Jane Hellberg  
**VICE PRESIDENT** Lisa Immerblum  
**SECRETARY** Laura Hanlon  
**TREASURER** Katherine Realbuto

*“Together we can make a difference.”*

**Somers Central School District**

Special Services Barry Whalen  
 277-3777 Alethea Schepperly  
 Superintendent of Schools Dr. Joanne Marien  
 248-7872  
 Asst. Superintendent Mrs. Kathy Mason  
 248-5531

Please note our new website  
 address

*We're on the Web!*  
*[www.SomersPTACouncil.org/SEPTA](http://www.SomersPTACouncil.org/SEPTA)*

**PLEASE NOTE:** The following is a compilation of resources that SEPTA members have used and found helpful. While SEPTA does not endorse any individual resource, we do hope that you find this list useful.

**NYS PTA Special Education Chairperson**

Josephine Macchia Dalerone@aol.com 631-893-5123

**Books**

*It's Nobody's Fault: New Hope and Help for Children and their Parents*, by Harold S. Koplewicz, MD  
*A Mind at a Time*, by Mel Levine, MD  
*Educational Care: A System for Understanding and Helping Children with Learning Problems at Home and in School*, by Mel Levine, et. al.  
*Turnabout Children: Overcoming Dyslexia and Other Learning Disabilities*, by Mary MacCraken  
*123 Magic*, by Thomas Phelan (ADD resource)  
*Loving Your Child is Not Enough*, by Nancy Samalin  
*No Easy Answers: The Learning Disabled Child at Home and at School*, by Sally L. Smith  
*Straight Talk about Psychiatric Medications for Kids*, by Timothy E. Wilens

**Books for School Age Children**

*All Kinds of Minds: A Young Student's Book About Learning Disabilities and Learning Disorders*, by Mel Levine, MD  
*Putting on the Brakes*, by Patricia Quinn (explains ADD)

**Websites**

National Library Service for the Blind and Physically Handicapped -  
[www.loc.gov/nls/](http://www.loc.gov/nls/)  
 The National Reading Panel  
[www.nationalreadingpanel.org](http://www.nationalreadingpanel.org)  
 National Information Center for Children and Youth with Disabilities (NICHCY)  
[www.nichcy.org](http://www.nichcy.org)  
 Parent News  
[www.parent.net](http://www.parent.net)

\* This is only a partial list and will be changed in each issue of the newsletter. For a complete list, please see our website.

**THE CRACKED POT**

A water bearer in India had two large pots, each hung on each end of a pole which he carried across his neck. One of the pots had a crack in it, and while the other pot was perfect and always delivered a full portion of water at the end of the long walk from the stream to the master's house, the cracked pot arrived only half full. For a full two years this went on daily, with the bearer delivering only one and a half pots full of water in his master's house. Of course, the perfect pot was proud of its accomplishments. But the poor cracked pot was ashamed of its own imperfections, and miserable that it was able to accomplish only half of what it had been made to do.

After two years of what it perceived to be a bitter failure, it spoke to the water bearer one day

by the stream. "I am ashamed of myself, and I want to apologize to you."

"Why?" asked the bearer. "What are you ashamed of?"

"I have been able, for these past two years, to deliver only half my load because this crack in my side causes water to leak out all the way back to your master's house. Because of my flaws, you have to do all this work and you don't get full value for your efforts," the pot said.

The water bearer felt sorry for the old cracked pot and in his compassion he said, "As we return to the master's house I want you to notice the beautiful flowers along the path."

Indeed, as they went up the hill, the old cracked pot took notice of the sun warming the

beautiful wild flowers on the side of the path, and this cheered it some. But at the end of the trail, it still felt bad because it had leaked out half its load, and again it apologized to the bearer for its failure.

The bearer said to the pot, "Did you notice that there were flowers only on your side of the path but not on the other pot's side? That's because I have always known about your flaw, and I took advantage of it. I planted flower seeds on your side of the path, and every day while we walk back from the stream, you've watered them. For two years I have been about to pick these beautiful flowers to decorate my master's table. Without you being just the way you are, he would not have this beauty to grace his house."