



## Coping with Trauma

Disasters such as hurricanes or other traumatic events can cause emotional strains for children and youth (adults too!). Bouncing back from these types of events can be difficult and the effects may be long-lasting. When children experience a trauma, watch it on TV, or overhear others discussing it, they can feel scared, confused, or anxious. Young people react to trauma differently than adults. Some may react right away; others may show signs that they are having a difficult time much later. As such, adults do not always know when a child needs help coping. This tip sheet will help parents, caregivers, and teachers learn some common reactions, respond in a helpful way, and know when to seek support.

Many of the reactions noted below are normal when children and youth are handling the stress right after an event. If any of these behaviors lasts for more than 2 to 4 weeks, or if they suddenly appear later on, these children may need more help coping.

### Preschool Children: Age 0-5 years old:

Very young children may go back to thumb sucking or wetting the bed at night after a trauma. They may fear strangers, darkness, or monsters. It is fairly common for preschool children to become clingy with a parent, caregiver, or teacher or to want to stay in a place where they feel safe. They may express the trauma repeatedly in their play or tell exaggerated stories about what happened. Some children's eating and sleeping habits may change. They also may have aches and pains that cannot be explained. Other symptoms to watch for are aggressive or withdrawn behavior, hyperactivity, speech difficulties, and disobedience.

*Infants and Toddlers, 0-2 years old*, cannot understand that a trauma is happening, but they know when their caregiver is upset. They may start to show the same emotions as their caregivers, or they may act differently, like crying for no reason or withdraw-

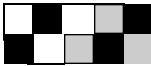
ing from people and not playing with their toys. *Children, 3-5 years old*, can understand the effects of trauma. They may have trouble adjusting to change and loss. They may depend on the adults around them to help them feel better.

### Early Childhood to Adolescence: Age 6-19 years old

Children and youth in these age ranges may have some of the same reactions to trauma as younger children. Often younger children want much more attention from parents or caregivers. They may stop doing their school work or chores at home. Some youth may feel helpless and guilty because they cannot take on adult roles as their family or the community responds to a trauma or disaster. *Children, 6-10 years old*, may fear going to school and stop spending time with friends. They may have trouble paying attention and do poorly in school overall. Some may become aggressive for no clear reason. Or they may act younger than their age by asking to be fed or dressed by their parent or caregiver.

*Youth and Adolescents, 11-19 years old*, go through a lot of physical and emotional changes because of their developmental stage. So, it may be even harder for them to cope with trauma. Older teens may deny their reactions to themselves and their caregivers. They may respond with a routine "I'm ok" or even silence when they are upset. Or, they may complain about physical aches or pains because they cannot identify what is really bothering them emotionally. Some may start arguments at home and/or at school, resisting any structure or authority. They also may engage in risky behaviors such as using alcohol or drugs.

Parents, teachers, and other caregivers can help children express their emotions through conversation, writing, drawing, and singing. Most children want to talk about a trauma, so let them. Accept



## Trauma *Continued from Page 1*

their feelings and tell them it is ok to feel sad, upset, or stressed. Crying is often a way to relieve stress and grief. Pay attention and be a good listener. Ask your teen and youth you are caring for what they know about the event. What are they hearing in school or seeing on TV? Try to watch news coverage on TV or the Internet with them. And, limit access so they have time away from reminders about the trauma. Don't let talking about the trauma take over the family or classroom discussion for long periods of time. Allow them to ask questions. Adults can help children and youth see the good that can come out of a trauma. Heroic actions, families and friends who help, and support from people in the community are examples. Children may better cope with a trauma or disaster by helping others. They can write caring letters to those who have been hurt or have lost their homes; they can send thank you notes to people who helped. Encourage these kinds of activities. If human violence or error caused an event, be careful not to blame a cultural, racial, or ethnic group, or persons with psychiatric disabilities. This may be a good opportunity to talk with children about discrimination and diversity. Let children know that they are not to blame when bad things happen. It's OK for children and youth to see adults sad or crying, but try not to show intense emotions. Screaming and hitting or kicking furniture or walls can be scary for children. Violence can further frighten children or lead to more trauma.<sup>3</sup> Adults can show children and youth how to take care of themselves. If you are in good physical and emotional health, you are more likely to be readily available to support the children you care about. Model self-care, set routines, eat healthy meals, get enough sleep, exercise, and take deep breaths to handle stress.

**A Note of Caution:** Be careful not to pressure children to talk about a trauma or join in expressive activities. While most children will easily talk about what happened, some may become frightened. Some may even get traumatized again by talking about it, listening to others talk about it, or looking at drawings of the event. Allow children to remove themselves from these activities, and monitor them for signs of distress.

The information in this article was provided by the Substance Abuse and Mental Health Services Administration (SAMHA)

**Disaster Distress Helpline Toll-Free: 1-800-985-5990**

For more information:

**<https://www.samhsa.gov/find-help/disaster-distress-helpline>**

**The National Child Trauma Stress Network:  
[www.ncth.org](http://www.ncth.org)**

## October is Down Syndrome Awareness Month

But it's not about celebrating disabilities, it's about spreading awareness and celebrating abilities. According to the Centers for Disease Control and Prevention, approximately one in every 700 babies (or approximately 6,000 each year) in the United States is born with Down syndrome, making it the most common chromosomal condition. Down syndrome occurs when an individual has a full or partial extra copy of chromosome 21. In every cell in the human body there is a nucleus, where genetic material is stored in genes. Genes carry the codes responsible for all of our inherited traits and are grouped along rod-like structures called chromosomes. Typically, the nucleus of each cell contains 23 pairs of chromosomes, half of which are inherited from each parent. Down syndrome occurs when an individual has a full or partial extra copy of chromosome 21. This additional genetic material alters the course of development and causes the characteristics associated with Down syndrome. A few of the common physical traits of Down syndrome are low muscle tone, small stature, an upward slant to the eyes, and a single deep crease across the center of the palm although each person with Down syndrome is a unique individual and may possess these characteristics to different degrees, or not at all.

The Down Syndrome Association of the Lowcountry (DSAL), established by a group of parents in the 1990s, is a volunteer driven organization created for local families. Their wish is to see children and adults with Down syndrome live fulfilling, empowered lives. Their mission is simply to provide support to new parents, enrich lives through art, athletic and educational opportunities and events, to increase community awareness of Down syndrome, to enhance employment opportunities for people with Down syndrome, and to improve education for students with Down syndrome.

For more information on Down syndrome visit:  
National Down Syndrome Society (NDSS): **<http://www.ndss.org/>**  
Down Syndrome Association of the Lowcountry (DSAL): **<http://www.dsalowcountry.org/>**  
Brighter Tomorrows: **<http://www.brightertomorrows.org/>**

**Don't Forget - The annual Buddy Walk is 10/1/17. Visit the DSAL website for more info.**

## Reporting IEP Progress to Parents

The IEP must identify when periodic reports on the progress the student is making towards the annual goals will be provided to the parents.

Regular reports to parents provide a mechanism to monitor a student's progress towards annual goals and to evaluate the effectiveness of the student's special education services. When a student does not make expected progress on goals, then it is essential to determine why and take corrective action.

The annual goals establish the criteria, schedule and method for evaluating the student's progress. Establishing goals that are measurable is important so that progress can be adequately assessed. To report student progress, the teacher must have gathered evidence of what students are able to do in each annual goal area. Establishing a systematic data collection system is the very first step to effective progress reporting to parents.

The method or combination of methods to inform parents of their child's progress is left to the school district. Based on the unique needs of the students, the manner selected to inform parents might vary from student to student.

The report to the parents should include a statement of goals with a written report of where the student is currently functioning in that goal area and/or a rating of progress to indicate whether the student's progress to date will likely result in the student reaching the goal by the end of the year/IEP. The progress report to the parents should be in addition to the student's regular report card that provides grades for courses or subject areas.

Progress reports should be reported at least as often as parents of nondisabled students are informed of their child's progress. The IEP should indicate the frequency of reporting.

### Quality indicators:

Progress is reported to parents in a manner that is understood by them and is objective.

Specific data is included in measurable terms regarding the extent to which the student is progressing towards meeting annual goals.

If the progress report that the student is not making expected progress on goals, there is a system in place to determine why and take corrective action.

**Take Away:** Make sure that you are receiving Progress Reports on a regular basis as described in your child's IEP. If not, notify the teacher or administrator. Make sure the teacher is sending Reports to you in a way that assures you receive them (i.e.: don't put them in a messy book bag & expect the student will deliver the information).

## Did You Know??

You can help the Family Resource Center simply by shopping on Amazon.com. Register us as your favorite charity at Amazon Smiles (we're on the list) then each time you purchase something by entering the Amazon website:  
<https://smile.amazon.com/>  
 a donation will be made to the FRC.  
 All features of Amazon are the same.

## Calling All Special Olympics Young Athletes

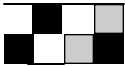


The Special Olympics Young Athletes program engages children ages 2-7 years old with or without intellectual disabilities in activities that develop sports skills like running, kicking, and throwing. Each week, children with a wide range of abilities learn how to interact and play together as they participate in fun recreational activities. The program is held every Saturday beginning September 30th through November 18th at two locations in Charleston County. Course 52774 is held at James Island County Park from 9 - 10 AM and Course 5275 will be held at North Charleston Wannamaker County Park from 11 AM - Noon. For more information and to register for this FREE program go to [CharlestonCountyParks.com](http://CharlestonCountyParks.com) or call 843-795-4386.

## Learn About Charter Schools

A charter school is an independently run public school granted greater flexibility in its operations, in return for greater accountability for performance. They must operate by their "charter," which establishes their mission, program, students served, performance goals & methods of assessment.

Many people think that charter schools do not have to accept students with disabilities. As public schools of choice, charter schools are required by law to provide special education services to students with disabilities and be in compliance with the Individuals with Disabilities Education Act (IDEA). Any student entering a charter school with current special education eligibility will be provided services, accommodations, and modifications as prescribed in the student's Individualized Education Plan (IEP). So, just like any other public school, charter schools are not allowed to deny admission



## Looking for a Support Group?

**Trident Head Injury Support Group:** meets the 1st Tuesday of each month from 7:00-8:30 PM at the HASCI Drop In Center, Westwood Plaza (intersection of Hwys 7 & 61), Suite 6, next to Hancock Fabrics. For more info: Marsha Mikell at 843-881-1214 or Colin DeResta at 843-852-5550. Follow on Facebook.

**Down Syndrome Association of the Low Country:** sponsors four Information Programs and four Social Events each year - in addition to Mothers Night Out. For a complete calendar of events, check their website at: [www.dsalowcountry.org](http://www.dsalowcountry.org) or follow them on Facebook. You may also call: 843-654-1552.

**Parent & Guardian Association of the Coastal Center:** This group supports those with a family member residing at the Coastal Center. General meetings are held four times a year. For more information contact Richard at (843) 821-5809 or Suzanne at 843-276-1001.

**Rett's Syndrome Support:** Families in need of a contact person to access support services for girls with Rett's Syndrome may call Hollis Gunn at 843-847-1248.

**Low Country Breeze:** This group is open to any person with a spinal cord injury or other mobility difficulties. The meetings provide a forum for the members to discuss issues and concerns and receive immediate feedback. Some members use the meetings to brainstorm possible solutions to ongoing problems. In addition, the group provides members with opportunities to develop a social network. Meetings are held on the second Tuesday evening of every month (6:00-8:00 PM) at AccessAbility, 7944 Dorchester Rd, #5, North Charleston. There are also special events throughout the year. For more information & to keep current with group activities contact Barb Delia at 843-557-4827.

**Grief Support Group for Children** - Bereavement group for children ages 8-12 (1 group) and 13-15 (2nd group) sponsored by Heartland Hospice, 1064 Gardner Rd, Suite 204, Charleston. For more information contact Johanna Workman at 843-766-7646.

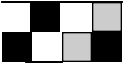
**Sickle Cell Sisters** (for teenage girls with sickle cell disease) is a therapeutic support group for teenage girls between the ages of 13 and 18. The group meets every other month at MUSC Children's Hospital and focuses on psychosocial aspects of living with sickle cell disease. For more information call Michelle Thompson at 843-792-0792.

**The National Alliance for the Mentally Ill (NAMI)** of the Charleston area offers support group meetings for individuals who suffer from a brain disorder and for family members and caregivers of those who have severe and persistent mental illness. Meetings are held at various locations and times. 1<sup>st</sup> Tues of the Month: *Moncks Corner Baptist Church, 500 East Main Street, Moncks Corner, SC 29461, 6-7:15 PM, in the Fellowship Hall beside the church.* 1<sup>st</sup> Thurs. of the Month: *Seacoast Church, Mount Pleasant, 750 Long Point Road, Mt. Pleasant. Enter from Egypt Road. Meetings are held at 6 PM. Family Support Group in Trailer #21 & Connection Support Group in Trailer #22.* 2<sup>nd</sup> Mon of the Month: *Seacoast Church, West Ashley, 2049 Savannah Hwy., Charleston, Use the Main Entrance. Support: 6:00-7:15 PM, Education: 7:30-8:30 PM. Education meetings for consumers and family members are held together. The speakers discuss various issues related to mental health.* 3<sup>rd</sup> Mon of the Month: *Bethany United Methodist Church, 118 West Third South Street, Summerville, 6:00-7:30 PM.* For more information, call Eric Hansen at 843-872-5080 or visit <http://namisc.org/> or [//namicharlestonarea.org](http://namicharlestonarea.org)

**Summerville Autism Support** - Join the Summerville ASD Mom's Facebook page to keep up with activities. The group meets frequently, but irregularly, for a night out. Please call Jodi Hortman (870-3485) for info.

**Epilepsy Support Group** for families of children with epilepsy meets on the 2nd Saturday of each month at Cathedral of Praise, Bldg. A, Room 103, 3790 Ashley Phosphate Rd., N. Charleston. Look for SAFE sign outside building. The Group meets from 11am-1pm (First hour is education/business meeting, second hour is support group) For more information contact Karen St. Marie at 843-991-7144 or at [Karen@scepilepsy.org](mailto:Karen@scepilepsy.org). Also check out their Facebook page under "South Carolina Advocates for Epilepsy".

**Low Country Autism Support Group** sponsored by the Early Autism Project meets the 2nd Tuesday of the month at the Early Autism Project Clinic, 1123 Queensborough Dr., Mt. Pleasant, from 6:30-7:30. Speakers



will be invited to each meeting and refreshments are served. Childcare is provided but you must register in advance for the free service. You do not have to be a client of the Early Autism Project to participate. Saturday respite events are being planned for every other month. For more information and to register for child care, call Anna Bullard at 912-293-5217 or visit [abullard@earlyautism.com](mailto:abullard@earlyautism.com)

**Support Group for Spanish Speaking Families:** 4th Friday of each month from 6-8 PM at the MUSC Northwoods Clinic, 2070 Northbrook Blvd., Suite A-16, N. Charleston. Call Marina at 843-876-2505.

**Limbs Without Limits** is an organization committed to support, motivate and empower individuals living with a mobility impairment. A support group meets the 2nd Tues. of each month at HealthSouth Rehabilitation Hospital Cafeteria, 9181 Medcom St., North Charleston from 6-8 PM. Everyone is welcome and encouraged to bring a family member or close friend. For more info call: Jeff Molan at (843) 991-2563

**Looking for Someone to Talk with about Autism?** There are two on-line ways to reach out to others in the "autism community." There is an on-line support group for teachers, professionals, service providers & family members. To subscribe, send a blank email to: [autismsouthcarolina-subscribe@yahoo.com](mailto:autismsouthcarolina-subscribe@yahoo.com). Also, there is a discussion group for parents & families who want to share their joys, stories, challenges, and solutions. To subscribe, send a blank email to: [scautismforum-subscribe@yahoo.com](mailto:scautismforum-subscribe@yahoo.com)



**Family Corps** offers a variety of trainings to adults in the community that are interested in learning more about child abuse prevention and parenting. They also offer **Parent & Youth Support Groups** throughout the Tri-County.

Group Designations are described as: (P) Open group: adult caregiver support group which includes parents, foster parents, and adoptive parents; (K) Relative Placements Group; (C) separate children's group for children ages 3-9; (Y) separate children's group for children ages 10-17; (SN) special needs group; (AM) Anger Management; & Spanish

The following provides the locations for the noted designated groups:

Cherokee UMC Church (P,C,Y,K,Spanish,AM), 2105 Cosgrove Ave, N. Charleston - Tuesdays at 6 PM

Cherokee UMC Church (SN), 2105 Cosgrove Ave, N. Charleston - Tuesdays At 6 PM

Neighborhood House (P,K), 77 America St., Charleston - Fridays at 1:30 PM

Oakbrook Y (P,C,Y,K,AM), 900 Cross Creek Dr, Summerville - Thursdays at 7 PM (Childcare provided)

Our Lady of Mercy Outreach (P,C,Y,K,Spanish), 1684 Brownswood Rd., Johns Island - Mondays at 6 PM

Dorchester County Prosperity Ctr (P,C,Y,K,AM) 222 Old Trolley Rd, Summerville - Thursdays at 6 PM

Berkeley County Prosperity Ctr (P,C,Y,K,AM), 325 Main St., Moncks Corner - Thursdays at 6:00 PM

In addition, Family Corps provides other parenting programs that require pre-enrolment. These include a Strengthening Families Program that meets Mondays from 6-8:30 PM, a 12 week Anger Management program (nominal fee charged) from 5-6 on Tuesdays, and the 6 week Triple P Positive Parenting Program (\$60 cost). To register and for more information, please call: 843-747-0480.

Also, there is a support group for parents of children with Aspergers, High Functioning Autism, Anxiety and related conditions that meets every Tuesday from 6:00-7:30 PM at Cherokee United Methodist Church, 2105 Cherokee Ave. North Charleston. Childcare is provided free of charge.

**Un grupo de soporte para familias de habla Hispana se reune el cuarto Viernes de cada mes de las 6 a las 8 en la Clinica MUSC Northwoods 2070 Northbrook Blvd, Suite A-16, North Charleston. Para mayor informacion llame a Martha al (843) 876-2505.**

### **Padres y grupos de apoyo juveniles**

**Grupo de apoyo de cuidadores adultos que incluye padres, padres adoptivos y adoptantes; Grupo de colocación familiar; Grupo de niños para niños edades 3-9; Grupo de infantil para niños edades 10-17**

*We try our best to keep this information current. If your group is listed here and no longer meets or if you have a group that should be listed but isn't, please call us: 843-266-1318*



## 9 Steps to a Better Relationship with Your Child's Teacher

The relationship you have with your child's teacher is extremely important. You should be a collaborative team. Consider these tips for building & maintaining a productive approach.

1. Keep an on-going list of things you want to discuss with the teacher.
2. When appropriate, praise the teacher for specific things you feel good about. For example, "Ms. Brown, thank you for spending extra time with Johnny to work on behavior. We really see results."
3. If you have a problem, discuss the specific things that bother you as they relate to your child. Do not generalize. In other words, do not say "You are not teaching my child, this is a wasted year." Instead, say "The math program doesn't seem to be working for Johnny. Is there a way we can change it to better meet his needs?"
4. Approach the teacher to discuss concerns in a positive, non-threatening way.
5. Keep the focus on your child, not the teacher's shortcomings.
6. Offer assistance in the classroom when possible. Decide with the teacher if this involvement is appropriate for your child.
7. Offer your time and talents. When possible volunteer as a room parent, help with field trips, etc.
8. When you make requests or suggestions, illustrate very specifically to the teacher how your suggestions can be implemented. If possible, share information on Research Based Practice. Follow-up your requests with a letter of thanks.
9. Attend all IEP meetings and conferences.

**We at the PTRC like these additional tips, especially as you participate in IEP and other school-based meetings:**

- Learn to disagree without being disagreeable. Be kind and courteous to everyone. It's all right to be assertive, but not aggressive, abusive, or abrasive.
- When someone says something with which you disagree, try not to be judgmental.
- Maintain eye contact when greeting people, and

- shake their hands if appropriate.
- Remember that civility is a sign of strength, not weakness.
- Speak softly. (People tune out loud, angry voices.)
- Saving face is important. Give your opponent the opportunity to withdraw.
- Your attitude is more important than your aptitude.
- Mutual respect is the key to avoiding conflict.
- Give the other person a chance to be heard without interrupting

### October is National Bullying Prevention Month

Historically, bullying had been viewed as "a childhood rite of passage" that "made kids tougher," but the reality has always been that bullying can leave devastating and often long-term effects such as a loss of self-esteem, increased anxiety, and depression for those involved. More than 1 out of every 5 students report being bullied.

National Bullying Prevention Month is a campaign founded in 2006 by the PACER Center's National Bullying Prevention Center. This Center laid the groundwork so that National Bullying Prevention Month is now a nationwide call to action around educating communities as to their roles in bullying prevention. This initiative has helped shift thinking away from bullying as a "rite of passage" and toward the knowledge that bullying can be prevented and stopped through education and awareness.

The PACER Center's National Bullying Prevention Center offers a wide array of resources and information on bullying prevention for parents, educators and the community. Visit: <http://www.pacer.org/bullying/>

### Charter Schools.....continued

because of a disability and they are required to provide all prescribed special education services to their students.

Some things families of students with disabilities should remember about charter schools:

- *They can't discriminate based on disability in application, selection, services, or exclusion after acceptance.*
- *Applications should not ask if the prospective student has a disability or needs a particular special education service.*
- *Students with disabilities, once accepted, must be provided with a free appropriate public education in the least re-*



## The Charleston Miracle League



### Play ball!

For typically developing children, those words evoke myriad images—the crack of the bat, the thrill of scoring a run, the smell of popcorn and hot dogs, singing along with the national anthem. The Charleston Miracle League brings those experiences to children with disabilities. Every Saturday from September 16 to November 11, the Charleston Miracle League will salute the American flag and then our teams will take to the Joe Griffith Miracle Field on West Oak Forest Drive. Youth players from age 5 and up will step into the batting box, swing and hit, round the bases, and score. Everybody hits, everybody scores, and everybody wins!

Participation in the Charleston Miracle League is completely free. Every player gets a uniform jersey and baseball cap, and receives personalized photo baseball cards and an award medal at the end of the season.

**Signing up to play is simple and free; just visit the Miracle League’s website at: [charlestonmiracleleague.org](http://charlestonmiracleleague.org). There is no weekly practice commitment, and players can join a team even after the season has begun.**

Charleston Miracle League games are adapted to the needs of individuals with disabilities, to allow all players to fully participate in spite of challenges. The specially designed field is smaller than regulation and has a wheelchair- and walker-friendly surface. Each player is paired with a non-disabled buddy for the 2-inning games, for socialization and assistance as needed. Family members and friends are encouraged to get out on the field and help, or to be fans in the stands to cheer the teams on. Volunteers and sponsors are always welcomed and needed. Volunteers can sign up through the website, as well.

In addition to the Youth League, the Charleston Miracle League has an Adult League for players aged 19 years and up. Like the Youth League, the Adult League is free of charge, and players get all the same perks, especially the fun! Everybody deserves a chance to play baseball!

## A One-Stop for Reliable Information

A need was expressed for one-page resources that could be shared with families and our parent technical assistance center found a goldmine. The American Academy of Child & Adolescent Psychiatry (AACAP) has created an extensive collection of one-pagers that they call *Facts for Families*. The selection includes over 100 information sheets on topics that range from specific emotional, behavioral or mental health conditions, medications, developmental or stage-of-life issues, to dealing with life events such as disasters, death of loved ones or bullying. The AACAP graciously allows for the reproduction and distribution of these fact sheets as long as proper source credit is acknowledged and no profits are made from them. Take a look!

[http://www.aacap.org/AACAP/Families\\_and\\_Youth/Facts\\_for\\_Families/FFF-Guide/FFF-Guide-View-by-Topic.aspx](http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/FFF-Guide-View-by-Topic.aspx)

### Charter Schools.....continued

*strictive environment.*

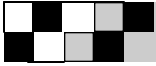
- A charter school may not unilaterally limit the services it provides a particular student with a disability.
- A charter school may not counsel out, i.e., try to convince a student (or parents) that the student should not attend (or continue to attend) the school because the student has a disability.

In summary, according to guidance from the US Department of Education, students with 504 Plans who attend charter schools must be provided with the same rights as other public school students with disabilities. There must be nondiscrimination in recruitment, application, and admission and schools cannot ask if the student has a disability. Once accepted FAPE (Free Appropriate Public School Education) must be provided. Charter school students with IEPs retain all IDEA rights and protections, their services may not be limited, there must be a consideration of LRE (Least Restrictive Environment), and IDEA discipline procedures must be followed.



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## Guía de Hechos Españoles para las Familias

No todos los niños/niñas crecen desde su infancia hasta sus años de adolescencia sin experimentar algunos tropiezos en el camino. Mientras que todo niño/niña es único y especial, algunas veces ellos/ellas confrontan emociones, sentimientos o comportamiento que causan problemas en sus vidas y en las vidas de aquellos que los rodean. A menudo las familias se preocupan cuando su niño/niña o adolescente tiene dificultad enfrentándose a las realidades, se siente triste, no puede dormir, usa drogas, o no se puede llevar con su familia y amigos.

La AACAP ha desarrollado *Información para la Familia* para proveer información concisa y al día sobre los asuntos que afectan a los niños/niñas, los adolescentes y a sus familias. La AACAP provee esta información importante como un servicio público y la *Información para la Familia* se puede duplicar y distribuir libre de cargo siempre que se acredite propiamente a la American Academy of Child and Adolescent Psychiatry y no se derive ganancia al ser usada.

La AACAP ha producido *Información para la Familia* en Inglés y en Español. Otras traducciones están disponibles en WWW, las cuales, aunque tal vez estén basadas en el original y fueron creadas independientemente y no tiene el beneficio de la revisión por la AACAP.

(Después de darle clic usted debe de guardar la información. Guárdela en su disco duro. Una vez guardada, tiene que descomprimir el archivo. Una vez descomprimido, usted puede abrir cada hoja de *Información para la Familia* individualmente como un documento PDF.)

[http://www.aacap.org/AACAP/Families\\_and\\_Youth/Facts\\_for\\_Families/  
Facts\\_for\\_Families\\_Spanish.aspx](http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/Facts_for_Families_Spanish.aspx)