

Join our journey as we discover the amazing world of A Plus Center.

Get to know the legendary people, those who transform the lives of so many of our precious children.

Discover the power of love, effort and understanding. 51 Forest Rd. #316/42 • 6 Lemberg Ct. #003 • Monroe N.Y. 10950 5225 New Utrecht Ave. 4th Floor Brooklyn New York 11219 T: 845-782-6775 • F: 845-217-2344 • E: apluscenter1@gmail.com



"Your turn,'

a voice chimed as six pairs of eyes turned my way. I froze. I am very sensitive to touch. I am generally uncomfortable by the fact that one practitioner works on me, and now, I was forced to tolerate six pairs of hands. I knew I would have to overcome my apprehension and agree to get on to the table, but I was still very nervous.

We were a group of craniosacral therapists who had gotten together to practice the Somato Emotional Release (SER) technique. This technique is an offshoot of Craniosacral Therapy and helps rid the mind and body of the residual effects of trauma.

I never regarded myself as a very emotional person as I hide my feelings pretty well, seldom sharing them with others. Precisely for this reason, I needed to practice and master the SER technique so I would be able to use it effectively when deemed necessary to help my clients. Thus, I volunteered to be the experimental subject so I'd get a feel for what my clients will experience during a session. Little did I know what was coming.

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As my colleagues palpated and arched (tested) the primary areas of my body that required work, the person selected to l e a d the session started asking me questions. "How do you feel?" she asked.

"Nervous," I said.

"Why are you nervous?"

"The fact that so many people are going to touch me makes me nervous," I responded truthfully.

"Where do you feel it most?" she probed on.

"I feel a huge lump in my chest,"

She put her hands on my lump and continued to prod me with questions. And as I went deeper and deeper, tuning into my tissues, the lump became larger and larger. Suddenly, it burst. I was mortified. The dam opened up, and I started to sob hysterically.

"It is Nesanel*!" I cried. I have not seen him in years, and now, he is back in diapers! I was shocked by my outburst. I had not realized that his regression hurt me so much. As a practitioner, I trained myself not to get too emotionally involved. Otherwise, I would not be able to continue working in a field that involved so much heartache and disappointment. However, I knew Nesanel from earlier years and having worked with him at the beginning of my career, I did not expect such a setback. Nesanel was then an adorable six-year-old boy who attended a regular cheder for half the day, while the other half of the day, he was schooled in a Special Ed setting.

I worked with severely autistic children and when his mother was exposed to some of these extremely self-absorbed little ones, she commented that her son is on a much higher level and will never be like them.

Now, six years later, he came back to my office and his eyes were glazed, his personal hygiene poor, his speech echolalic, and he was talking in single syllable sentences. To say that I was stunned would be putting it mildly. I was totally unprepared for this. I ran back to my office and started to cry. "Where is my sweet Nesanel?" I sobbed quietly. It took some time until I composed myself and was ready to meet the family again.

The abovementioned craniosacral practice ses-

sion occurred a week later. It proved to be a tremendous gift from Hashem as it helped me be more grounded and focused on what he needs when I prepared his therapy program.

Now, almost a year later, after following an extensive and rigid therapy program, Nesanel is a new child. He is fully trained, he is using complete sentences to communicate and converse, his aggression is immensely reduced, and his parents are able to think about hosting an event in honor of his bar mitzvah. Nesanel knows his Pshetel (albeit a modified version) inside out, practices laying his tefillin daily, and enthusiastically awaits his bar mitzvah.

Nesanel's story is not unique. This horror story is but a single case which illustrates what is behind each and every child's attendance at A Plus Center. Whether it is a child that was pulled out of a public school class of Down Syndrome kids, a child diagnosed as never being able to talk, or a kid that just could not communicate effectively, A Plus Center will put together an individualized program to help each child, using a balanced blend of alternative and complementary approaches. When the specialized program is followed consistently and rigidly, without excluding any components, every child will progress, each at his/her own pace. Some make greater strides than others. While there are no guaranteed end results, we never had a child that did not progress to some degree.

NESANEL'S PROGRAM

At first, Nesanel underwent extensive testing so we would have a clearer picture of all the factors contributing to his current condition. Once a clear picture emerged, we created a customized program.

Nesanel required intervention in almost every area, but first behavioral issues had to subside since we needed his full cooperation for other therapies.

Therefore, a combination of the Son-Rise Program and a behavior plan was implemented. A functional analysis revealed that he engages in destructive and dangerous behaviors to get negative attention from his therapists. Therefore, we ignored destructive behaviors and responded only to appropriate actions, and then followed his preferences on all general activities. Nesanel loved busting balloons and crawling on monkey bars. He could do that for hours. So we put lots of balloons in his room every day and allowed him to crawl on a monkey bar for as long as he pleased.

Whenever he ran out of the room, no one rushed after him. If he sprayed the whole vanity with water, no one commented. When he saw that no one even looked his way and since he loved attention, he eventually went back to his room. Upon reentering, he got a warm welcome for coming back to play. Since he only got the attention he craved via appropriate behaviors, he learned that it is most beneficial for him to behave appropriately. Within a week, his destructive behaviors were significantly reduced.

Yes, the place swam in water, lots of expensive items were broken, but it was worth it. Now, after Nesanel realized that he is not restricted anymore, he lost interest and we need not worry that he will turn to inappropriate habits. After four months we were able to start implementing the next step, an Auditory Integration Training (AIT) to help Nesanel's overwhelming fear of loud noise. We introduced the Right-Brain Program since, when we tested him, the tests revealed a hemispherical deficiency in the right side of his brain. In addition, he received nutritional supplements, rhythmic movements, reflex integration, craniosacral therapy, and lymphatic drainage. Thus, by using an integrated approach, Nesanel made huge strides, and we foresee a bright future

O ur main approach to autistic children is keeping them happy and content. We work on fostering an atmosphere of unconditional acceptance of the child, irrespective of his condition.

Have you ever thought that maybe your child is perfectly happy and satisfied? Autistic children are very happy with the way they are. They find contentment by repeatedly spinning that plate or any repetitive behaviors they might have. The only ones who view autism as a problem are the adults in the child's life.

THE PROGRAM

The Son-Rise program is based on the thesis that, before you can get a child to communicate with you, you have to get the child to realize and understand why it would be worth his/her while to emerge from the safe, protective haven s/he had created and communicate with you.

HOW WE DO IT

We do this by entering the child's inner world. We join, rather than stop, a child's repetitive, exclusive, and ritualistic behaviors. Doing so establishes a natural connection. Once they realize how wonderful it can be to have someone to play and interact with, or that their needs can be taken care of, they automatically start realizing the benefit of joining our world, too.

Autism can manifest in many ways, but it is most apparent in missed social cues and an inability to figure out how to live in a world they do not understand. Since autistic children tend to miss social nuances and norms on their own, they need to be trained. For instance, each of us instinctively realizes when we are hot, cold, hungry etc. Autistic children do not recognize these things and therefore need to be taught to identify them.

This is where ABA comes in. ABA teaches children skills that are not necessary to teach your typical child. And this is not all.

Autistic children are prone to allergies, indigestion, stress, nutritional deficiencies, and central nervous system dysfunction, which usually manifests as sensory issues. In addition, they retain immature reflexes, may have hemispherical deficiencies, and suffer from processing issues.

THE "FOSA" METHODOLOGY

One of Mrs. Weinstock's signature career achievements was the creation of a hierarchal system to identify causes and corresponding treatment plans. This approach encompasses all that autistic children need to be able to reach their full potential.

Mrs. Weinstock has dubbed her methodology FOSA, which stands for Fuel, Oxygen, Stimulation, and Acceptance. The first three were identified by Professor Frederick Carrick, founder of Functional Neurology (Beck, 2011), and the last component, which is Acceptance, was added by Mrs. Weinstock per her personal research and observations.

ACCEPTANCE

To promote proper brain function, the brain needs fuel (nutrition) to grow and oxygen for proper circulation. In addition, the brain needs to be stimulated to promote development. For instance, a child who was locked up in a stroller since birth and at age one is suddenly expected to walk will not be able to perform the task of walking since underdeveloped motor skills leave him ill-prepared for walking. In order for a child to begin to walk, the child first needs to develop certain reflexes, balance, and vision, which is stimulated by crawling, turning, sitting up, etc. (Doman & amp; Doman, 2006). Thus, if there is fuel and oxygen but no stimulation, brain development cannot take place.

On the other hand, if there is no fuel or oxygen, stimulation cannot take place, either. Furthermore, if a child is not accepted by parents, teachers, friends or family, the brain shuts down and no stimulation, fuel, or oxygen will help further its development.

Therefore, when trying to help the child, the child first needs to feel that s/he is accepted, appreciated, and loved, and only afterward can all the basic skills required for daily functioning be mastered. In other words, when therapy is involved, if a child does not feel loved and accepted, therapy will not help, either.

The world was created for everyone, but do we truly accept one another? Being accepting and loving can help your child more than trying to diminish the repetitive behaviors your child values so. It is difficult to accept that your child is autistic, but loving your child just the way s/ he is can go a long way in increasing his chances of overcoming autism. And A Plus Center has proven it.

*Names have been changed to protect privacy.

In a Mother's Words *As interviewed by the Tachlis*

"My son, Nesanel (mentioned in the article), is an autistic boy who is pretty low on the spectrum.

No clinic or public school wanted him to be a part of their program due to his out-of-control behavior. He was regarded as a menace to society. His untamed behavior was actually due to a misprescription of medication. He would run up and attack the bus driver mid-route or throw his food across the room, and generally unleashed chaos wherever he went.

Until A Plus Center came to the rescue. When we walked in, I said, "This is the right place." I simply sensed it. Within three weeks, I saw a major improvement. My family was amazed! Mrs. Weinstock took Nasanel under her wing and proved all the naysayers wrong!

She brought out the natural character of my son and worked with it. He's a different child! No more smashing, screaming or destroying everything in his path. He's expressive and calm. We were planning to skip his Bar Mitzvah since he wasn't capable of sitting still for more than 30 seconds. Now, he not only had one, but he actually said a p'shetel!!

It is all thanks to the A Plus Center!



In a Mother's Words

Tachlis joins a phone conference as A Plus mothers speak...

Five years ago, my son was diagnosed with ADHD. He simply couldn't sit still. We tried regular weekly therapy and medication, but nothing worked. We went to the A Plus Center and he's doing GREAT now! He attends a regular yeshiva, is bright, sociable and well accepted!

A couple of years ago, I underwent a difficult separation, and it affected my kids tremendously. They had a very hard time adjusting to their new reality. Mrs. Weinstock was a lifesaver! My kids trusted her intuitively, and she was able to help them in many ways. Her care literally saved my kids!

When my daughter was in first grade, she was diagnosed as having a shortterm memory. She had a very hard time with reading and ivrah. On top of that, she was diagnosed with Crohn's as well. She was selective mute for many years. Until we came to the A Plus Center. She started attending therapy three times a week, participated in programs etc. After a short while, she was able to decrease the therapy sessions.

Now she's in 6th grade and is thriving!! She's a happy, intelligent, and popular kid! She's a 100% student! No medication, no pain, no issues!! All thanks to the A Plus Center.

The Tachlis of Brooklyn will be featuring an A Plus Center Q&A column as well as personal stories. To submit your question(s), email **editor@ thetachlis.com**

I've got no regrets whatsoever!



Interview with Rabbi Weinstock

Administrator of the A Plus Center



Running such a huge establishment, providing therapy and large-scale programs is not easy. Can you give us a glimpse of what it entails?

Managing such a huge undertaking is challenging, and sometimes I feel that I have bitten into more than I can chew. However, when it comes to Yiddishe nefashos, I cannot help but do everything in my power to assist them, whatever it takes to help autistic kids cope with their daily challenges. Managing includes: making sure everything runs smoothly, that the staff has the tools needed and proper training; breakfast, lunch, and dinner run on schedule; kids are picked up on time etc. I also bear the financial burden and need to provide the utmost on a minimal budget.

What are challenges do you face on a daily basis?

Last minute staff cancellations are the hardest. Each child has an individualized program and gets one- on-one therapy with their designated therapist. If someone calls in absent, it is very hard to find a substitute at the last minute who is familiar with the child's program. Another issue we struggle with is having staff on hand after 3:00 pm. We just opened a center in Brooklyn, and one of the biggest problems that we encountered is finding suitable staff to work after 3:00 pm. If we do find someone, often unreasonable terms and conditions make it impossible to hire.

Nevertheless. routine challenges are expected and rolling with the punches takes getting used to. It happens to be that the hardest of all is when I need to refuse people who ask for a discount. Their difficult position hurts me every time. People don't realize that running such a program is expensive, and we count on every dollar. We don't receive government funding, and insurance reimbursement rates are subject to constant cuts. Sometimes, insurance coverage does not include enough hours for therapy so therapy may be limited. Fundraising is difficult since people see that we do charge a fee. It is very hard to convince people that in order to help a child reach his/her utmost potential, much more is involved than a meager fee covers.

Do you really serve three meals a day?

Yes. The kids who attend our full-day program are often challenging at home. Even when they progress and become less challenging, it is hard for a mother of many children to keep such a child productively engaged. Therefore, we offer an extended program until 7:00 pm and also provide dinner.

What do you mean by saying that each child gets a customized program?

No two autistic kids are alike. Each child needs to have a tailored program. For instance, one child may be withdrawn and sad, and another child will be just the opposite. Thus, each child needs a separate program in his/her primary language to help him overcome his problems. Some kids also struggle with kriyah or English reading, and we need to focus on that. This takes up a lot of staff time, and since we don't have government funding, this process can also be extremely costly. Besides for preparing

programs, we also need to prep the 12-year old boys for their Bar Mitzvahs. B"H, the Hatzlacha we have seen is astounding, and the parents cannot thank us enough.

At what age do you think is a good time to start therapy, and do you think that starting earlier increases the chance of progress?

The best is to start as soon as you receive the diagnosis, or even earlier when you suspect that something is wrong. We have dealt with kids whose parents brought them in as infants or toddlers, and now, they attend regular, mainstreamed programs, with nary a trace of their former issues. We have also dealt with kids whose parents brought them in when they were past nine or ten. These children are much harder to help, but they all make some progress.

How long does it take to see progress?

Each child is different, but it also depends on how consistent and cooperative the parents and family are. Some children change after one treatment session; others need months of rigorous therapy. However, the patient is always rewarded. They will definitely see some changes.

Do you work only with autistic children?

No. We treat kids that are developmentally delayed, have learning disabilities, social issues, or just ADD/ADHD. Due to the numerous services we provide, we can treat anything ranging from an ear infection to a stroke patient, although we never had the latter and are not looking for this type of client.

This is because besides providing ABA and OT/ PT based programs, we also provide nutrition counseling, craniosacral therapy, lymphatic drainage, and bioacoustic testing.

Can you elaborate a little more on all these therapies, and how they relate to autism?

I will try to in a few sentences. When we started to help autistic children, we researched every modality that could possibly help them. Each program we employ

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can be used as an individual tool to help people with other types of problems too. This is why our program is so successful - because if one method proves ineffective, we have several others to try.

For instance, lymphatic drainage - some autistic kids are always congested, suffering from sinus and headaches which contribute to their hyperactivity. Therefore, we use lymphatic drainage to help them relieve their discomfort. Automatically, if it can help for sinus and headaches, people reach out to us to help them re-



lieve their pain, and this is why we can treat so many other issues besides autism.

How do you block the brain?

Hashem created the body in such an extraordinary way that if one part of the body loses its function, the other side automatically takes over. For instance, if by accident you, chas v'shalom, lose function of your right hand, your left hand will be able to take over most of the functions you usually performed with your right hand. As a result of this, researchers have figured out that we can induce weakness in one part of the brain to strengthen the other part of the brain.

What message do you have for parents out there who are struggling with their children?

Sometimes, parents pity a child because of his/her challenges and give in to the child. Or, if a child struggles with a skill, parents will perform basic functions for the child, instead of insisting the child try on his/her own.

Avoid labeling a child as much as possible. An ADD/ADHD label provides nothing for a child. It just lets them know that they are different, or their parents think that they are different.