



Children's **Mental Health** Action Network

Resource Guide

A Parent's Road Map

Second Edition



The logo of the Children's Mental Health Action Network is a child opening her or his arms and self to an expansive world, rather than being closed in by the sadness and isolation of emotional or behavioral difficulties. It symbolizes what we seek for our children:

The **snowflake** reminds us that each child is unique, that intervention must be individually designed for each child, and that the child must be able to express her or his unique self in a constructive and meaningful way.

The **flame** represents the light and warmth that appropriate intervention can bring into the dark world of an untreated child.

The **globe** represents the world that such intervention opens to the child.

A downloadable version of this document may be found at
www.mhahouston.org

Acknowledgements

This resource guide was written in 2006 by the following members of the Children's Mental Health Action Network (CMHAN) of Houston, a coalition of leaders who represented mental health support organizations, and were also parents themselves. This guide represents the cumulative wisdom and experience of many parents who have struggled on a daily basis over the years to help their children cope with behavioral and emotional or mental disorders, as well as learning disorders.

All acknowledgements reference the positions and organizations represented by the individuals at the original publication of this guide.

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The Children's Mental Health Action Network is comprised of the following member organizations: Attention Deficit Disorders Association - Southern Region; Harris County Alliance For Families and Youth; Houston Federation of Families for Children's Mental Health; Mental Health Association of Greater Houston; NAMI Metropolitan Houston; and NAMI West Houston.

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“TO GO” CRISIS KIT

on page 34 was created by:

THE CHILDREN’S MENTAL HEALTH AWARENESS COMMITTEE

- Amerigroup Community Care
<http://www.amerigroupcorp.com>
- IntraCare Behavioral Health
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- MHMRA of Harris County
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- NAMI Metropolitan Houston
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- The Attention Deficit Disorders Association-Southern Region (ADDA–SR)
<http://adda-sr.org>
- The Council on Alcohol and Drugs Houston
<http://council-houston.org>
- Youth & Family Center, HISD West District
<http://dept.houstonisd.org/student-services/psyservices/WDistYouthFC.htm>

Introduction

All parents want the best for their children and all parents worry - especially if a child is experiencing mental health, behavioral or emotional challenges. If you are reading this guide, you may have been concerned for quite some time, but thought your child or one you care for would “outgrow” the difficulties that you’ve been observing.

Possibly you feel guilty despite knowing that you’ve been a loving parent or caregiver. Perhaps you have watched as schoolmates made a situation worse by bullying or teasing or adults have criticized without realizing the impact. The concerns you are experiencing are natural. Sometimes it even offers relief when the school, pediatrician, or other professionals put a name to the problem.

If you are the caregiver for such a child, it is important for you to know that everything you are experiencing has been experienced by many others before you. *One child in five has a diagnosable mental or addictive disorder and in one child in ten, the disorder is more severe, according to a national study.*

This guide was written by parents and caregivers like you who are members of the Children’s Mental Health Action Network. This coalition advocates on behalf of children with mental health needs.

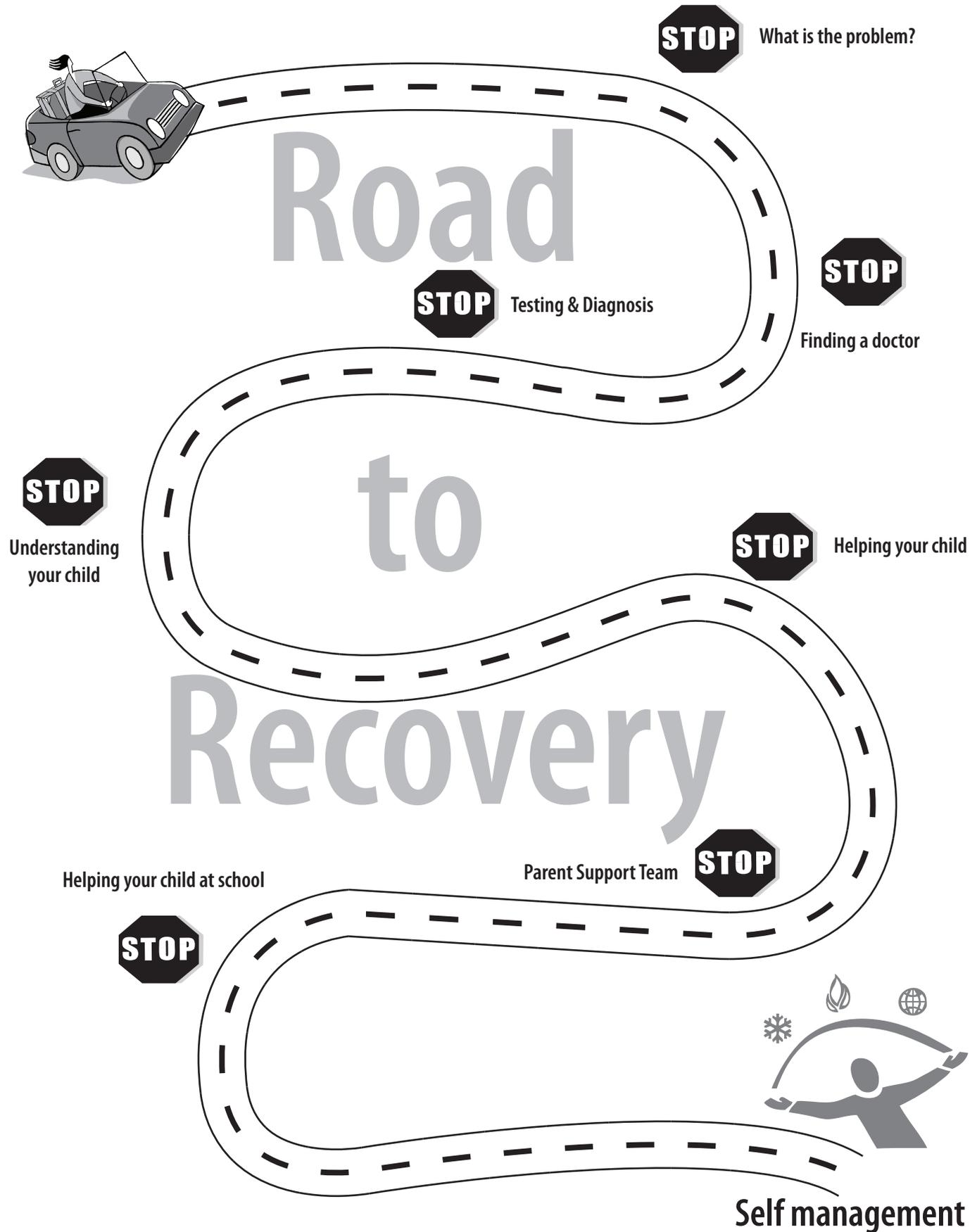
Those behind this project hope that the resources and suggestions offered in this “road map to recovery” will put you in the driver’s seat as you navigate the challenges ahead.

There is much you may need to do and accomplish, but this is not a journey to take alone. Help and hope are just a phone call away!

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Parent's Road Map



Early Intervention is Key

“It is imperative to start the process of recovery as soon as possible so that your child does not fall further behind or experience even more problems. If you think there is a problem, listen to your own instincts. I knew there was something different about my son at an early age.”

-Pam

Chances are, if you are reading this guide, you and perhaps your child’s or adolescent’s teachers have identified a problem. (Throughout the rest of the guide, we will refer to children, but all of the information is applicable to adolescents as well. Whichever the pronoun used, the information applies regardless of gender.) Because a child’s brain is continually growing and changing, taking action early is very important. If your child is struggling in school and has emotional or behavioral challenges, these can prevent him or her from learning and developing normally.

Take a minute to think about and answer the questions on the informal assessment below for an indication of whether to seek help for your child:

1. Has your child had recurring problems due to:

- Traumatic events or changes in his/her life? (i.e. abuse, divorce, death, etc.)
- Inability to manage anger?
- Inability to fall asleep or stay asleep?
- Refusal or persistent anxiety about going to school?
- Hyperactivity, fidgeting, constant movement beyond regular playing?
- Persistent nightmares?
- Frequent, unexplainable temper tantrums?

2. Within the last six months, has your child:

- Had any changes in behavior and/or mood? (i.e. sad, angry, withdrawn, etc.)
- Exhibited depressive symptoms? (i.e. weight loss or gain, excessive sleep, etc.)
- Had problems getting along with others?
- Had obsessions about body weight, food or exercise?
- Had a decline in school performance?
- Had a decrease in participating in activities?

3. Do you suspect that your child has used drugs or alcohol?

4. Has your child disregarded family rules and parental guidance on a regular basis?

5. Has your child been able to escape consequences due to the ability to manipulate people and situations?

6. Has your child:

- Intentionally frightened others?
- Made threatening statements in writing?
- Implied that they may have a plan for violent or suicidal behavior?
- Implied that they have identified a target for violence?
- Been destructive to property?
- Had significant changes in school performance? (i.e., grades dropping, challenging authority, etc.)

-
- Run away from school or home?
 - Sexually acted out?
 - Had persistent thoughts of death or violence?

Source: Houston Metropolitan Federation of Families for Children's Mental Health and American Academy of Child and Adolescent Psychiatry

Positive answers to any of these questions are cause for concern and possibly indicate a need to intervene. This guide can help you find what you need, including educational resources, assistance of mental health professionals and help through special education. You may want to seek a professional evaluation of your child, either at school or from a qualified mental health professional.

Please do not blame yourself!! There may be much you will need to learn and changes you may choose to make in response to these difficulties. Often, emotional and behavioral difficulties in children are the result of biological differences in the way their brains work.

"Just as you don't have control over whether your child has blue eyes or brown, or how tall he or she will be, you have little to no control over whether he or she is predisposed to a brain disorder."

-Linda

Often children's difficulties may be due to a difference in the way brain chemicals send messages from one cell to the other. These biological conditions are not the result of poor parenting and can be treated with medication and therapy. Often, they tend to run in families. Other conditions may have environmental causes, such as trauma and stress, and there may be a complex interaction of biological and environmental factors. As a parent, you have a tremendously important role in starting early to give your child the support she needs; the earlier the better to prevent further delays in development and learning.

But where do you start? In reading this guide, you have already taken the first step on the road toward stability and happiness for your child. This guide describes the many stops on your journey and directs you to valuable tools and resources that you will use again and again to support your child. But remember, as the one who knows and loves your child best and who has the biggest investment in him, **YOU are in the driver's seat.**

So buckle your seat belt and let's start the journey...

Step 2: Finding the Right Mental Health Professional

If your child is in a serious crisis, and may pose a threat to self or others, your child needs help immediately. Please refer to page **34** of the Resource Guide for a Crisis Management Guide and page **17** for a list of local hospitals that can admit your child on an emergency basis. You can download an Emergency Information Form at <http://www.aap.org/advocacy/eif.doc> or see page **36** of the Resource Guide.

“Contact organizations for referrals or talk with other families that have been through this so that you are not just guessing your way through a list of professionals.”

-Pam

Finding the right mental health professional for your child is critical. While your pediatrician may have helped you identify the problem, he is not necessarily the best choice to treat your child for mental health conditions. Pediatricians are trained to treat physical conditions, but are not specialists in mental healthcare. Ask your pediatrician for a referral to the appropriate specialist. Definitions of some types of mental health professionals are included below. See the resource guide for additional information.

- **Psychiatrist** - medical doctor with special training in the diagnosis and treatment of mental and emotional illnesses. Like other doctors, psychiatrists are qualified to prescribe medication. *Qualifications:* should have a state license and be board eligible or certified by the American Board of Psychiatry and Neurology.
- **Child/Adolescent Psychiatrist** - medical doctor with special training in the diagnosis and treatment of emotional and behavioral problems in children. Child/Adolescent psychiatrists are qualified to prescribe medication. *Qualifications:* should have a state license and be board eligible or certified in adult and child psychiatry by the American Board of Psychiatry and Neurology.
- **Psychologist** - Practitioner with a doctoral degree from an accredited graduate program in psychology, usually a Ph.D., Psy.D. or E.D. Trained to make diagnoses and provide individual and group therapy and psychological and educational testing. *Qualifications:* state license.
- **Clinical Social Worker** - Counselor with a master's degree in social work from an accredited graduate program. Trained to make diagnoses and provide individual and group counseling. *Qualifications:* state license; may be member of the Academy of Certified Social Workers.
- **Licensed Professional Counselor** - Counselor with a master's degree in psychology, counseling or a related field. Trained to diagnose and provide individual and group counseling. *Qualifications:* state license.

Source: National Mental Health Association

Before making an appointment, be sure to check the fees for treatment and your insurance coverage.

If you do not have private health insurance, sliding-scale agencies in Houston can help your child get the services he needs. Please refer to page 22 in the Resource Guide for Counseling and Diagnostic Services. Also, your child may be eligible for Medicaid or CHIP benefits that will cover these services. These programs both have important mental health benefits for children who qualify. See page **24** of the Resource Guide for more information.

“If the doctor doesn’t listen to your concerns or seems to dismiss certain aspects of your child’s symptoms, get a second opinion.”

-Madeleine

If you have health insurance, here is a list of questions to ask your insurance company:

1. Does my policy cover mental healthcare? Is my child covered on my plan? What are the benefits?
2. Am I restricted by the plan to a specified list of providers?
3. Am I on a plan that offers cost savings for using the providers in its own “network”?
4. Will my co-payment or deductible be more if I choose a provider who is out of network?
5. How much will my portion be?
6. How many visits will my insurance company pay for within a year?
7. Is psychological and/or neurological testing covered? What are the limitations?
8. Is there a prescription plan? How can I estimate the cost of treatment?

After checking coverage under your plan, you may want to seek referrals for a mental health professional for your child from the school nurse, counselor, special education teacher or psychologist. If you know of other parents whose children are seeing a mental health professional, ask them for recommendations. The Mental Health Association of Greater Houston provides an information and referral service at 713-522-5161. There are also national organizations that support children and families facing mental health issues. Often, they can make referrals in your area. Refer to page **18** of the Resource Guide for a list of these organizations’ local support groups.

Once you have found a qualified mental health professional, make an appointment for both parents (or caregivers) and your child for the visit. It is important for the provider you have selected to get to know the parents/caregivers as well as the child in order to understand the child better. Make notes before you go of your questions or concerns so you can make the best use of your appointment time. Let the doctor know any concerns you have about school as well as at home, bringing any teacher’s notes or any other records from the school or pediatrician that may help her get a clear picture of the situation. Remember, even as you seek help, you are your child’s most important ally. It is important to find a professional who recognizes the vital role you play in providing valid information about your child and in creating needed change.

Step 3: Testing and Diagnosis

Sometimes therapy for a child or for the family results in sufficient change in the child's emotional or behavioral issues. But if it appears a child is experiencing problems that stem from biological differences, it is important to find the cause before beginning treatment. In this case, testing and diagnosis are an important stop in the journey. Psychological testing can also be important in revealing the child's needs.

Testing may often be done by a child psychologist or educational diagnostician to identify factors contributing to the difficulties. Or, if medication is being considered by a physician or psychiatrist, testing may involve medical procedures that might include an EEG (a neurological test that reads brain wave patterns), blood tests for underlying, undiscovered physical conditions, or an EKG (monitoring heartbeat patterns to reveal heart conditions). These tests do not establish or confirm a mental health diagnosis, but may be needed to rule out other causes or to ensure the child has no medical conditions that would rule out a medication.

Diagnosis of childhood mental health disorders is a process. In some cases, it can take months or even years to arrive at a final diagnosis. Some of the diagnoses that result in emotional and behavioral difficulties include attention deficit disorders, childhood depression, bipolar disorder and schizophrenia or schizoaffective disorder. Anxiety and eating disorders are also common difficulties. Sometimes the diagnosis changes as the child develops because children's brains grow and change. The diagnosis of mental health conditions in children is more art than science, according to one child psychiatrist. Because children are not able to express their feelings in words as well as adults can, the psychiatrist must use parents' and teachers' observations of the child along with taking a family history to arrive at a diagnosis. It helps to remain flexible and patient.

Getting a diagnosis for your child's psychological or psychiatric condition can be very emotional. You may feel sadness, or deny that it is happening. You may feel grief or anger or want to blame someone – even yourself. You and your spouse may feel differently about the diagnosis. There is good news, though. Each day, scientists are making new discoveries about how the brain works. Great progress has been made in evidence-based behavioral interventions and in refining medications that help reduce the symptoms of brain differences, with fewer side effects. There is ever more hope that your child can lead a stable, happy and satisfying life.

“When my son was diagnosed at age nine, I cried myself to sleep for nights on end.”

-Linda

Step 4: Understanding Your Child

Now that you have begun the process of diagnosis, it is time to learn all you can about your child's condition, medications they may need, and parenting strategies and educational supports that can help. The more you know, the better you will be able to help your child and the more in control you will feel. It is important that both parents understand the child's diagnosis and medications. Being on "the same team" and approaching your child in a consistent manner will make a big difference in your family's life and in your child's progress.

"My philosophy is that diagnosis is not a life sentence as much as it is a road map. You need to learn about what your child needs help with, just as if he was in a wheelchair and needed a ramp – you need to identify what 'ramps' this child will need to help them be as successful as possible."

-Linda

There are many excellent books and Internet sites, seminars and parent education classes available. Please see the excellent lists in the resource listings in the back of this guide. Check your public library for books and videos. Local support organizations and agencies offer classes in or near your community free of charge or at a reduced cost. Many national children's mental healthcare organizations offer free email newsletters that you can sign up for on their websites with current information on medications, therapies and research. See page **18** in the Resource Guide for more information.

If it seems like a lot of extra work to do the reading or research, just remember that mental health professionals see your child at most a few times a month for an hour or so. You spend countless hours with your child each week. The more you understand about childhood mental disorders, the better equipped you will be to help in such ways as observing symptoms in your child that may signal a need for a change in medication or therapy. There's another very important role you play – and that is to keep good written records and ask questions about things you don't understand!

Step 5: What Can Be Done to Help Your Child?

How Medication Can Help

“My husband resisted giving medication to our child. I finally convinced him to just give it a try. That was the end of the discussion. He could see how much better she did with it.”

-Sandy

If your doctor has prescribed medication for your child, you may have doubts. Or guilt about giving medication to your child. Or fear of side effects. Most parents do. Just remember, if your child has had a thorough evaluation by a qualified child psychiatrist or neurologist and he has been diagnosed with an emotional or behavioral disorder, it is often the result of underlying *biological illness caused by differences in his brain chemistry!*

Brain chemistry is just beginning to be understood. To put it simply, brain cells send electrical signals to each other using chemical messengers. Sometimes if there is too much or not enough of certain brain chemicals, the child's brain does not function normally. This can affect the thinking or feelings of the child (just as it does in an adult). Modern medicines for brain disorders work by adjusting brain chemistry to help the brain function more normally.

If a child had diabetes, a parent would not be likely to refuse to give their child the insulin needed to restore proper blood sugar balance. Or the asthma medication for a child whose lungs are not allowing him to breath properly. These medications can be life-saving. Certain emotional and behavioral disorders, if untreated, put children and adolescents at a much greater risk of school failure and dropping out, poor self-esteem, risky behavior, criminal activity, drug and alcohol abuse, and tragically, suicide. *Medications to treat mental health conditions can save lives just as other medications do.*

Medication Management. Each brain and each person's metabolism are unique and respond to medication differently. As a result, a doctor often has to try more than one drug to see what works best for your child. You may feel anxious about this. But it is part of the journey to wellness for your child. Read about potential side effects on the medication inserts or on the Internet and work closely with your child's doctor. It can be reassuring to know that many of the side effects that could occur will usually pass within a day or two. If your doctor determines that it is necessary to take the child off the medication, the side effects will stop when the medication is out of his system.

Parents whose children have needed medication offer these tips:

1. If your child does not want to take medication, calmly explain to her that you or your spouse take medications for certain conditions (if you do!). If it is common knowledge that another child takes medication for a physical condition, just tell your child that “some people need help with chemicals in their body (like diabetes) and he just needs help for the chemicals in his brain to work better.”
2. If your child is too young to take a pill and there is no liquid form available, try a compounding pharmacy that can make up the prescription in liquid form. (Some medications are timed release and cannot be given in liquid form).
3. With your doctor's support, teach your child and your family how the medications work. Use age-appropriate language and encourage your child to ask questions.
4. By including medication in the daily routine, it will be easier for you and your child to remember. The weekend is a good time to introduce new medications, and limit outside social activities at that time.

-
5. Get support from other parents who have been through medication trials. Just knowing someone has walked a mile in your shoes can be a great relief.
 6. Monitor medications, keep records, check to be sure the pharmacy hasn't made any errors, and maintain close communication with the psychiatrist or physician, especially when trying new medications.
 7. Remember that the goal of psychiatric medications is to reduce the emotional and behavioral symptoms of the child, not to "cure" the disorder.

How Therapists Can Help

"Someone outside the family can make a huge impact and help with making critical changes."

-Sandy

Children may benefit from individual or family therapy alone, or in combination with medication. In children with diagnoses involving brain differences, research indicates that the most successful treatment combines medication and therapy.

What is therapy? Therapy comes in many different forms. *Individual psychotherapy* consists of one-on-one meetings by the child and the therapist. In those meetings, the child and therapist focus on understanding the child and his difficulties, aiming to help the child adjust his thinking or behaviors. *Group therapy* consists of a therapist meeting with a group of children. Here, the child learns from and is able to express herself to a group of her peers, monitored and led by a therapist. *Family therapy* focuses on the family system, how it affects the child and what might be adjusted to support the child's recovery. *Play Therapy*, for younger children, involves the therapist and child playing together, understanding and learning through play. *Skills Therapy* teaches specific skills to the child, such as social skills or appropriate ways to handle anger, frustration, impulsivity and the like. Sometimes, the therapist may recommend a combination of approaches.

Who is the right therapist for my child? The therapist should be experienced in treating children and adolescents, preferably with the disorder your child is dealing with. She could be a psychologist, a social worker, or a trained counselor. In some instances, a psychiatrist may provide therapy. You may wish to seek a therapist who shares your cultural values and family belief system. There are therapists of many different ethnic backgrounds and religious affiliations – both male and female. The best way to find a therapist is through the recommendation of someone you trust and through talking with this professional. Remember, you must trust this person enough to include them in decisions about your child's well-being. You may need to meet more than one professional to find a good match for your family.

See page **20** and **22** of the Resource Guide for agencies that give referrals or provide therapy.

Executive Functioning Support

Many children with emotional or behavioral issues also struggle with what is called the executive function of the brain, the brain's "command center". It may not be doing its best job of planning, organizing, learning from past mistakes, or managing emotions

and impulses. Research shows that this brain area is the last to fully develop in late adolescence (around age 20 or 21). When executive functioning isn't optimal, children may need extra training and support with the daily tasks of managing their lives at school and at home. By reading books and attending education classes through local support organizations, you can learn valuable skills to help your child with executive functioning. Simple coping skills, like having a child organize their daily activities the night before or checking the child's backpack for homework, can make a tremendous difference.

“My son was diagnosed with ADHD at age 6 and did well academically, but marched to a different drummer, socially. At 14, he attempted suicide. We tried two years of outpatient therapy, and many other measures. Nothing worked to pull him out of his sadness. Finally, we sent him to a well-respected hospital where he received much support and therapy in a team approach. He returned to the therapeutic school where he had occasional setbacks. After two years, he had a serious regression and began to think about suicide again. He requested a return to the hospital, where he spent two months working on his coping skills. Since then he has done very well in school, participated in extra-curricular activities and will soon graduate from high school. I am feeling more confident all the time that he will live a full life. It has taken a lot of experienced people and effective treatment to save this child. I am getting on with my own life these days.”

-Bonnie

Step 6: Forming a Support Team

Now that you are down the road a bit, it is time to form your child's support team. For the best outcome, mental health professionals recommend a warm, firm, caring circle of support around a child, with limits, lots of love, understanding and clear and consistent communication. Your child's support team starts with you and your spouse. It is very important that you both understand your child's issues so that you can operate as a team and be "on the same page". As the parents or caregivers, you are the "case managers" for your child (remember that driver's seat?!) and as such, are the key to creating this team. It is your job to advocate for your child, and eventually he can learn to *advocate for himself down the road*.

"You must be the advocate and case manager for your child. Always remember that teachers have many students in their class and probably are overworked and underpaid. Often their parent interactions are full of conflict. It is your job to win them over."

-Madeleine

As your child's case manager, you are the person who keeps track of records and are the communication point between the various members of his support team. Doctors have many patients. Teachers have many students. You are the only one for whom your child is the top priority, and to be effective, you must be assertive and *proactive* with doctors, insurance companies, teachers, therapists, etc. You can educate them about your child and his needs better than anyone can! Check page 20 in the Resources section for education classes and support groups that can help you learn this "case management" role. And don't forget that being sensitive to the other person's feelings and experience is the key to good communication.

Your child's therapist and psychiatrist need to know what is happening at school and with peers in extracurricular activities, like sports, scouts or day care. Teachers need to know what is happening at home. The school nurse needs to understand the medications your child is on. Therefore, regular e-mail or telephone communication with the team is crucial. Be sure the teachers and caretakers know what is going on with your child. If she had a bad night and you expect the day to be rocky, give them a heads up. If your child has a medication change, you will need feedback on behavior changes during the school day from the teacher. Your extended family may also need education on your child's diagnosis and current issues.

Other Members of Your Team

Be sure to include all of your child's support team in your communication loop (mental health professionals, teachers, coaches, parent advocate, speech or occupational therapist, church or Scout leaders). That way, everyone will be on the same page. You may also want to stay in communication with others who are important in your child's life, such as immediate and extended family, neighbors, clergy, and friends.

Taking Care of Yourself

When you are on an airplane learning about the emergency procedures, the flight attendant instructs you to put on your own oxygen mask before helping a child with hers. After all, how can you help someone if you are unconscious? The same is true of the parent of a child with emotional or behavioral issues. It is very important to take care of yourself, emotionally and physically. If you are out of gas, you will have nothing to give when your child needs you most!

When the problem is chronic or severe, it can really help to take a break. Respite care can be a lifesaver. Have someone on your team who can take care of your child from time to time for a day or an evening - or even for a weekend so you and your spouse can get away and refresh yourselves. The care could be provided by professionals who care for your child in your home or theirs. It could also be provided by extended family or by developing a cooperative baby-sitting arrangement. A baby-sitter who is mature

and experienced with children can be trained to understand your child's needs and can be a significant resource for your family!

Finding a support group for you and your spouse can be a great help. Just knowing other families are going through the same thing and learning what they have tried can provide relief. Families come together to find solutions and provide support for each other in groups in your community on a regular basis. Support group members often help each other find resources, like doctors, therapists, and schools. To find a support group in your area, refer to page **18** in the Resource Guide.

And don't forget to nurture yourself. Take breaks, have fun!

Step 7: Helping Your Child at School

When Charlie was 12, he was hospitalized as a result of rage and violence. His aggression was so violent he had to be transferred to a more intensive facility. I didn't see a very hopeful future for this child. Some months later, he enrolled at my son's therapeutic school. Now he is managing his anger and becoming a successful part of the school community. The treatment he received made a big difference."

-Barbara

A child who is experiencing mental health, emotional, or behavioral challenges may have difficulty in the school setting. Parents will need to work closely with the school to ensure that their child is successful at school. A range of support services can be provided by schools based on the severity of the child's needs. Some support services are available to all children on a campus, with or without a disability, and other support services are available through eligibility and educational need for special education services. Parents will want to make sure that their child has been considered for the support services available **to all students** before pursuing special education services.

If your child is eligible for 504 services or special education services and you consent to these services, the school can provide a greater level of service and support for your child. *According to federal law (Section 504 of the Vocational Rehabilitation Act of 1973) and IDEA (Individuals with Disabilities Act), your child has the right to a free and appropriate public education (FAPE) regardless of any serious psychological, emotional, or physical disability. See page 21 of the Resource Guide for Information on Partnering With Your Child's School.*

Meet with your child's teacher, the school counselor, a special education representative at the school or district level, and/or the school principal to find out what resources are available through the school. Some parents fear that the school will be quick to insist on special education services. Schools today work very hard with parents, teachers, and other school staff to make changes in the general education setting so that the child's needs are met there prior to referral for special education services. And even after eligibility for services, special education services are often brought to the child in the general education classroom. If other services are needed that cannot be provided in the general education setting, then more intensive interventions are available.

If a child is referred for special education consideration, an evaluation is conducted only if you give your consent. This evaluation must pursue all areas of suspected disability and is provided at no cost to the parent. Input from parents is a legally required part of this assessment.

Once the assessment is completed, you will meet in an Admission, Review, and Dismissal Committee (ARD) meeting to consider the school assessment and any other assessments you may have had done independently of the school and choose to share with the committee. It is the ARD committee that establishes special education eligibility, and your consent is required for initial placement to receive special education services. Once eligibility is established, the ARD committee develops an individual educational plan (IEP) and determines the services needed to support this plan. At the end of the meeting, it is required that you receive copies of the evaluation and the IEP team meeting documents. Know that you have the right to disagree with the ARD/IEP committee, of which you are a part, if you think your child is being denied FAPE.

“Learning how to approach the school in a knowledgeable, realistic and positive way can make a big difference in how the school responds to help your child!”

-Becky

“Remember, each child is different, so there is no one true approach that fits all.”

-Linda

ARD/IEP team meetings can be challenging for all involved and can be overwhelming for parents new to this process. Just learning the alphabet soup is a challenge! However, this process is the means for getting your child the help she needs to be more successful at school. Resources are provided in the Resource Guide to help you learn to work with the schools and to become knowledgeable about your rights as a parent of a child with a disability and to help you navigate through the special education process.

Based on our collective experiences working with schools, we would like to pass on some important tips.

- **Early Referral.** Parents often say they wish they had asked for support earlier from the school. A child who is not getting the support or accommodations he needs in school is much more likely to fail and to have a low sense of self-worth when he can't keep up. It can be like trying to fit a round peg into a square hole. Make sure you and your child's teacher work together to find a way for your child to fit in the school setting.
- **Combine teacher meetings.** If possible, meet with teachers as a group, if there is more than one. That way, you won't have to repeat yourself. A wise school counselor once said that if you meet with all the teachers together, “the teachers who are having trouble with your child in their classes may hear good things about your child from another teacher, creating a more balanced view of your child.” Good advice!
- **Try not to be defensive.** If the school brings up concerns about your child, try not to be defensive. It is your job to help support your child and you need them as your allies. It may take time accept your child's school issues, but a defensive parent will alienate an important member of the support team and can make it harder on your child to get what he needs in school.
- **Do not be intimidated by the expertise or authority of school personnel.** You have a critical, valued and knowledgeable role to play in advocating for your child.
- **Differences are nothing to be ashamed of.** When a child picks up on the fact that a parent is hiding his disability, it can make him feel ashamed. As many parents who are good advocates have told their children, some kids need help in math, some need help in reading, some are good at art and some are good at sports. Find your child's special talents and gifts and emphasize them. Share your own challenges with your child in an age-appropriate way. Remind him that we are all unique individuals with strengths and challenges.

Education is Key

“Don’t be afraid to ask for what you want and feel free to disagree. You are a member of the committee.”

-Linda

Private School Options

If it becomes clear that your child needs more personalized attention and possibly therapeutic services in school, there are private schools that can support your child. A list of local private schools which provide special education services and/or therapeutic services can be found on Page 24 of the Resource Guide.

Education is key

Don’t underestimate the importance of your child getting an appropriate education. It is your child’s right by law, and most importantly, finishing school is a key factor in a successful life. Children with emotional and behavioral difficulties are at increased risk for school dropout with all its negative consequences. Helping your child succeed in school should be a top priority for his long-term success.

“As interests and talents started to develop, there was encouragement by teachers, leaders and others. Slowly, [my daughter] began to emerge and I could see the hope we have for the future. We need to hang in there a bit longer as parents, but it’s worth it.”

-Sandy

“They learn from watching you and learn to advocate for themselves in the process.”

-Pam

Recovery is a process rather than a one-time fix.

The road for a child with these challenges includes bends, twists and detours. Sometimes you will have to revisit some of the stops. Sometimes you may hit a roadblock that must be overcome. As your child grows and changes, you will need to make adjustments to medication, therapy, parenting approaches and school accommodations. At these times, it will be important for you and your child to “stop and smell the roses” by recognizing how far your child has come from where he started. It will be an ongoing process throughout your child’s life. But, along with your love, it is the best investment you can make in your child’s future.

The good news is that you have a proven road map that has been followed by many other parents as they successfully advocate for their children. As you learn to navigate your child’s life with new skills and knowledge, you will be setting an example for your child of how he will eventually navigate his own life as he grows towards independence.

What greater gift can we give any of our children?

The resources listed in this section have been compiled by members of the Children's Mental Health Action Network based on the experiences of parents who belong to member organizations. The list is not comprehensive, and inclusion does not imply endorsement by the group as a whole. Parents have found many of these resources helpful in the past. A note about website links: the Internet is a constantly changing resource. If you find that a website no longer accessible via the links provided below, use your computer's search feature and enter the name of the organization you are looking for.

Crisis Management & Psychiatric Hospitals

Public Institutions

Harris County Psychiatric Center (Medical Center)

Crisis psychiatric hospitalization, residential treatment. Medicaid, Medicare, CHIP, private insurance, self-pay accepted. Indigent clients referred through the Mental Health Mental Retardation of Harris County.

Phone: 713-741-5000

Website: <http://hcpc.uth.tmc.edu>

MCOT (Mobile Crisis Outreach Team)

Crisis intervention for those unable to access hospital facility and who are at risk for hospitalization. The MCOT team will come to the patient in psychiatric crisis to assess the situation and help determine whether hospitalization or other treatment is appropriate.

Phone: 713-970-7520

Neuropsychiatric Center (NPC-Medical Center area)

Crisis stabilization services and emergency psychiatric care. Medicaid, Medicare, CHIP, private insurance, self-pay and indigent clients accepted.

Phone: 713-970-7070 (24 hours a day)

Website: <http://www.mhmraofharriscounty.org>

Private Hospitals

Cypress Creek Hospital (North Houston)

Inpatient psychiatric treatment for adolescents. Partial Hospitalization Program, Intensive Outpatient Program, and Chemical Dependency Program for adolescents. Accept qualified private insurance, CHIP, Medicaid. No-cost assessments available 24 hours a day, 7 days a week. "We believe change can happen."

Phone: 281-586-7600

17750 Cali Dr.

Houston, TX 77090

Website: <http://www.cypresscreekhospital.com>

Intra Care Hospitals (Medical Center and North Houston)

Crisis psychiatric hospitalization. Accepts most private insurance, Medicaid.

Phone: 281-893-7200

Website: <http://www.intracarehospital.com>

Kingwood Pines Hospital (Kingwood)

Inpatient psychiatric treatment for children and adolescents. Partial Hospitalization Program, Intensive Outpatient Program, and Chemical Dependency Program for adolescents. Accept qualified private insurance, CHIP, Medicaid. No-cost assessments available 24 hours a day, 7 days a week. "We believe change can happen."

Phone: 281-358-1495

2001 Ladbrook Dr.

Kingwood, TX 77339

Website: <http://www.psolutions.com/facilities/kingwood>

The Menninger Clinic of Baylor College of Medicine

Menninger is a national specialty psychiatric hospital in Houston for adolescents and adults with severe psychiatric disorders. Specialty programs focus on dual disorders including obsessive-compulsive, anxiety, mood, eating, psychotic, personality, and addictive. Admission is determined by age, symptoms and level of functioning.

Phone: 800-351-9058

Website: www.menningerclinic.com

West Oaks Hospital (Southwest Houston)

Inpatient psychiatric treatment for children and adolescents. Partial Hospitalization Program, Intensive Outpatient Program, and Chemical Dependency Program for adolescents. Accept qualified private insurance, CHIP, Medicaid. No-cost assessments available 24 hours a day, 7 days a week. "We believe change can happen."

Phone: 713-995-0909

6500 Hornwood

Houston, TX 77074

Website: <http://www.westoakshospital.com>

Crisis Call Lines

Crisis Intervention of Houston, Inc. Hotline: 713-HOTLINE (713-468-5463)

Texas Runaway Hotline: 1-888-580-4357

To provide peer counseling to runaways and family members.

Teen Crisis Hotline: 713-529-TEEN (713-529-8336)

Texas Youth: 1-800-210-2278

Peer counseling for youth and family members for conflicts, delinquency, truancy, abuse, neglect, and runaways.

Crisis Hotline (Spanish): 713-526-8088

Local Support Organizations & Support Groups

Attention Deficit Disorders Association-Southern Region (ADDA-SR)

ADDA-SR provides a variety of helpful resources to families coping with AD/HD and co-existing conditions. Ongoing support is offered through chapters where coming together with others in a similar situation offers understanding and hope. A Referral Coordinator and other representatives lend a listening ear and help navigate the path to doctors, schools, tutors and other needs. Trained advocates are available to answer questions about rights and responsibilities in the school system. ADDA believes that education equals empowerment and learning opportunities include workshops, an annual conference, a newsletter for members and the web site.

Phone: 281-897-0982

E-mail: addaoffice@pdq.net

Website: www.adda-sr.org

Harris County Alliance for Children and Families/CRCG

A creative collaboration among families and service providers that will empower families and children to reach outcomes through flexible strength-based services that pool resources and are easily accessed.

Contact: Lauren Laughlin Moore

Phone: 713-295-2518

Email: lauren.moore@cps.hctx.net

Contact: Michelle Hollander, Parent Partner

Phone: 713-569-7307

Email: michellebh@comcast.net

Depression & Bipolar Support Alliance

Depression and Bipolar Support Alliance (DBSA) is a national self-help, nonprofit organization for those who have been diagnosed or have symptoms of a mood disorder. Families and friends of people with mood disorders are also involved. DBSA provides personal support and direct services to its members, educates the public about the nature and management of these treatable disorders, and promotes related research.

Phone: 713-600-1131 (Information Line)

Website: www.dbsahouston.org

Houston Federation of Families for Children's Mental Health

Provides direct support for families/caregivers of children with mental disorders. Peer-to-peer support for advocacy with schools and educational issues. No charge for services. All members are caregivers themselves who have had to navigate the systems of care for their children. Counselors provide help with educational law, provide education for families with support and resources. A member of the National Federation of Families for Children's Mental Health (FFCMH).

Contact: Barbara Sewell

Phone: 281-335-5600/281-773-4456

Website: ffcmh.org

NAMI Metropolitan Houston (National Alliance on Mental Illness)

Provides free education programs to families and caregivers of children and adolescents with mental disorders. Peer support groups, and advocacy to enable families to become more effective self-advocates. Our membership consists of families, friends, persons with mental disorders, and mental health professionals. Affiliated with NAMI: The Nation's Voice on Mental Illness and NAMI Texas.

Contact: Leslie Gerber, Executive Director

Phone: 713-970-4419

Website: www.namimetrohouston.org

Obsessive Compulsive Foundation

OCF is a national organization whose mission is to support people who have been diagnosed with obsessive-compulsive disorder and their families through support groups, education, resources and research. Local support groups in the Houston area can be found on the national website.

Website: www.ocfoundation.org

Texas Autism Advocacy

Texas Autism Advocacy is a clearinghouse for local programs and services for children with autism and Asperger's syndrome. The website lists many support groups, advocacy services, education programs and referral sources available in the greater Houston area.

Website: www.texasautismadvocacy.org

Information And Referral

Mental Health Association of Greater Houston

The Mental Health Association provides education and advocacy for the community to ensure that needed treatment and resources are available to those who need them. Their Information and Referral line links people with needed mental health resources. Call for more information on many topics or for mental health referrals. You can also request a free copy of "The Guide", a comprehensive list of the non-profit mental health services in Harris County.

Phone: 713-522-5161

Website: www.mhahouston.org

Parent And Teacher Training Seminars

Family Services of Greater Houston

These services help families improve their parenting skills and family relationships. Classes offers parents and caregivers the opportunity to gain information that will help them simplify family life and parenting tasks to enhance and improve parent-child and family relationships. Topics include anger management, building healthy self-esteem in children, child development, effective communication, effective discipline techniques, and identifying a parent's role.

Phone: 713-861-4849

Website: http://www.familyservices.org/au_mv.html

Monarch School Learning Center

Provides programs for parents and professionals on topics of concern to those dealing with children and adolescents with brain disorders. Training for parents, teachers and mental health care professionals and classroom observation.

Phone: 713-479-0800

Website: <http://www.monarchschool.org>

Texas Children's Hospital Learning Support Center

The learning support center provides neuropsychological and psychological services for children who experience emotional, cognitive, behavioral, social or educational difficulties. The learning support center's therapeutic services include individual and group psychotherapy, social skills training, and individualized academic assistance. Other services include parent training to support child behavior changes, family therapy to help families cope with significant stress, and counseling to help integrate children with chronic illnesses into the school environment.

Phone: 832-822-3700

Website: <http://www.texaschildrenshospital.org>

NAMI Texas Visions for Tomorrow

Visions for Tomorrow is a free workshop course taught by family members who are parenting or have parented a child or adolescent with brain disorders or mental illness to other family members. The course addresses the needs of younger families in dealing with children and adolescents with brain disorders or mental illnesses. Topics include types of mental illnesses and emotional disorders as well as instruction on coping skills, dealing with schools, and medication. Tailored for direct, primary caregivers of children and adolescents with brain disorders and mental illnesses, Visions for Tomorrow addresses ADD/ADHD, depression, bipolar disorder, eating disorders, anxiety disorders, and schizophrenia and methods used to treat these disorders.

This nationally recognized curriculum, which NAMI Texas has shared with 31 states, also provides young family caregivers education in accessing school services, IDEA, and other resources. Also included are skills-building workshops in communication, problem management, coping, self-care, rehabilitation, transition, the recovery cycle, advocacy, and a support group component. The VFT class is 2-2.5 hours per class, following an 8-12 week or weekend format. There is no charge to families who take this class.

For information: www.namimetrohouston.org or www.namiwesthouston.org

Visions for Tomorrow Professional In-Service

Visions for Tomorrow Professional In-Service is a 6-8 hr. training designed to address the needs of those who work with children such as teachers and other school specialists, mental health care workers, foster care professionals, churches, etc. This program is 6-8 hours.

For information, contact Leslie Gerber, Metropolitan Houston, 713-970-4419 or Bonnie Cord, West Houston, 713-984-2538

Partnering With Your Child's School

ABC's of Educational Advocacy

This CD ROM educates families about how they can help advocate for their child in school and get the services they need to succeed.

Website: http://www.bpkids.org/site/PageServer?pagename=com_parentcd

Partners in Education

A six-hour, self-directed e-learning course to help parents with children with developmental disabilities better understand and maximize the benefits of special education services and inclusion for their children.

Website: <http://www.partnersinpolicymaking.com/education>

Advocacy, Inc.

Multiple locations. Provides direct advocacy services including special education for individuals with disabilities. However, they only take cases that fall within their chosen focus areas for a given year. The web site has great, downloadable publications on a variety of special education concerns. Services available in Spanish.

Phone: 713-974-7691

Website: www.advocacyinc.org

Spanish: <http://www.advocacyinc.org/espanol.htm>

Arc of Greater Houston - The Right to Learn Program

All of Harris County. Provides free consultation, assistance, and training for parents of children involved in the special education process. A service of The Arc of Greater Houston.

Phone: 713-957-1600

Website: www.thearcofgreaterhouston.com

Family to Family Network

The Mission of Family to Family Network is to help families of children with disabilities by providing information, training, referral and support. Offering educational training events, ARD clinics, one on one technical assistance, a lending library, and quarterly newsletter.

Phone: 713-466-6304

Website: www.familytofamilynetwork.org

Helpful Interventions

For parents of children with special needs. Offers special education consultation, advocacy training and workshops, referrals to appropriate community services, educational follow-up services, and workshops for parents and professionals.

Phone: 281-272-2206

E-mail: helpfulinterventions@yahoo.com

Partner Resource Network—TEAM Project

TEAM Project is a free resource to help parents become equal partners with professionals in the growth and education of their children with disabilities. It provides training, information and support to children with all types of disabilities. Services include workshops, information and referral, assistance in preparing for ARD meetings with school and other resources.

Phone: 713-524-2147

Website: www.PartnersTX.org

Early Childhood Intervention (ECI)

“ECI is a statewide program for families with children, birth to three, with disabilities and developmental delays. ECI supports families to help their children reach potential through developmental services.....State and federally funded through the Individual with Disabilities Education Act (IDEA, P.L. 108-446), ECI provides evaluations and assessments, at no cost to families, to determine eligibility and need for services. Families and professionals work as a team to plan appropriate services based on the unique needs of the child and family.

Website: www.dars.state.tx.us/ecis

Texas Education Agency

Offers resources, including a guide to the ARD process, ARD decision-making process for Texas Assessment Program, ARD/IEP team complaint process, discipline, parent resource guide, Parent’s Rights (Procedural Safeguard document), reauthorization of IDEA 2004, Texas Behavioral Support Initiative.

Website: www.tea.state.tx.us/special.ed

Counseling & Diagnostic Services

Asian America Family Services (Southwest)

AAFS is dedicated to serving the mental health needs of the Asian American community in the greater Houston area by providing bilingual and bicultural counseling and support services. Staff speaks Vietnamese, Mandarin, Cantonese, Korean and Indian dialects. Programs include: Clinical and Mental Health Services, Family Support Services, Senior Programs, Youth Programs, Substance Abuse Prevention Programs and Stanley Sue Center for Cultural Competency.

Phone: 713-339-3688

Website: <http://www.aafstexas.org>

Association for the Advancement of Mexican Americans (AAMA) (Southeast)

AAMA’s mission is to advance the lives of at-risk youth and families through an array of innovative programs that provide education, social services, healthcare and human services, and community development in Texas cities.

Phone: 713-926-9491

Website: www.aamainc.com

Ben Taub Hospital Pediatric Mental Health Clinic (Medical Center Area)

Testing, assessment and outpatient treatment.

Phone: 713-873-KIDS

Website: <http://170.57.224.10/about/facilities/btcc.htm>

DePelchin Children’s Center (Multiple locations)

Assessment, individual, group and family therapy, childhood trauma issues, adoption, foster care, post-adoption support, residential treatment, parenting classes. Serving children ages 4-17 for behavioral and emotional issues, foster care, adoption services. Inpatient and outpatient.

Phone: 713-730-2335

Website: <http://www.depelchin.org>

El Centro de Corazón (Multiple locations)

The clinic provides primary care, pediatrics, dental services, lab services, pharmacy, mental health services, HIV/AIDS screening and counseling, immunizations and healthy families early childhood.

Phone: 713-926-1849

Website: www.tachc.org

Family Services of Greater Houston (Multiple locations)

Individual and family counseling services, substance abuse counseling.

Phone: 713-861-4849

Website: http://www.familyservices.org/au_mv.html

Harris County Psychiatric Center Mental Health Outpatient Clinic

Diagnostic evaluation, psychiatric assessment, individual, group, and family therapy, crisis intervention, and other services. Medicaid, Medicare, CHIP, private insurance, and self-pay accepted.

Phone: 713-741-5000

Website: <http://hcpc.uth.tmc.edu>

Harris County Hospital District Community Behavioral Health Program

Counseling and individual and group therapy provided in Harris County Hospital District clinics

Phone: 713-526-4243 for appointments.

Interface-Samaritan Counseling Center (Multiple locations)

Counseling and educational services from a Christian perspective. Fees are based upon client's ability to pay (sliding scale).

Phone: 713-626-7990 Northern: 281-376-8000

Website: <http://interface-samaritan.org>

MHMRA (Mental Health Mental Retardation Authority) of Harris County (Multiple locations)

A public social service agency that provides mental health services to children 3-17 years of age.

Phone: 713-970-7070 (English or Spanish)

TDD: 713-970-7766

Website: www.mhmraharris.org

Monarch Diagnostic Clinic (West Houston)

The Monarch Diagnostic Clinic offers services to children, adults, and families in the greater community. These services include psychological/diagnostic assessments, DIR© therapy services, speech/language assessments, tutoring, educational assessments, and programmatic and family consultations. Comprehensive, detailed recommendations are provided.

Phone: 713-933-0568

Website: <http://www.monarchschool.org/DiagnosticClinic.html>

Texas Children's Hospital Learning Support Center (Medical Center)

Assessment and diagnostic testing, individual, family, group therapy. Special programs for autism, attention deficit disorder (ADD), pre-school intervention. Accepts qualified private insurance.

Phone: 832-822-3700

Website: <http://www.texaschildrenshospital.org/carecenters/LearningSupport/Default.aspx>

University of Houston Psychological Research and Services Center: (Main Campus)**Center for Anxiety and Depressive Disorders in Youth**

The Center for Anxiety and Depressive Disorders in Youth (CADDY) is committed to conducting research and providing treatments to children and adolescents with anxiety and depression. Located within the University of Houston's Psychology Research and Services Center, CADDY is focused on:

1. Providing empirically supported assessments and interventions
2. Working in conjunction with the adult-focused Anxiety Disorder Clinic to provide low-cost, state-of-the-art

Cognitive-Behavioral Treatment for youths with anxiety.

3. Conducting research on developmental pathways to internalizing problems in youth

4. Implementing prevention programs and conducting treatment outcome research

Website: <http://www.uh.edu/anxiety/childtreatment.htm>

Child Assessment Clinic

Offers intellectual/achievement/academic/learning disability evaluations, as well as psychological evaluations of behavioral and emotional problems in children. Services are offered on a sliding scale.

Phone: 713-743-8600

Website: <http://www.uh.edu/anxiety>

Public Assistance/Health Insurance Programs For Children With Disabilities

MHMRA of Harris County

Helps eligible children who qualify to receive MHMRA services to apply for Medicaid and CHIP. Also offers services at reduced cost to families who qualify. Eligibility is determined at:

3630 West Dallas

Houston, TX 77019

713-970-4444

Monday – Thursday, 8:00 a.m. to 6:00 p.m.; Friday, 8:00 a.m. to 4:00 p.m.

SSI for Children (Supplemental Security Income)

A program through which a qualifying guardian, parent or parents can apply to receive supplemental monetary benefits for minor children younger than 18 who have physical or mental conditions that result in severe functional limitations. Eligible children will also receive referrals for public health insurance programs.

Phone: 1-800-772-1213 (English and Spanish)

TTY: 1-800-325-0778

Website: <http://www.socialsecurity.gov/pubs/10026.html>

Systems of Hope

A local and SAMHSA grant funded program managed by the Harris County Protective Services for Children and Adults utilizing system of care wraparound services. System of care is a coordinated network of community-based services and supports that are organized to meet the challenges of children and youth with serious mental health needs and their families. Call for eligibility criteria:

Phone: 713-795-HOPE (713-795-4673)

Website: www.systemsofhope.org

Children's Medicaid/Children's Health Insurance Programs (CHIP)

The Children's Medicaid Program offers health insurance for children whose family income is at or below the Federal Poverty Level. CHIP is a national program designed for families who earn too much income to qualify for Medicaid but cannot afford private insurance. Both programs cover minor children under the age of 19. You may apply for both programs over the phone or by downloading an application online.

Phone: 1-877-543-7669 or 1-877-KIDS-NOW (English or Spanish)

TDD: 1-800-735-2988

Website: <http://www.chipmedicaid.com/>

Private Schools With Therapeutic And/Or Learning Disability Support

Avondale House (Southwest Houston)

Day school education, day rehabilitation programs, and residential care for persons with autism and other pervasive developmental disorders.

Phone: 713-933-9544

Website: www.avondalehouse.org

Briarwood School (West Houston)

Nonprofit independent school providing education for children with learning disabilities and developmental delays, grades K-12.

Also has summer learning program.

Phone: 281-493-1070

Website: www.briarwoodschool.org

Harris School (Central Houston)

Grades Pre-K through 8th.

The Child Development Center is sponsored by the Houston-Galveston Psychoanalytical Society to help children with neurological difficulties or emotional concerns that interfere with their ability to succeed in mainstream classrooms.

Phone: 713-526-2046

Houston Outdoor Learning Academy (HOLA) (Heights)

Accredited school offering individualized curricula with a focus on activity-based, outdoor learning, grades 6-12.

Accepts children with or without disabilities.

Phone: 713-224-4652

Website: www.holainfo.com

Joy School (Central Houston)

Day school for children with learning differences.

Phone: 713-523-0660

Website: www.thejoyschool.org

Learning Repertoire (Pearland)

Behavior and learning programs for children with autism and developmental disorders, based on the principals of Applied Behavior Analysis.

Phone: 713-436-5333

Website: <http://www.learningrepertoire.org>

Monarch School (West Houston)

School for children with attention deficit disorder, learning disabilities, PDD (pervasive developmental disorder), Asperger's syndrome, Tourette's syndrome, depression or bipolar disorder, anxiety disorder and/or seizure disorder. K-12. Four full time psychology staff members and a DIR © specialist provide therapeutic psychological and educational services with an individualized curriculum.

Phone: 713-479-0800

Website: www.monarchschool.org

Providence Treatment Center (Missouri City)

Day school for children with autism, mental retardation, learning disability, emotional disturbance, and other disabilities, ages 6 to 21.
Phone: 281-208-1117

Redd School (Northwest Houston)

Day school for children with learning differences and emotional issues, PreK-8.
Phone: 281-440-1106
Website: www.reddschool.com

River Oaks Academy (Central Houston)

Day school for children with learning disabilities, emotional disturbances and or ADD/ADHD. Has ROPES program, student and family counseling, ages 5 to 21.
Phone: 713-783-7200
Website: www.riveroaksacademy.com

Shape of Behavior (Multiple Locations)

Day school and socialization for children with autism and developmental delay, using Applied Behavior Analysis.
Phone: 832-358-2655
Website: www.shapeofbehavior.com

Westview School (West Houston)

Day school for children with PDD/autism and other communication or interactional disorders, using a multisensory curriculum emphasizing each child's strengths, age 2 through 5th grade (to be expanded).
Phone: 713-973-1900
Website: www.westviewschool.org

Parent Education And Support: Websites And Online Newsletters**Attention Deficit Disorders Association-Southern Region (ADDA-SR)**

www.adda-sr.org

Support groups, information, referral, advocacy and events are offered for parents, teachers, professionals and adults with AD/HD.

Anxiety Disorders Association

www.adaa.org/AnxietyDisorder.org

Newsletters, educational resources, advocacy for professionals and people with anxiety disorders.

Avance

www.avance.org, www.avancehouston.org

AVANCE offers an array of parenting education and literacy programs to provide our families with the tools they need to achieve economic and educational success.

BPChildren Newsletter

www.bpchildren.com

A family newsletter for those coping with bipolar disorder.

Child and Adolescent Bipolar Foundation

www.bpkids.org/site/PageServer

Provides education and support to parents of bipolar kids.

ChildBuilders Community Education Program

www.childbuilders.org

Addresses children's mental health issues, including healthy child development and effective parenting.

Children and Adults With Attention-Deficit/Hyperactivity Disorder (CHADD)

www.chadd.org (main site)

Support and education for parents and adults coping with AD/HD.

Office of Special Education and Rehabilitative Services

<http://www.ed.gov/about/offices/list/osers/osep>

Family to Family

www.familytofamilynetwork.org

Information, training, referral and support for families of children with disabilities. Provides a monthly e-list of trainings and events in the greater Houston area. To receive the e-list email: info@familytofamilynetwork.org

Houston Branch of the Dyslexia Association

www.houstonida.com

Dedicated to helping individuals with dyslexia and related learning disorders.

Juvenile Bipolar Research Foundation

www.JBRF.org

The National Alliance on Mental Illness (NAMI)

www.nami.org

www.namitexas.org

www.namimetrohouston.org

Known as NAMI: The Nation's Voice on Mental Illness.

The Neuhaus Center

www.neuhaus.org

Offers professional development for educators and serves as a resource for parents and adults seeking literacy information. Classes and library available.

National Information Center for Children and Youth with Disabilities

www.nichcy.org

Helpful publications can be ordered.

Partners Resource Network

www.PartnersTX.org

The mission of Partners Resource Network (PRN) is to empower parents of children and youth with disabilities in their roles as parents, decision makers, and advocates for their children and to promote partnerships among parents and professionals.

Schwab Learning

www.SchwabLearning.org

A Parent's Guide to Helping Kids with Learning Difficulties.

Texas Autism Advocacy

www.TexasAutismAdvocacy.org

Lists statewide resources for all disabilities.

Texas Project FIRST

www.texasprojectfirst.org

A website created by parents, for parents, to provide accurate and consistent information on the special education process. This site is a project of Family to Family Network, Region 9 Education Service Center, and the Texas Education Agency.

Tourette's Syndrome Association

www.tsa-usa.org/

Wrightslaw & The Special Ed Advocate Website - Pete and Pam Wright

www.wrightslaw.com

Advocacy and Educational Law Information.

Yellow Pages for Kids with Disabilities

<http://www.yellowpagesforkids.com/>

Resources listed by state

Youthwood

www.youthhood.org

Resources on self, friends, activities for children and teens.

Books For Parents Of Children/Adolescents With Brain, Emotional Or Behavioral Disorders

Adoption

Adopting the Hurt Child: Hope for Families With Special-Needs Kids : A Guide for Parents and Professionals, Gregory C. Keck and Regina M. Kupecky.

Issues affecting adoptive families; readable prose, case histories, how parents can help children make sense of their past and build a better future.

Attaching in Adoption: Practical Tools for Today's Parents, Deborah D. Gray

Proper attachment (the most fundamental issue in a successful adoption); solutions to a variety of specific attachment problems.

Anxiety Disorder

Worried No More: Help and Hope for Anxious Children, Aureen Pinto Wagner.

Effective practical guidance, specific how-to steps, ready-to-use forms and tools for parents.

Helping Your Anxious Child: A Step-by-Step Guide for Parents, Ronald M. Rapee, Susan H. Spence, Vanessa Cobham and Ann Wignall.

Practical guidance, case studies, relaxation techniques, stress management, deductive thinking therapy, social skills.

ADD/ADHD

A Bird's-Eye View Of Life With ADD And ADHD: Advice From Young Survivors, Chris Zeigler Dendy and Alex Zeigler.

A survival guide for teens, preteens, & young adults.

These three books by the same authors are clear, practical, comprehensive guides on dealing successfully with ADD:

Driven To Distraction: Recognizing and Coping with Attention Deficit Disorder from Childhood Through Adulthood

Answers to Distraction

Delivered from Distraction: Getting the Most out of Life with Attention Deficit Disorder,

Edward M. Hallowell M.D. and John J. Ratey. M.D.

Taking Charge of ADHD: The Complete Authoritative Guide for Parents, Russell A. Barkley.

Empowers parents; current research; effective attitudes and strategies.

Teach and Reach Students with Attention Deficit Disorders, Nancy Eisenberg and Pam Esser.

www.adhdteachandreach.com

Characteristics, myths, behavioral and academic modifications.

Teenagers with ADD: A Parents' Guide, Chris A. Zeigler Dendy.

Information, suggestions, case studies; lively, upbeat, comprehensive.

Autism/Asperger's Syndrome

Asperger's Syndrome: A Guide for Parents and Professionals, Tony Attwood.

Characteristics of Asperger's Syndrome, strategies to reduce debilitating characteristics; easy to read.

The Asperger Parent: How to Raise a Child with Asperger Syndrome and Maintain Your Sense of Humor, Jeffrey Cohen and Lori Shery.

Essential information, emotional support for parents.

Asperger Syndrome and Difficult Moments: Practical Solutions for Tantrums, Rage and Meltdowns, Brenda Smith Myles and Jack Southwick.

Practical; solutions for day-to-day challenges; parental organization and support; rage cycle; learning to monitor and control uncomfortable situations; easy to understand.

Autism Spectrum Disorders from A to Z: Assessment, Diagnosis... & More!, Barbara T. Doyle, Emily Doyle Iland.

Excellent. Guiding readers step-by-step through the complex of symptoms, definitions, assessments and diagnoses of the variety of autism spectrum disorders, the authors provide practical strategies to improve the assessment process and help the child or adult deal with the stress of the evaluations.

Educating Children with Autism, National Academies Press.

Excellent for parents. Examines some fundamental issues, including: how children's specific diagnoses should affect educational assessment and planning; how to support the families of children with autism; features of effective instructional and comprehensive programs and strategies; valuable information on how parents, teachers, school staffs, professionals, can educate children with autism.

Keisha's Doors: An Autism Story Book One/ Las Puertas de Keisha: Una Historia de Autismo Libro Uno, Marvie Ellis, ISBN 1-933319-00-3.

Tacos Anyone? An Autism Story Book Two/ Alguien Quiere Tacos? Una

Historia de Autismo Libro Dos, Marvie Ellis, ISBN 1-933319-02-X.

Pre-K – 5th Grade. Both nominated for the 2006 Dolly Gray Children's Developmental Disabilities Literature Award. Tacos received 2005 Barbara Jordan Media Award and is about a four year old boy with autism and his older brother. The therapist teaches the older brother how to play with his younger brother, making sibling time fun again. Both written in English and Spanish depicting multiculturally diverse

characters. Ellis is a language and occupational therapy expert.

Relationship Development Intervention with Children, Adolescents and Adults: Social and Emotional Development Activities for Asperger Syndrome, Autism, PDD, and NLD, Steven E. Gutstein, Ph.D.

Teaches the joy of relationships rather than how to read and mimic normal behavior.

Thinking in Pictures Expanded Edition: My Life with Autism, Temple Grandin, Ph.D.

Written from the perspective of a scientist and an autistic person. Tells how life is experienced by an autistic person and how she functions in the world. Grandin is a gifted animal scientist who has designed one third of all the livestock-handling facilities in the United States and lectures widely on autism.

[For more books on autism, go to www.texasautismadvocacy.org.]

Bipolar Disorder

The Bipolar Child: The Definitive and Reassuring Guide to Childhood's Most Misunderstood Disorder, Demetri Papolos, M.D. and Janice Papolos.

Different manifestation of illness in children; diagnoses; finding good treatment and medications; advocating for child at school including an IEP; information on adolescence, insurance, hospitalization, psychological impact, sibling issues.

The Ups and Downs of Raising a Bipolar Child, Judith Lederman and Candida Fink, M.D.

Invaluable resource for parents raising a child with bipolar disorder; detailed practical advice; special education services; information for IEP meetings; sibling issues; parents' needs and more.

Acquainted with the Night: A Parent's Quest to Understand Depression and Bipolar Disorder in His Children, Paul Raeburn.

Immensely personal story of son's and daughter's illnesses; gripping; information and lessons from his family's experience.

Survival Strategies for Raising Children with Bipolar Disorder, George T. Lynn

Innovative parenting and counseling techniques for helping children with bi-polar disorder and the conditions that may occur with it.

An Unquiet Mind: A Memoir of Moods and Madness. Kay Redfield Jamison.

Excellent. Easy to read. Written by a psychotherapist, a professor of psychiatry and one who has bipolar disorder. Through her own story, looks at the onset, coming to terms with the positive and negative effects, and management of the disorder.

Borderline Personality Disorder

Borderline Personality Disorder Demystified: An Essential Guide for Understanding and Living with BPD, Robert O. Friedel, M.D.

Diagnosis, possible causes, disturbed neural circuits, medications, psychotherapy, hopeful future, empathetic.

Cognitive-Behavioral Treatment of Borderline Personality Disorder, Marsha Linehan.

Skills Training Manual for Treating Borderline Personality Disorder, Marsha Linehan.

These companion books represent the gold standard for treating borderline personality disorder; written for professionals.

Criminal Justice

Texas Criminal Procedure and the Offender with Mental Illness: An Analysis and Guide, Brian D. Shannon and Daniel H. Benson.

Explains the Texas Criminal Justice System with respect to people with mental illness.

Depression

When Nothing Matters Anymore: A Survival Guide for Depressed Teens, Bev Cobain.

Kurt Cobain's cousin's powerful book with information help and hope for teens, parents, teachers, counselors.

Help Me, I'm Sad: Recognizing, Treating and Preventing Childhood and Adolescent Depression, David Fassler, M.D. and Lynne S. Dumas.

Especially helpful to recognize warning signs of depression no matter the developmental stage; case histories to illustrate.

More Than Moody: Recognizing and Treating Adolescent Depression, Harold S. Koplewicz, M.D.

A premier child and adolescent psychiatrist; difference between normal teenage angst and true depression; warning signs, risk factors, key behavior to look for; treatment options including cognitive behavioral therapy and medication; wonderful guide.

High Times/Low Times: How to Cope with Teenage Depression, J. E. Meeks.

What depression is and how to build a plan.

Feeling Good: The New Mood Therapy, David D. Burns

Recognize the cause of your mood swings, nip negative feelings in the bud, deal with guilt, handle hostility and criticism, build self-esteem, avoid the painful downward spiral of depression, more.

Drug Abuse/Dual Diagnosis

Lives At Risk: Understanding and Treating Young People with Dual Diagnosis, Hilary Ryglewicz and Bert Pepper.

Experienced clinicians; diagnosis, treatment; integration of personality theory and brain study in biopsychosocial model; complex; mostly for professionals.

Eating Disorders

The Body Betrayed: A Deeper Understanding of Women, Eating Disorders, and Treatment, Kathryn J. Zerbe M.D.

Causes, manifestations, and treatment of eating disorders such as anorexia or bulimia nervosa; written for the lay person.

General

DSM-IV-TR: Diagnostic and Statistical Manual of Mental Disorders, American Psychiatric Association, 4th edition, July 2000.

Psychiatric categories for diagnosis, treatment, insurance; decision trees, glossary of technical terms, multi-axial assessment, etc.

The Explosive Child: A New Approach for Understanding and Parenting Easily Frustrated, Chronically Inflexible Children, Ross W. Greene, Ph.D.

Helps parents deal successfully with easily frustrated children who are hard to manage.

Quirky Kids: Understanding and Helping Your Child Who Doesn't Fit In – When to Worry and When Not to Worry, Perri Klass, M.D. and Eileen Costello, M.D.

Easy to read, reassuring, frank, thorough; addresses anxiety disorder, attention deficit disorder, Tourette's syndrome, oppositional defiance disorder, Asperger's syndrome, etc.; walks parents through the steps of helping child, e.g., evaluations, therapies and medical treatments available.

Grief

Grieving Mental Illness, A Guide for Patients and Their Caregivers, Virginia Lafond.

An easy-to-read book for anyone who has endured the effects of mental illness, whether as sufferer, friend, family member, and/or caregiver. Helps people come to terms with mental illness in a positive way, while avoiding disabling emotional responses. The book explores grief as a normal, healthy, adaptive process. The author is able to approach this theme from the perspectives of both a caregiver and a sufferer.

Medications/Supplements

Straight Talk About Psychiatric Medications for Kids, Timothy E. Wilens, M.D.

Up-to-date information helping parents understand what child's doctor is recommending and options; real-life examples, answers to frequently asked questions, charts, tables; effects on health, emotion and school performance; helps parents become active informed managers of child's care; essential.

Helping Parents, Youth & Teachers Understanding Medications for Behavioral & Emotional Problems: A Resource Book of Medication Information Handouts.

Collection of medication information handouts on most effective medications for pediatric behavioral and emotional disorders, including anticonvulsants, stimulants, anti-anxiety medication, SSRIs and more; in print and on CD-ROM; practical resource.

The Omega-3 Connection, Andrew L. Stoll.

Why Omega-3 essential fatty acids are essential for good brain functioning; helps prevent depression and bipolar relapse; what to look for in a high-quality supplements; advises use in conjunction with medicine in bipolar disorder. Note: FDA has found 3 grams per day of fish oil safe for all ages.

Obsessive Compulsive Disorder

Freeing Your Child from Obsessive-Compulsive Disorder: A Powerful, Practical Program for Parents of Children and Adolescents; Tamar E. Chansky.

Roadmap to understanding and overcoming OCD; describes OCD as brain hiccup, misfiring, mechanical glitch; demystifies OCD; helps reclaim parental authority; believes child can break free from OCD.

Obsessive Compulsive Disorders: A Complete Guide to Getting Well and Staying Well, Fred Penzel.

Choosing most effective therapies and medications; avoiding relapses; resources.

What to do when your Child has Obsessive-Compulsive Disorder: Strategies and Solutions, Aureen Pinto Wagner, Ph.D.

Worry Hill metaphor; powerful step-by-step approach enabling children to regain control from OCD. She provides parents and children with a blue print to take charge of and master OCD.

Post Traumatic Stress Disorder

Coping With Trauma: Hope Through Understanding, Jon Allen, M.D.

Healing; informative; helps understand the effects of trauma on the self and relationships.

Schizophrenia

Coping With Schizophrenia: A Guide for Families, Kim Tornval Mueser and Kim T. Mueser.

Excellent strategies for families coping with Schizophrenia; concise information and research on causes and treatments; easy to understand information and coping strategies.

I am Not Sick I Don't Need Help: Helping the Seriously Mentally Ill Accept Treatment; A Practical Guide for Families and Therapists, Xavier Amador.

Readable, practical; imparts empathy and compassion for non-compliant consumers, enabling a cooperative relationship; step-by-step methods for developing that this relationship.

School Issues

Wrightslaw: From Emotions to Advocacy - The Special Education Survival Guide, 2nd Edition, Pam Wright and Pete Wright

Wrightslaw: Special Education Law, Pam Wright and Pete Wright
2nd Edition

Shyness/Social Phobia

Shy Children, Phobic Adults: Nature and Treatment of Social Phobia, Deborah C. Beidel and Samuel M. Turner.
Examines developmental aspects and how to manage in children as well as adults.

Special Needs Legal Planning

Planning for the Future: Providing a Meaningful Life for a Child with a Disability After Your Death, L. Mark Russell and Arnold E. Grant.

Available residential options, employment and social programs; communicating vital information to future caregivers; maximizing available government benefits; how much to leave your child to protect his or her future; and more.

Suicide

Night Falls Fast: Understanding Suicide, Kay Redfield Jamison.

Causes, prevention, rate of fatalities, psychological suffering of both the person attempting or committing suicide and the grief and confusion of those left behind.

Suicide: Why?, Adina Wroblewski.

Primarily about adults; general ideas helpful to parents; strong link between suicide and depression.

Testing

Straight Talk about Psychological Testing for Kids, Ellen Braaten, Ph.D. and Gretchen Felopulos, Ph.D.

When, why and how to have your child tested.

[For more books, see www.nami.org/Content/ContentGroups/CAAC/CARG.pdf]

Houston Police Department Crisis Intervention Team (CIT) Resource Guide

Call 9-1-1 for assistance and ask for a CIT officer if someone you know is suffering from these symptoms:

- Danger to themselves or others
- Severe disorganization impairing insight and/or judgment
- Danger to property where such damage would endanger self or others
- A severe imminent risk of placing self or others at risk for significant harm through impulsive behavior or poor judgment
- The presence of a co-existing medical condition that would complicate or interfere with the treatment of the psychiatric disorder at a less intensive level of care
- The Consumer has deteriorated to a level of disorganization and dysfunction that they cannot cooperate with outpatient care or treatment plan

Call MCOT (Mobile Crisis Outreach Team) at 713-970-4600 for assistance if:

An individual has been diagnosed with or is displaying symptoms of mental illness, and

- Refuses to take his/her prescribed medication
- Refuses to care of his/herself, (i.e., personal hygiene, eat, drink non-alcoholic liquids, sleeps in excess, has been drinking alcohol excessively, any one or all longer than a period of 24 hours)
- The Consumer cannot or will not remain in a higher level of care
- Unable to participate in outpatient treatment without intervention to stabilize, organize and/or increase insight into illness and need for treatment

All of which could lead to potential decompensation without further care.

RESOURCE NUMBERS

Houston Police Department.....	713-884-3131
Houston Fire Department.....	713-884-3143
MHMRA Helpline.....	713-970-7000 or 1-866-970-4770
MHMRA Crisis Hotline.....	713-970-4600
NeuroPsychiatric Center (NPC) 1502 Taub Loop, Houston TX	
MHMRA Eligibility Center.....	713-970-4444
3630 West Dallas, Houston TX	
Mobile Crisis Outreach Team (MCOT).....	713-970-4600
MHMRA Crisis Counseling Unit.....	713-970-4600
2627 Caroline, Houston TX	
Harris County Psychiatric Center (HCPC).....	713-741-5000
2800 S. MacGregor, Houston TX	
Crisis Hotline.....	713-HOTLINE or 713-468-5463
Teen Crisis Hotline.....	713-529-TEEN or 713-529-8336
Spanish Hotline.....	713-526-8088
Gay and Lesbian Switchboard of Houston.....	713-529-3211
Mental Health Association.....	713-522-5161
The Council on Alcohol and Drugs Houston.....	713-942-4100

EMERGENCY SERVICES

9-1-1

“To Go” Crisis Kit

Child’s Name:

Date of Birth:

Diagnosis(es):

Physician’s Name:

Psychiatrist’s Name:

Phone #:

Emergency Contact #1:

Phone #:

Emergency Contact #2:

Phone #:

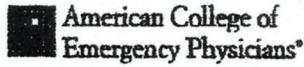
Allergies:

Documents to keep in envelope:

- Copy of Birth Certificate/Adoption Papers/Guardianship Papers
- Current Medication Labels
- Copy of Current Insurance Card
- Copy of Child’s Social Security Card
- Other information you think you will need to have for healthcare or law enforcement professionals.
- Instructions on how to file a Mental Health Warrant/Helpful Phone Numbers

NOTES: _____

Emergency Information Form for Children With Special Needs



American Academy
of Pediatrics



Date form
completed
By Whom

Revised
Revised

Initials
Initials

Name:		Birth date:	Nickname:
Home Address:		Home/Work Phone:	
Parent/Guardian:		Emergency Contact Names & Relationship:	
Signature/Consent*:			
Primary Language:		Phone Number(s):	
Physicians:			
Primary care physician:		Emergency Phone:	
		Fax:	
Current Specialty physician:		Emergency Phone:	
Specialty:		Fax:	
Current Specialty physician:		Emergency Phone:	
Specialty:		Fax:	
Anticipated Primary ED:		Pharmacy:	
Anticipated Tertiary Care Center:			

Diagnoses/Past Procedures/Physical Exam:	
1.	Baseline physical findings:
2.	
3.	Baseline vital signs:
4.	
Synopsis:	Baseline neurological status:

Last Name:

Diagnoses/Past Procedures/Physical Exam continued:

Medications:	Significant baseline ancillary findings (lab, x-ray, ECG):
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	Prostheses/Appliances/Advanced Technology Devices:
5. _____	_____
6. _____	_____

Management Data:

Allergies: Medications/Foods to be avoided	and why:
1. _____	_____
2. _____	_____
3. _____	_____
Procedures to be avoided	and why:
1. _____	_____
2. _____	_____
3. _____	_____

Immunizations (mm/yy)

Dates	Dates
DPT	Hep B
OPV	Varicella
MMR	TB status
HIB	Other

Antibiotic prophylaxis: _____ Indication: _____ Medication and dose: _____

Common Presenting Problems/Findings With Specific Suggested Managements

Problem	Suggested Diagnostic Studies	Treatment Considerations

Comments on child, family, or other specific medical issues:

Physician/Provider Signature: _____ **Print Name:** _____

FILING A MENTAL HEALTH WARRANT

1. ***Applicant** will go to the Harris County Psychiatric Center (HCPC) located at 2800 S. MacGregor, Houston, Texas 77021. (Phone #: 713-741-6052)
2. Applicant will inform the receptionist at HCPC that he/she is there to file a mental health warrant.
3. Receptionist at HCPC will give applicant a three (3) page form to fill out. Information needed will be demographic information on proposed patient and informant and an affidavit to fill out stating the reason applicant feels proposed patient is a danger to self or others.
4. Once this paperwork is filled out applicant will give paperwork back to receptionist at HCPC and applicant will be called back to county clerk's office to get mental health warrant.
5. County clerk will pull up three (3) other forms for applicant to fill out and sign in front of clerk after she has issued mental health warrant.
6. Mental health warrant will be sent down to Judge for his review and signature by his court staff.
7. Once warrant is signed and received back to court they will then give to Precinct One mental warrant division for proposed patient to be picked up and taken to hospital.
8. Deputy from warrant division will contact informant to make arrangements for proposed patient's pick-up.
9. Once proposed patient has been presented to hospital, a psychiatrist will evaluate proposed patient within 24 hours.

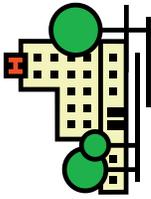
***Applicant** is anyone over the age of 18 who is **personally** knowledgeable of how proposed patient has been acting.

If warrant is to be issued to any hospital other than HCPC, applicant must make arrangements with private facility for bed clearance before going to the Harris County Psychiatric Center.

If warrant is to be issued to HCPC, applicant must come between 8:00 a.m. and 1:30 p.m. It is approximately a two to three hours' process for HCPC and applicant must bring proposed patient's date of birth and Social Security Number.

HELPFUL PHONE NUMBERS:

MHMRA Crisis Hotline.....	713-970-4600
Answered 24 hours a day, 7 days a week	
Probate Court #3 (Main Number).....	713-741-6020
Probate Court #3 (Fax).....	713-741-6093
Probate Court #3 Liaison.....	713-741-6019
County Attorney's Office.....	713-741-6016
Warrant Division, County Clerk's Office.....	713-741-6024
MHMRA of Harris County (Harris County Psychiatric Center).....	713-741-6052
Constable's Office.....	713-741-6012



Harris County Psychiatric Center
2800 S.MacGregor
Houston, TX 77021
(713)741-6052

Applicant will go to

Inform receptionist you are there to get a Mental Health Warrant



Receptionist will then give applicant 3 page form to fill out.

Info needed:
1. Demographics
2. Informant
3. Affidavit (stating reason patient is a danger)

Once paper work is filled out pass back to receptionist. Applicant will then be called back to county clerk office to get Mental Health Warrant.



County clerk will pull up three other forms for applicant to fill out and sign in front of clerk..

Mental Health Warrant will then be sent down to judge for review and signature.



Once warrant is signed and received back from court it will be passed to Precinct #1 Mental Warrant Division.



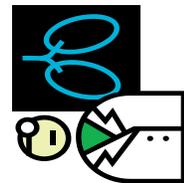
Mental Warrant Division will receive signed warrant for proposed patient to be picked up and taken to hospital.



Deputy from warrant division will contact informant to make arrangements for proposed patient pick-up.



Once proposed patient has been picked up and presented to hospital.



Patient will then be evaluated by psychiatrist within 24 hours.



This edition of the Resource Guide is made possible by a grant from Spindletop Charities.