

**People who are successful in life are successful at self-management**



## Summer Essentials

As a child, I always loved the summer. No more pencils, no more books. No more teachers' dirty looks. Finally a time to stay up a little later, sleep a little later, take my time getting dressed, make new friends, and - most importantly - try new things. Now I had FREEDOM! Well, yes and no. My parents always had a program for me to do or a camp for me to attend. I protested and just wanted to do nothing. In part I was afraid to try new things because of fears that I would fail again, like I always seemed to do at school.

But my parents knew what I needed and they never put me in situations during the summer where I would fail. Struggle? Yes. Fail, no. I didn't appreciate the scheduled activities at the time, but thank goodness my parents didn't succumb to my tantrums. Those summers were essential in making me the person I am today, because it was then that I learned the things that they don't teach in school. Summers taught me how to make (and keep) friends, how to manage my time without a schedule, and that mistakes are wonderful things when we learn from them. In short, I learned social and emotional intelligence.

Dr. Peacock's article in this edition discusses the importance of social and emotional intelligence, and the means to develop these skills outside of school. Our Group Therapy program is unique in many ways, but the most important is that our groups have been developed over the last 25 years. Each year we learn and modify our groups to maximize the benefits during the summer break. Groups help not only with social and emotional intelligence, but also with preparation for the upcoming school year whether for fifth graders or college freshman.

Dr. Sophia Havasy has been in the field of psychology for 34 years, and in the last 15 she has focused her energies studying why some young adults have problems with launching into society. The first major launch is to college. Many graduating seniors have the academic requirements for college, but are sorely lacking in self-management skills, as well as, the social and emotional intelligence that are crucial for success at the next level. Bring your teen in this summer for an evaluation of college readiness. Dr. Havasy and our team will be able to pinpoint specific strengths and areas for growth before your child takes that next step towards independence. It's a wise investment when you consider the emotional and financial cost of sending an unprepared child off to college.

Some students need the summer break to creatively boost their academic skill development. At the Center we approach this very differently. We have programs discussed in Linda Narun and Lynn Ayres' article entitled: Improving the Brain to Enhance Learning. These computer based programs have shown the ability to change the brain, and directly address the underlying problems in Learning Disorders. The article contains the links to research showing these programs' effectiveness.

Summer is an excellent time to do Neurotherapy because of its time intensive nature. Our Neurotherapy program utilizes the expertise of the country's foremost leaders in the field. Dr. Ron Swatzyna administers QEEG's on site and then gets expert analysis and interpretation from Dr. Meyer Proler and Jay Gunkelman. Their collaboration guides the neurofeedback treatment protocols that Dr. Swatzyna uses in session, and it also provides evidenced-based recommendations for medications. Read Dr. Swatzyna's article to learn more about how you can use Neurotherapy to keep your brains in top shape this summer.

Remember: summer break is only a break from school. But outside of the classroom there are so many exciting opportunities to help our kids learn and grow into successful young people. Take advantage of this time, turn off the screens, and try something new. Speaking of new, I'm thrilled to announce the arrival of two new doctors to our family. Dr. Desiree Gallagher is a clinical psychologist, and Dr. Amber Pastusek is a child and adolescent psychiatrist. Each of them was specifically chosen because of their special expertise and their warm and creative personality. Please read more about our newest clinicians on page 7. I hope you enjoy this edition of The Center Piece, and that you all have a wonderful summer of Self-Management!

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**TARNOW CENTER MISSION STATEMENT**

*To offer a Center of Excellence in the Southwest Region, providing innovative, superior quality therapy, while utilizing an interdisciplinary team approach to assessment and intervention for individuals and families affected by psychiatric, psychological, developmental, learning, and language disorders.*

# SAT? GPA? *OMG!*

## This Summer, Let's Revise Our Definition of Intelligence

*W. Walker Peacock, Psy.D.*



Go grab your child's last report card, and tell me what he got in Empathy. Okay, how about his grade in Courage? How'd he do in Grit? Optimism? What, you don't see it? You have to keep looking. It's right there, just below the... oh, right. They don't give grades for character. Too bad, considering that character tells you more about how successful a child will be than any grades he gets on math or science.

To the school age student who is reading this right now, don't get too excited. Grades are important. Academic success is important. But we've let the pendulum swing way too far in the direction of "IQ = Success," in the belief that a child's IQ score is the best indicator of future performance. So much so, that we let that number dictate some of the most important decisions we make in a child's life. Who gets into the "elite" schools? Who makes it into the "Gifted" programs? But current research is telling us that we might as well pick names out of a hat, for all the good an IQ score does in predicting the future.

In 2006, researchers at Trent University in Canada attempted to discover why they were seeing fewer and fewer incoming freshmen return for their sophomore year. Why were these students washing out in their first year? Historically, research trends have identified three variables that predict a student's college success. These variables were:

- 1) Previous high school performance (GPA)
- 2) Cognitive ability (IQ)
- 3) Social/demographic factors

When the Trent research team crunched the numbers, however, these three variables *combined* only predicted academic success about 15% of the time. The other 85%? "Unknown."

So the team took another approach. They decided to look into why students withdraw from Trent. This time, the answer provided a little more clarity. Of the reasons students gave for early withdrawal, "Personal Prob-

lems" ranked in at over 50%. <sup>1</sup>Of these personal problems, students identified "relationship problems" (making new relationships and modifying existing ones), "difficulty learning new study habits," and "difficulty learning to be independent" as their most troubling.

Considering this new information, the researchers at Trent looked at two different groups of freshmen students. The first, "successful" group of freshmen all had a GPA of 2.5 or better. The second, "unsuccessful" group of freshmen all had a GPA of less than 0.7. What's interesting to note is that these two groups did not differ significantly in age, course load, or *high school GPA*. The only major difference between the two groups was in their emotional intelligence. <sup>2</sup>High scores on traits like self-control, emotional regulation, social skills, and stress management were better predictors of college success than high school GPA or IQ.

A look back at the research tells us that this isn't an isolated phenomenon. A 1987 study following 450 boys from childhood through adulthood found that IQ had little predictive value on future professional success. Boys with IQs under 80 were as likely to find gainful employment as boys with IQs over 100. What seemed to make the most difference in predicting the boys' financial success was their ability to handle frustration, regulate emotion, and get along with others.<sup>3</sup>

For a final example, consider the story of Chris Langan. Widely considered to be the smartest man in America, Langan has an IQ that weighs in at a hefty 195. To put this into perspective, this means that he is roughly 300% smarter than the rest of us. He also scored a perfect 1600 on his SAT, before they increased the score to 2400. But when he got to college, he dropped out (twice) because he felt that he was smarter than his professors and that he could teach them more than they could teach him. The end result was that he spent 20 years as a bouncer at a bar before coming into notoriety in a profile in *Esquire* magazine.<sup>4</sup>

In the 1983 book *Frames of Mind*, Howard Gardner proposes a model of intelligence to better account for all of the additional factors that predict one's success. His theory is that there are eight different intelligences, each of which has its own crucial role in our development. Gardner's intelligences are briefly detailed below:

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| <b>Spatial</b> —Related to spatial judgment, visualization with the "mind's eye"             |
| <b>Linguistic</b> —Skill with spoken and/or written word                                     |
| <b>Logical/Mathematical</b> —Logic, Reasoning, numbers, scientific thinking                  |
| <b>Bodily/Kinesthetic</b> —Timing, reflexes, coordination, and dexterity.                    |
| <b>Musical</b> —Sensitivity to sound, rhythm, tone, and music                                |
| <b>Interpersonal</b> —Sensitive to others' moods & emotions, ability to work in a group      |
| <b>Intrapersonal</b> — Understanding of the self strengths/weaknesses, emotions, motivations |
| <b>Naturalistic</b> — Applied knowledge of nature, environment                               |

It's easy to see how these intelligences are prioritized in the typical school's curriculum. Linguistic, Logical/Mathematical, and Naturalistic all fit in with the "core" classes and go along with "The Three R's" (reading, writing, and arithmetic). Secondary importance is placed on the more creative intelligences, such as Musical (band, orchestra) and Spatial (theater arts). These are not always required courses, but are instead available as electives if the student chooses them. Finally, there's the Bodily/Kinesthetic intelligence, which gets the lowest priority in the school system. Physical education (or "gym"

class) is often replaced in the daily curriculum with study hall, or more academic courses.<sup>5</sup> Even recess is getting the axe in many elementary schools. Recess. Really?

But what are teachers doing to develop your child's Interpersonal and Intrapersonal intelligence? These are the intelligences that demonstrate strength in perseverance, courage, and empathy. Teachers often make note of these qualities in written summaries, but these attributes, which appear to be crucial for future success, are overlooked when it comes to determining how "successful" the child has been during that grading period.

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We need to be careful in how we define success. Po Bronson published an article in *New York* magazine<sup>6</sup> that details how the best intentions can often paint kids into an "all-or-nothing" corner where anything less than absolute success is absolute failure. In the article, she describes Dr. Carol Dweck's experiments<sup>7-8</sup> on how children perceive praise. In the experiments, 5<sup>th</sup> graders were divided into two groups and asked to complete an intelligence test that was easy enough to guarantee success. Upon completion, one group was praised for their intelligence, and the other group was praised for their effort.

In a later experiment, these same children were given a much harder test. The harder test was designed for older students and was very difficult to complete. As expected, all of the students failed. What's interesting is how the children responded. The children in the "smart" group seemed utterly deflated by their failure, and the blow to their self-esteem seemed to have a carryover effect. When given a second chance at the initial easy test, the children in the "smart" group actually showed a decline in their scores. Meanwhile, the children in the "effort" group seemed energized by the challenge of the harder test, and many remarked that they enjoyed the harder test much more. When the children in the "effort" group had a second chance at the initial easy test, their scores improved across the board.

So what happened? The children who were praised for being smart began to attribute their success to their intelligence. Doesn't sound so bad, right? "I succeed because I'm smart." But what happens

when I don't succeed? Does that mean that I'm *not* smart? And if I'm not smart, will I still get praise?

Children who are praised for persistence, however, attribute their success to not giving up. One major difference between intelligence and persistence is that, in a given moment, only one is under our control. If you're struggling at something, can you suddenly be smarter? Probably not. But you can always be more persistent. When children are praised for their *effort* instead of for the *outcome*, they are more likely to stay at a task even when it becomes frustrating. They can see the rewards in failing, because each failure gets them a little bit closer to success.

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So what we need to do is clear, right? We need to teach kids persistence, tenacity, empathy, and problem-solving. We need to grade them so they can track their progress. But...where is this stuff taught? Certainly not in school. As a matter of fact, if you want to find the kids who are working on their social intelligence, look no further than the detention halls or the "silent lunch" tables. These are the kids who are trying to learn the nuances of social interaction, and they're getting disciplined for their effort.

Certain KIPP schools (**K**nowledge **I**s **P**ower Program) in New York City have addressed this problem, and developed a CPA (Character Point Average) that goes out in addition to regular GPA reports.<sup>9</sup> Along with the traditional academic evaluations, students are graded on 24 indicators of character, such as respect, self-control, and "grit" (dedication to achieve). In addition, the schools' teachers make a point to work messages of character into their regular course curriculum. Ideally, our school systems will take a long hard look at what's going well in New York, and start bringing it here.

But by the time you read this, school will be winding up for the year, and summer will be just around the corner. Below, I've put together a Top 5 list of things your kids can do this summer to build up their social smarts:

**Go Camping.** Unless summer school is required due to failing grades, give the

academics a rest. Summer presents a world of opportunities for your kids to try new things. Whether it's a sleepaway camp in the mountains or a day camp through the local Rec Center. Go on a hike. Climb a really big rock. Learn how to make soufflé.

**Make a Mistake.** I've got a fortune from a fortune cookie in my office at home. It reads "He who never makes mistakes never did anything worthwhile." If you're trying something new, you're going to make mistakes. As well you should. Pick yourself up, dust yourself off, and think about how you want to tackle it differently. Then get back in there.

**Get a Job.** My first job was cutting weeds around a basket mill in Jacksonville, Texas. I was 14, and they stuck me in the middle of a field with work gloves, a wide-brimmed hat, and the "Idiot Stick," a long handled, double-edged grass whip. I learned more in that summer job than I did in any classroom. Namely, that I didn't want to do that kind of work ever again. I kept my work gloves from that summer tacked on the wall above my desk. Anytime I wanted to neglect my homework and fire up the Nintendo, the work gloves reminded me of the idiot stick, and *voila!* Persistence was born.

**Unplug.** Don't fall for the ol' "But mom, it *is* social because I'm playing online!" Set solid limits on when screens are allowed to encourage your kids to get out of the house. And this goes for you parents as well. Your kids aren't getting their social smarts at school, which means that they learn from you. Don't miss this opportunity because you're playing "Words with Friends," or because your BlackBerry keeps you shackled to your office. How often does your family sit down for a meal without interruptions? Make that your goal this week.

**Get a tutor.** You can easily find a Spanish tutor or a math tutor. But what about a social skills tutor? That's where we come in. The Tarnow Center offers several groups that are designed to help people strengthen their social and emotional intelligence. Groups run year-round, are available for children, adolescents, and young adults, and each aims to develop age appropriate skills. For example, our groups for children focus on sharing,

turn-taking, and listening. Adolescent groups add an emphasis on relationships, empathy, and emotional regulation. And our young adult groups lean more towards the skills necessary to transition into (and stay successful in) adulthood.

In conclusion, it all comes down to balance. The smartest guy in the room can only go so far if he can't read himself or others, and similarly, the greatest social

skills in the world aren't going to help a D student get into college. Take a look at the eight intelligences listed in this article, and think about where your children need to strengthen their game. But remember: school only addresses a few of the necessary intelligences. After the bell rings, it's up to us to take care of the rest.

To find out more about our social skills

assessment and group programs, please contact Dr. Walker Peacock at the Tarnow Center:

drpeacock@tarnowcenter.com or 713-621-9515, ext 253.

<sup>1</sup>The other factors were Change of Programs, Economic/Health problems, and "Other"

<sup>2</sup>Parker, J.D.A., et al. (2005). Academic Achievement and Emotional Intelligence: Predicting the Successful Transition from High School to University. *Journal of the first-year experience and students in transition*, 17 (1).

<sup>3</sup>Felsman, J.K. & Vaillant, G.E. (1987). "Resilient children as adults: A 40-year study," in E.J. Anderson and B.J. Cohler (Eds.), *The Invulnerable Child*. New York: Guilford Press

<sup>4</sup>Sager, Mike (November 1999). "The Smartest Man in America". *Esquire*.

<sup>5</sup>According to the National Association for Sport and Physical Education, nearly half of American students are not enrolled in physical education class. By high school, only a third of students participate in daily gym class

<sup>6</sup>Bronson, P. (2007). How not to talk to your kids: The inverse power of praise. New York. Retrieved from <http://nymag.com/news/features/27840/>

<sup>7</sup>Dweck, C. S. (1999a). Caution-praise can be dangerous. *American Educator*, 23(1), 4-9.

<sup>8</sup>Dweck, C. S. (1999b). Self-theories: Their role in motivation, personality and development. Philadelphia: The Psychology Press

## Coaching As Collaborative Enterprise

*Sophia K. Havasy, Ph.D.*



For children with self-management disorders, parents are continuously debating how much to be involved and how much to back-off. It does not matter whether the issue relates to hygiene, sports, or academics; the struggles are ongoing. By adolescence, however, everyone is tired, frustrated, and often, angry. Yet, skills still need to be developed and time is short! Independence, at least nominally, is around the corner.

By the time the child is an adolescent, the parents often look to hire someone to help their child develop the skills needed. This person can be a tutor, an educational therapist, psychologist, reading specialist, athletic trainer, etc. For the working relationship to be effective the adolescent has to buy in. There has to be self-awareness by the teen that help is needed, and receptivity to input, guidance, and instruction from the expert. The coach has to understand the young person's strengths and weaknesses, be able to engage that young person in the work, and monitor the process over time. Effective coaching is collaborative.

People in business hire executive coaches in order to meet their goals. The goals may include promotions, making more money, getting along better with co-workers, or being the best at a line of work. When there is a collaborative relationship,

the goals are defined and measurable, objectives are clear, and the individual takes ownership of the process, then a coaching relationship can be quite successful.



When objectives are not met, the coach and client have to look at where the process broke down. It could be that the goal was unrealistic or not meaningful. Maybe the

plan was faulty or overlooked important steps. Maybe the motivation just wasn't there. Many an athletic career has been cut short because the player did not like the coach, respect the coach, or feel that he needed to develop along the lines the coach was laying out. Many promising musicians, artists, or math minds never produce the level of expertise that others thought them capable.

So, how do you get a young adult or older teenager to make the best use of a coach? As with so much in my work, it is a process. Teenagers are trying to grow into who they want to be as they come to terms with who they are. This growth continues on through the twenties. When ADHD, learning difficulties, ties, Asperger's, mood disorders, or anxiety are major components of the young person's profile then the work can be that much more difficult and sensitive. These are the kids that need us the most.

Just because they need us, however, doesn't mean they will let you help or guide them. Much time must be spent getting to know the young person and teasing out their goals. With increased self-awareness and knowledge of strengths and weaknesses, the young person is more likely to become receptive. She begins to make connections. For example, she can ask the question: "Is my effort sufficient for the goals I want to

achieve?" And, be more likely to give an honest appraisal.

Parents come in, not to necessarily set the goal for the young person, but to define the parameters of their involvement. Expectations from parents often include: rules for living in their home, level of achievement in order for tuition payments to continue, level of functioning in order to be allowed

to go away to school, etc. Developing young people who are able to self-manage is a collaborative process involving the family, the school, the Scout leader, the trainer, and any experts who are brought in. Helping the young person to recognize strengths and weaknesses, define actual goals that are specific and meaningful, and understand how to engage in collaborative efforts towards goals is a vital process for

young people with self-management disorders. Their futures depend on it.

Summer at the Tarnow Center is a good time to engage your young person in their own growth. Whether it is called educational therapy, group or coaching, the goal is to develop a collaborative relationship that helps the young person achieve goals that matter.

## Neurotherapy Offers New Hope to Children with Autism

Ron Swatzyna, Ph.D., LCSW



Mainstream has jumped on the bandwagon in raising awareness about Autism. When the popular television show "American Idol" recently profiled a contestant with Asperger's Disorder, millions caught a glimpse of what it is like to live with Asperger's. While James Durbin's inspiring story of overcoming Asperger's through singing is exceptional, more hope is on the horizon for children with Asperger's Disorder. Neurotherapy, in conjunction with a multidisciplinary treatment approach that includes family involvement, is an option proven to be effective.<sup>1</sup>

Asperger's Disorder, or Asperger's Syndrome, falls under the larger category of Autism Spectrum Disorders (ASD). In recent years, it is estimated 6 to 7 children per 1000 children live with ASD. While a diagnosis of ASD can be made as early as 18 months, a diagnosis of Asperger's is more difficult. The diagnostic symptom criteria for Asperger's disorder include:

- Impairments in social interaction
- Stereotyped or repetitive interests or behaviors
- No significant delay in language development

In addition, Asperger's is considered to be a milder disorder. Children generally have normal language development, although they have difficulty reading social cues.

Treating Asperger's with talk therapy or medications has been met with limited success. To understand why "traditional" treatments are not effective, it is important to understand that ASDs are viewed as neurobiological brain disorders with no known specific cause.

Brain imaging techniques suggest ASD brains have dysfunctional communication patterns, which points toward something going awry in the process of brain development. Even so, every person's brain is different and this includes ASD brains. By doing a quantitative electroencephalogram (QEEG) on each person, their dysfunctional electrical and connectivity problems can be identified in a process called Topographical Brain Mapping. A comprehensive discussion of brain mapping is beyond the scope of this paper however the following link is very helpful: <http://www.qeeg.com/qeegfact.html>.

Brain mapping represents how the patient's brain compares to a normal population using a statistical method calling Z-scoring. Improvement in core ASD symptoms is achieved as these dysfunctional patterns are normalized using computerized audio and visual feedback given to the patient. This form of therapy has been around for 40 years and is commonly referred to as EEG biofeedback, neurofeedback therapy, neurotherapy and more recently computer brain interface training.

Many in our industry just use standardized protocols to do neurofeedback therapy and have found success in 70 to 80 percent of ASD cases.<sup>2</sup> We have found that when we use the QEEG to personalize our protocols to each individual, our success is higher than the average. Although not a "cure", substantial gains are found in about 35 to 40 sessions. In many cases, medications can be reduced and at times eliminated as the brain becomes more functional. The areas of gain most often seen using neurotherapy with ASD children are in the core measures of attention, executive and visual perceptual function and language skills. Behaviorally, we see gains in emotional self management, anxiety management, reduction/elimination of tantrums. What's more, no adverse side effects are reported when using neurotherapy.

Even though Autism and Asperger's are lifelong disorders with no known cure, early intervention while the brain is rapidly growing seems to be a key factor in a child's progress, with improvements in communication, social skills and behavior. What we hope you take away from this article is that there is hope for the ASD child, thanks to the incredible ability of the brain to fix itself when given instruction. Neurotherapy is gaining acceptance as an effective intervention that optimizes treatment and improves outcomes. Parents should consider neurotherapy for their ASD children.

1. Neubrander, J., Linden, M., Gunkelman, J. & Kerson, C. (2011). QEEG-Guided Neurofeedback: New Brain-Based Individualized Evaluation and Treatment of Autism. *Autism Science Digest: The Journal of Autism*; Issue 3: 92-100

Based on controlled study (Coben and Padolsky, 2007) of qEEG-guided neurotherapy there was an 89% success rate for neurofeedback and an average 40% reduction in core ASD symptomatology. There were also significant improvements, as compared with the control group, on neuropsychological measures of attention, executive functioning, visual perceptual processes, and language functions. Reduced cerebral hyperconnectivity was associated with positive clinical outcomes in this population. In all cases of reported improvement in ASD symptomatology, positive outcomes were confirmed by neuropsychological and neurophysiological assessment.

2. Coben R, Padolsky I. Assessment-guided neurofeedback for autistic spectrum disorder. *J Neurother*. 2007;11(1):5-23.

# Improving the Brain to Enhance Learning

Lynn Ayres, M.Ed. and Linda Narun, M.A., CCC-SLP



In the past fifteen years, The Tarnow Center has provided unique, innovative, and intensive treatment for a variety of learning differences which have resulted in significant benefits for students both in and out of the classroom.

Students with Attention Deficit- Hyperactive Disorder (ADHD) or a Learning Disability have specific cognitive challenges that can impact learning and success in school. Their brains often lack connectivity, processing speed, timing, organization, and working memory skills. The more efficient the brain the more the student will benefit from conventional therapies. These students need to make functional changes to their brains so that they are ready to learn and reach their potential.

The concept of “brain plasticity” (the ability of the brain to develop new pathways) continues to be the basis of the interventions provided at The Tarnow Center. We now understand that increasing the brain’s ability to learn, provides a basis for the acquisition of academic and social skills. We are able to provide a variety of techniques to assist students so they can be optimally successful in school and life. Computer based programs like Fast ForWord, Interactive Metronome, Cogmed, and ALEKS Math assist greatly with the development of neural pathways in the brain and brain organization. These programs are based on research which sup-

ports the theory that the brain can continue to develop and change. As a result of these therapies, students build new pathways in the brain, so delays in language learning and attention can be minimized. The interventions are tailored to meet each students needs.

**At The Tarnow Center, we offer students the following neuro-cognitive programs:**

### Fast ForWord

The Scientific Learning family of proven language and reading intervention software products strengthens auditory processing, oral and written language skills in students of all ages. Fast ForWord helps struggling students improve vocabulary, reading comprehension, fluency, and memory.

### Cogmed

Cogmed Working Memory Training is a computer-based solution for attention problems and poor working memory. A strong working memory is essential for learning. Poor working memory contributes to significant impairment in learning. Working memory capacity is a very good predictor of academic success. Working memory capacity is strongly correlated with students’ performance, particularly in reading and math.

### Interactive Metronome

The Interactive Metronome (IM) uses a patented auditory guidance system to systematically exercise and thereby improve a person’s timing and capacity to plan action. It

therefore promotes self-management and improves executive functioning. Benefits of IM improves attention and focus, motor control and coordination, balance and gait, language and processing, and emotional control.

### ALEKS Math

ALEKS is founded on groundbreaking research in mathematical cognitive science known as Knowledge Space Theory. Through adaptive questioning, ALEKS accurately assesses a student’s knowledge state, then delivers targeted instructions on the exact topics the student is most ready to learn. The program was developed from research at New York University and the University of California Irvine. The development team comprised of cognitive scientists, mathematicians, and software engineers incorporated an artificial intelligence engine to assess each student individually and continuously.

Together with these programs the Tarnow Center also provides educational self-management and language learning therapy. Individual therapy is sometimes taken simultaneously with the programs. Other times it is determined that sequencing treatment is more appropriate. Decisions about therapy are made on an individual basis. For more information please contact Linda Narun or Lynn Ayres at 713-621-9515.

## RESEARCH SUPPORTING THESE PROGRAMS

Efficacy of Temporal-based Training for Receptive Language and Auditory Discrimination Deficits in Language-learning impaired Children: A follow-up study. *Journal of Cognitive Neuroscience Supplement*, April, p.55. - Bedi, G.C.; Tallal, P.; Miller, S.L.; Byma, G.; Merzenich, M.M.; & Jenkins, W.M. (1995)

Fast ForWord Products Open a Child’s Window to Language. *Autism Asperger’s Digest*. 2003 – Burns, M. (2003, March – April)

Case studies of children using Fast ForWord. *American Journal of Speech-Language Pathology*, 10(3), 203-215. – Friel-Patti, S.; DesBarres, K.; & Thibodeau, L. (2001)

Neural Correlates of Rapid Auditory Processing are Disputed in Children with Developmental Dyslexia and Ameliorated with Training: An fMRI study. *Restorative Neurology and Neuroscience*, 25, 295-310. – Gaab, N.; Gabrieli, J.D.E.; Duetsch, G.K.; Tallal, P.; & Temple, E. (2007)

A Controlled Trial of Working Memory Training for Children and Adolescents with ADHD. *Journal of Clinical Child & Adolescent Psychology*, Nov 2010. – Beck, Steven J.; Hanson, Christine A.; Puffenberger, Synthia S.; Benninger, Kristen L.; & Benninger, William B.

Increased Prefrontal and Parietal Activity after Training of Working Memory. *Nature Neuroscience*, Jan 2004. – Olesen, Pernille J.; Westerberg, Helena; & Klingberg, Torkel.

Improvements in Interval Time Tracking and Effects on Reading Achievement. *Wiley InterScience*, 2007. – Taub, Gordon E.; McGrew, Kevin; & Keith, Timothy Z.

Effects of motor sequence training on attentional performance in ADHD children. *International Journal on Disability and Human Development*, 2010. – Leisman, Gerry; & Melillo, Robert.

Training the brain: Practical applications of neural plasticity from the intersection of cognitive neuroscience, developmental psychology, and prevention science. *American Psychologist*, Vol 67(2), Feb-Mar 2012, 87-100. – Bryck, Richard L.; & Fisher, Philip A.

## Welcome Desireé Gallagher, Psy.D.

Desireé Gallagher, Psy.D. is very proud to be back in the state of Texas and fully licensed as a psychologist. Since a young age, she had the goal of being a psychologist because she wanted to learn about people - their brains, genetic makeup, relationships, development, personalities, etc. She left her home in Wichita Falls, Texas to attend the University of Oklahoma, where she received her Bachelors in Psychology. She then made a drastic move to Fort Lauderdale, Florida where she attended Nova Southeastern University to obtain her Masters of Science and Doctorate in Psychology. Dr Gallagher's clinical training focused on children and adolescents, including issues of abuse and domestic violence, behavioral problems, mood disorders, various anxiety disorders of childhood, and learning differences. She has worked with individuals, families, and groups using various empirically supported interventions, such as Cognitive Behavioral Therapy, Interpersonal Therapy, Dialectical Behavior Therapy, Play Therapy, and Family Systems.



After four years, Dr Gallagher finally returned to Texas to complete her internship at the Children's Assessment Center in Houston. At that time, she fell in love with the city of Houston; however, she decided to accept a fellowship position in Moore, Oklahoma. She could not stay away long and accepted a position to join the Tarnow Center in October 2011. Since

that time, Dr. Gallagher has worked closely with Dr. Tarnow and the other team members. Dr. Gallagher has many similar interests as some of her colleagues, including parent training intervention, treatment of anxiety and mood disorders, coaching for learning differences- all of which incorporate the building self-management skills. She also has specific interests and focused training in areas of child sexual abuse, parental alienation, forensic evaluations, and issues of prevention and education on abuse and bullying. She has also implemented individualized, detailed objectives, which include specific steps to meet identified goals, to the psychological evaluations at the center. We believe Dr Gallagher has a unique training background that compliments and adds to the Tarnow Center. We look forward to Dr Gallagher forming her career as a clinical psychologist with the Tarnow Center over many years to come.

## Welcome Amber Pastusek, M.D.

Amber Pastusek, M.D. is a native Texan born and raised in Lubbock, Texas. She attended Texas Tech University and received a Bachelor of Science degree in Biology, graduating Magna Cum Laude and in the University Honors Program. She went on to complete her medical school education at Texas Tech University Health Sciences Center. She then attended the University of Texas Medical Branch in Galveston, Texas for her psychiatry residency and child and adolescent psychiatry fellowship. During her residency training, she was very involved in the recruitment of residents to the program as well as educating medical students and fellow residents. In addition, she served as the assistant chief resident and received the Robert B. White Resident Excellency Award.



Certified. Her interests include evaluating Mood disorders, Attention Deficit Hyperactivity Disorder (ADHD), Learning Disorders, and Autism Spectrum Disorders. She takes a special interest in behavioral interventions and family therapy as an integral

part of treatment. She has received training in both the psychopharmacologic treatment of psychiatric illness as well as different psychotherapeutic modalities, giving her an informed and balanced view toward the treatment of emotional illness.

Currently in addition to her position at the Tarnow Center, Dr. Pastusek is a member of the American Academy of Child and Adolescent Psychiatry (AACAP) and serves on the Systems of Care Committee to work on improving practice parameters and integrating the various systems of care in order to provide the best treatment possible for patients. Dr Pastusek has a wealth of experience, having worked inpatient, MHMRA, psychiatric emergencies rooms, research, and developmental disability clinics.

Dr. Pastusek is trained as a child, adolescent, and adult psychiatrist and is Board

# G R O U P S

Group therapy seems to be one of our more popular avenues for treatment. The benefit of group therapy is that it allows people the opportunity to learn and practice appropriate skills with their peers. Whether the goal is to improve social skills, practice emotional regulation, learn coping skills, or support each other through life's transitions, group provides a supportive and dynamic environment to produce change.

We offer groups for all ages, from childhood through adulthood. Most of our groups are ongoing, and allow new members to join at any time as long as the group has availability. Below, you can find a description of the types of groups we offer, along with the clinicians who run each group. If you are interested in more information about any of our groups, please contact our intake coordinator at 713-621-9515, ext. 227.

**Social Skills Groups:** Social skills aren't taught in school, although they should be. Learning how to communicate and interact with others is essential for effective self-management. Our social skills groups are available for elementary school, middle school, and high school. Each group

aims to develop age-appropriate skills. For example, our younger groups may work on sharing and turn-taking, while our older groups focus on relationships and empathy. Each of our social skills groups includes Parent Only groups every 6 weeks, for parents and clinicians to share thoughts and feedback.

**Launching Groups:** Each stage of development requires us to conquer certain challenges before we can move on to our next developmental phase. For adolescents, there are distinct launching points between 8<sup>th</sup> grade and 9<sup>th</sup> grade, and again between high school and young adulthood. Our launching groups are designed to assist our clients with these transitions. First we assess where the teen lands in his/her own readiness for the next stage, and then we help them develop the necessary skills to take on the challenge.

**Young Adult:** So you've graduated high school. Now what? Whether the next step is college or the workforce, many young adults find that they are unprepared for the challenge ahead. Once the structure of high school is in the past, it can be difficult to manage time and juggle responsibilities

in order to be productive and effective. Our Young Adult groups offer support and guidance for young men and women who are looking to find their way towards independence.

**Dialectical Behavioral Therapy (DBT) Skills Training:** DBT Skills Training teaches adolescent girls how to better manage emotions and life, via skills in mindfulness, self-soothing, self-acceptance, distress tolerance, interpersonal effectiveness, and parent-teen conflict resolution. Our DBT group is unique in that both teens and parents participate. Each week, teens work together to learn specific skills, while parents are in a separate group learning and practicing skills to support their child's growth.

**Parenting Support:** Parenting and family work is central to what we do at the Tarnow Center. Parenting Groups help parents learn the techniques that we use in therapy to promote positive change. These groups combine education and support, and parents will walk away with an individualized plan for their home. Offered 4 times yearly.

**Early Elementary**

Thursdays, Sugar Land 4-5 p.m.  
THERAPIST: Lourdes Valdés, Ph.D. and Desireé Gallagher, Psy.D.

**Early Elementary Boys**

Mondays, Galleria  
THERAPIST: Lourdes Valdes, Ph.D. and Lynn Ayres, M.Ed.

**Late Elementary**

Mondays, Galleria 4-5 p.m.  
THERAPIST: W. Walker Peacock, Psy.D. and Lynn Ayres, M.Ed.

**Late Elementary**

Thursdays, Galleria 4-5 p.m.  
THERAPIST: W. Walker Peacock, Psy.D. and Lynn Ayres, M.Ed.

**Middle School Girls**

Tuesdays, Sugar Land 5-6 p.m.  
THERAPIST: Desireé Gallagher, Psy.D.

Thursdays, Galleria 5-6 p.m.

THERAPIST: Diane N. Roche, Ph.D.

**5th Grade Boys**

Wednesdays, Galleria 5-6 p.m.  
THERAPISTS: Lourdes Valdés, Ph.D., W. Walker Peacock, Psy.D. and Lynn Ayres, M.Ed.

**Middle School Boys**

Wednesdays, Galleria 4-5 p.m.  
THERAPIST: W. Walker Peacock, Psy.D.

Wednesdays, Galleria 6-7 p.m.

THERAPIST: Lourdes Valdes, Ph.D. and W. Walker Peacock, Psy.D.

Thursdays, Galleria 5-6 p.m.

THERAPIST: W. Walker Peacock, Psy.D.

**High School Boys**

Mondays, Galleria 6-7 p.m.  
THERAPIST: W. Walker Peacock, Psy.D.

**High School Girls DBT**

Tuesdays, Galleria 5-6 p.m.  
THERAPIST: Diane N. Roche, Ph.D. and Lesley Solomon, LPC

**Young Adult Group**

Tuesdays, Galleria 6-7 p.m.  
THERAPIST: Sophia K. Havasy, Ph.D.

Thursdays, Galleria 3-4 p.m.

THERAPIST: Sophia K. Havasy, Ph.D. and W. Walker Peacock, Psy.D.

### **Launching Groups**

Each stage of development requires us to conquer certain challenges before we can move on to our next developmental phase. For adolescents, there are distinct launching points between 8th grade and 9th grade, and again between high school and young adulthood. Our launching groups are designed to assist our clients make these transitions. First we assess where the teen lands in their own readiness for the next stage, and then we help them develop the necessary skills to take on the challenge.

## ***Transitioning to High School, a Summer Group at the Tarnow Center for Self-Management***

The Tarnow Center offers a four-week group during the summer to help students prepare for these new academic and social challenges. During group meetings, students learn time management strategies, as well as, organization and study skills. Group discussions also focus on managing the new temptations adolescents face in high school and getting involved in social groups and activities (e.g., band, drama club, sports).

**Transitioning to High School is facilitated by Paul Clear, Ph.D. and Lynn Ayres, M.Ed.**

### **College Readiness Group**

*By Sophia K. Havasy, Ph.D.*

*A group for High School students who plan to go to college but may not have the skills, yet, to be successful there.*

**For:** High School students (11th—12th grade)

**Topics:** Self-awareness, Strengths, Weaknesses, data, Goals/motivations, and Expectations

**Time:** One hour each week, 5 weeks

**Cost:** \$80 (per session)

*\*Family sessions scheduled seperately*

(Participants who are new to the practice require a one-hour evaluation by Dr. Havasy. The cost of this evaluation is \$205.)

## **Dr. Gallagher's Summer Group for Teens**

Pre-teens and teens have many pressures related to their future, academics, and interpersonal relationships. Between balancing the many pressures and building an identity, there can be many conflicts that arise, including problems with parents and friends, a decrease in academic performance, and a poor self-concept. In addition to all of these conflicts and pressures that may present, bullying has become the latest epidemic with pre-teens and teens. Studies show that most teens are exposed to bullying whether it is as the bystander, bully, or victim. Dr. Gallagher is offering groups to address these issues with these age groups (10-14 year olds). The group objectives include discussing the many issues facing teens today, building self-concept, and applying assertiveness skills. These skills are an important part of developing a healthy self-identity and self-concept.

**Reserve Your  
Space for  
Next Fall**

### **Girls' Group: DBT Skills Training and Self-Development**

Group therapy is the best place for your high school aged adolescent to learn skills for managing her emotions and her life. She is socially oriented at this time and is primed to learn from others. Emotion regulation is a core skill that forms the foundation for future successful functioning in all areas.

**Skills taught: Self-Soothing, Mindfulness, Self-Acceptance, Distress Tolerance, and Interpersonal Effectiveness.**

**Facilitated by: Diane N. Roche, Ph.D. and Lesley Solomon, LPC**

**Tuesdays, Galleria 5-6 p.m.**

# Tarnow CENTER

*for Self-Management*<sup>SM</sup>

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1111 Highway 6, #210  
Sugar Land, TX 77478

Phone: 713-621-9515

Fax: 713-621-7015

Email: [jtarnow@tarnowcenter.com](mailto:jtarnow@tarnowcenter.com)

## FACEBOOK TWITTER LINKEDIN

*I am venturing out further into the world wide web. I plan to review Mental Health and Neuro-psychiatric news and share it on Facebook and Twitter in very short snippets with references or links to the full articles. This is the format I love and works great for people with ADHD. If you like it too much, beware, you may have the dreaded disorder.*

*I welcome your feedback. My email is [jtarnow@tarnowcenter.com](mailto:jtarnow@tarnowcenter.com). I hope you like this service and hope that it helps people. If you do like it "LIKE" us on Facebook, tell others about our Facebook page and join us on Twitter. The entire clinical staff will be invited to add their favorite summaries of news. So stay tuned.*

