BRAIN INJURY IS A LEADING CAUSE OF DISABILITY IN THE UNITED STATES

Amongst the awareness month recognitions for March is Traumatic Brain Injury Awareness Month. The Brain Injury Association of America has led our nation with a campaign spanning the past two years and into 2023. Their theme, “More Than My Brain Injury,” attempts to move our society away from people with disabilities having their lives defined for them. The campaign gives individuals a chance to overcome those definitions, allowing them to tell their own stories and change the narrative of their lives. It is important to remember that a person with a brain injury is a person first.

Traumatic Brain Injuries, or TBI, affect the lives of people of all ages. Anyone can experience a TBI, but data collected by the Center for Disease Control (CDC) suggests that some groups are at a greater risk of experiencing long-term health problems after the injury. Examples of these groups include: service members and veterans, people who experience homelessness, people who are in correctional facilities, and survivors of intimate partner violence.

A TBI is caused by a bump, blow, or jolt to the head that results in the disruption of normal brain function. The CDC reports that at least 2.8 million Americans sustain a TBI each year. The leading causes of TBI are vehicle crashes, sports-related concussions, and falls. Among our service members and Veterans, life after a TBI may lead to the experience of co-occurring disorders, such as Post Traumatic Stress Disorder and depression.

The effects of a TBI are different for each person and may change during recovery. Most people may have one or more health problems after the injury, which may include: problems with thinking and learning, and changes in motor skills, hearing, vision, emotion/mood, or behavior. Additionally, a TBI during childhood may disrupt a child’s development and limit their ability to participate in school or other activities. Rehabilitation for a TBI is possible, with the goal being to improve the quality of life for the person living with a TBI, lower the chance for other TBI-related disabilities, and help with improving their ability to do daily tasks independently, engage with family and friends, and participate in community activities.

People living with a TBI may also find themselves returning to work after an injury. There are several accommodations a person living with a TBI may request in order for them to perform the essential functions of a job. These include the use of Assistive Technology devices to assist with concentration or memory loss, strategies for coping with stress and controlling emotions.

People living with TBI are afforded legal protections when seeking and maintaining employment and accessing public and private programs and services. The Protection & Advocacy for Traumatic Brain Injury (PATBI) program administered by NMPASI may be able to assist people living with TBI and having been discriminated against as a result of their disability.

For more information on #MoreThanMyBrainInjury, please visit www.biausa.org.

For more information on research and facts relating to TBI, please visit www.cdc.gov.

For more information on job accommodations for people with TBI, please visit www.askjan.org

For information on legal protections for people with TBI, please contact the PATBI program through NMPASI at (670) 235-7273/4 on Saipan, (670) 287-9937 on Tinian, and (670) 287-9943 on Rota.

By: GREG BORJA
Executive Director

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Communication is KEY!

For the month of March 2023, we would like to honor Developmental Disabilities Awareness Month! The observance of this global event aims to raise awareness about the inclusion of people with developmental disabilities in all facets of community life.

March has always been recognized as Developmental Disabilities Awareness Month (DDAM). This global event has been occurring and celebrated since 1978. President Ronald Reagan issued a public proclamation encouraging Americans to provide individuals with disabilities encouragement and opportunities to succeed in all aspects of life.

As the population of individuals with special needs continues to grow here in the CNMI, more specifically in the Public School System, Northern Marianas Protection and Advocacy Systems Inc (NMPASI) would like to share a few important tips on how we can work efficiently with children with disabilities:

1. Interaction
   - The same rules apply when conversing with any other individual. Always introduce yourself first and explain why you are there. Depending on the child’s special needs, it may be necessary to require some form of physical presence such as shaking the child’s hand or placing your hand on their shoulder while introducing yourself to make a proper introduction.

2. Observe
   - Some children with special needs may perceive sensory input differently and be unable to express discomfort. Always be on the lookout for uncertainty or any mood changes whenever a child with a disability is interacting with you.

3. Be Flexible
   - Another way in which flexibility is beneficial is that it allows us to respond to different learner abilities, needs, and interests. Remember, one certain strategy may work for certain individuals but not everyone. Flexibility supports different learning styles.

4. Be Consistent, Be Positive
   - When you are consistent with the way you are working with a child who has a disability, the type of behaviors that you want from them is more than likely to be repeated, giving you the outcome that you desire. For example, routines and schedules work best! Lastly, always be positive and learn to embrace the process! A positive attitude is the single most important quality for anyone who works with children with special needs.

Through NMPASI’s Protection and Advocacy, we are able to help provide assistance that will address any hardships or concerns presented by parents who may have a child with a disability and are currently receiving Special Education services. Part of our advocacy is to ensure that your child is being provided with appropriate goals that address their specific educational needs and are provided with additional forms of support services that would ensure growth in their educational journey.

For more information on Developmental Disabilities Awareness Month, please visit our website (www.nmpasi.org) or contact our office at (670) 235 – 7273/4, or text message (670) 287-0652.
If your child has an IEP (Individualized Education Plan), knowing your rights and being a part of the IEP meetings as a parent to a student with a disability is important. This plan creates an opportunity for parents, teachers, special education teachers, school administrators, and the student to improve the student’s educational journey and obtain free appropriate public education. Knowing your rights as a parent will only help accomplish your child’s educational goals because you know your child best. Giving the most important information during your child’s IEP meeting will help your child reach his or her goals, as well as help the school understand what accommodations/modifications are needed for him or her to succeed. Here are some important IEP tips you can take with you to help better prepare you before, during, and after an IEP meeting:

1. **Know your rights as a parent to a student with a disability.** Your state’s P&A (Protection & Advocacy organization) can help educate you on your rights.

2. **Keep well-organized records.** Everything that relates to your child’s special needs will help guide the IEP meeting and tailor it to his or her needs.

3. **Know your child’s strengths and highlight them.** It is important to identify the student’s academic strengths as well as social skills.

4. **Write down concerns you want to address during the IEP meeting.** It’s easy to get side-tracked, so this will help stay on task.

5. **Write down goals you would like to see your child achieve academically and socially.** Identify short-term and long-term goals.

6. **Bring a support person to help level the playing field.** You will be at the meeting with everyone from the school. It is important to have someone there for support so it does not get too overwhelming.

If you are a parent to a student with a disability and you need assistance, contact the Northern Marianas Protection & Advocacy Systems Inc. (NMPASI) at 670-235-7273 or visit us online at [www.nmpasi.org](http://www.nmpasi.org). To read more on IEP tips, visit [https://specialed-news.com/top-iep-tips-for-parents/](https://specialed-news.com/top-iep-tips-for-parents/). For more information, also see Special Education Program Rules and Regulations, NMIAC 60-50-001 et seq.
To Our Soon-to-be Elected Officials: A Call for More Disability Inclusion!

The other day, I came across a notice issued by the Office of the Governor-Elect Arnold I. Palacios and Lt. Governor-Elect David M. Apatang that states they are “seeking highly motivated and qualified individuals” for 29th Gubernatorial Appointee positions. Firstly, I would like to commend the incoming administration for opening this pool for qualified individuals to have an opportunity to apply. This is a good start and step in the direction of change that the people of the CNMI had voted for. Now with the change also come challenges and I am hereby issuing a challenge for our incoming elected officials: to include more disability inclusion.

Changing our mindsets is a challenge in itself. Perhaps we must think outside of the box when solving issues that arise or are currently existing. Practicing what is known as “design thinking” or sharing multiple perspectives to form something new can assist us with problem-solving. For our incoming elected officials: this is your chance and opportunity to utilize the versatile tool of design thinking and begin designing for disabilities first, not just the “norm.” Designing for disabilities first will not only allow us to find solutions but inclusive solutions that may often be better than when we design for the typical person.

Designing laws, policies, and procedures that are geared towards protecting individuals with disabilities, providing accessibility for programs/services, ensuring safety, inclusivity, and diversity is the step needed for a wider audience to avail, participate, and succeed in their daily lives and perhaps even for their goals. Now, it is a reality that no one really does excel on their first try, but nonetheless that should not stop anyone from being the first to try.

So once again, I am challenging our incoming elected officials to take that first step and try. If you are unsure on where to start and how to begin, I invite you to come to the Northern Marianas Protection & Advocacy Systems, Inc. (NMPASI) office where we work directly with individuals with disabilities in the CNMI who are facing discrimination, rights violations, and/or abuse and neglect. Or meet with your constituents directly: the disability community and our Disability Network Partners to hear the unmet needs and potential solutions.

Everyone is creative, everyone can be a designer who can solve problems, and everyone has the chance to make a change. What type of change will you make?

For more information about disability laws that ensure access to public and private programs and services, contact NMPASI at (670) 235-7273/4 (voice)/(670) 287-0652 (text message)/ or visit us online at www.nmpasi.org

Hafa Adai and Buenas CNMI!

March is around the corner. This Month is Developmental Disability Awareness Month (DDAM). March is the month where our disabled community demonstrate and show everyone that even though having a developmental disability, they are able to overcome any obstacles and live a normal life in society. By educating our children and the younger generation that their classmate or someone with a disability aren’t any different and we are all human beings whom deserve to be treated with dignity and respect. It’s been proven that educating our children at a early age, I trust they will be more open-minded, friendly, and make their classmate with disability feel welcome in school. We can all learn from one another and spread the word around the CNMI Communities and around the world to raise awareness about inclusion of people with developmental disabilities. Let’s break down the barriers and stop the stigma that they still face and struggle within their communities around the globe. All of us, with or without disabilities, let’s unite our community as ONE and form the CNMI Islands into a strong and diverse community. Here in the CNMI Community we have the Disability Network Partners (DNP), that are available to the community to provide support for people with disabilities.

By: Cleo Nening
Programs Coordinator

By: Pauline Manglona
Intake Specialist-Rota
MENTAL ILLNESS: MYTHS VS. FACTS

With the access we all have to social media, coming across posts that are not as factual as we may believe them to initially be are more common than we think. It has become a little too convenient for anyone, anywhere, to film or create a video that highlights some “facts” that are, in fact, not real facts. When it comes to the topic of mental illness, it can be quite sensitive as to what is defined as a fact or debunked as a myth; therefore, it is always best to do research on credible sites. Through my research, I have compiled a few interesting mental illness facts and myths that are meant to educate everyone about the reality of mental illness.

#1 Fact or Myth: Mental illness is very common.

This is a FACT. Being diagnosed with a mental illness is more common than one may think. According to the Centers for Disease Control (CDC), 1 in 5 individuals will experience a mental illness in a given year. Mental illnesses are among the most commonly diagnosed health conditions, with about five million individuals experiencing an episode of mental illness every year.

#2 Fact or Myth: Having a mental illness means you are “crazy.”

This is a MYTH. According to the National Alliance on Mental Illness (NAMI), having a mental illness does not mean you are “crazy”; it means that you have symptoms that are challenging and require additional support—just the same as someone who has an illness like diabetes or hypertension. Similar to other illnesses, being diagnosed with a mental illness can cause emotional and mental distress, confused or altered thinking, and can affect your behavior. This does not mean that a person is “crazy,” but rather they are a human who is susceptible to illness and sickness, just like everyone else.

#3 Fact or Myth: Individuals with mental illness are violent and dangerous.

This is a MYTH. According to mentalhealth.org, individuals with mental illness are no more likely to be violent and dangerous than anyone else. Additionally, only about 3%-5% of violent acts and crimes are attributed to individuals with severe mental illnesses. The reality is that individuals with severe mental illnesses are 10 times more likely to be victims of violence than perpetrators. There should be no more reason to fear an individual with mental illness than you would any other person.

#4 Fact or Myth: Any individual with a traumatic experience can develop and be diagnosed with Post-Traumatic Stress Disorder (PTSD).

This is a FACT. Anyone who has experienced a traumatic event is more likely to develop and be diagnosed with PTSD. This can include individuals who have been in the military or have been deployed to fight in wars, but it also can include survivors of sexual assault, domestic violence, and natural disasters and individuals who may have had a loved one pass away. Moreso, individuals who have witnessed a traumatic event happen to another can also experience and be diagnosed with PTSD.

#5 Fact or Myth: There is hope for recovery for individuals with mental illness.

This is a FACT. Although there are different types of mental illnesses, as well as different levels of severity, individuals with mental illness can be rehabilitated, meaning they are able to live, work, learn,and be full members of their community once more. There are a variety of services available to ensure proper recovery and transition for individuals with mental illness.

A local resource that can assist individuals with mental illness is the Community Guidance Center – Transitional Living Center (TLC). TLC offers a range of programs and rehabilitation services, including but not limited to Illness Management and Recovery (IMR); Medication Management; and Activities of Daily Living Skills (ADLS) to help individuals with mental illness achieve independence and become integrated back into their community.

The Northern Marianas Protection & Advocacy Systems, Inc. (NMPASI) has a program specifically for individuals with mental illness called the Protection & Advocacy for Individuals with Mental Illness (PAIMI) program. If qualified under the PAIMI program, our advocates are able to protect the rights of individuals with mental illness, as well as investigate any abuse or neglect claims. Our advocates also conduct facility monitoring visits in the Psychiatric Unit to ensure proper services are being provided, such as ensuring proper healthcare treatment or discharge planning takes place.

For more information about the PAIMI program, or individuals with mental illness, please contact NMPASI at our office numbers: (670) 235-7273/4, via text message at: (670) 287-0652, or visit our website at www.nmpasi.org.

By: Tiava To’omata
Projects Specialist

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Parents want their children to have the skills they need to succeed as adults. While this is important for every young person, youth with disabilities often face extra challenges. That’s the reason they need to be actively involved in setting their high school goals and planning for their transition to adulthood well before they reach the age of majority. Age of majority is the legal age established under state law at which an individual is no longer a minor and, as a young adult, has the right and responsibility to make certain legal choices that adults make. In most states, the age of majority is 18, but there are exceptions. It is important to know your state’s laws.

Age of Majority
At the age of majority, young adults are granted certain legal rights, such as the right to vote, marry, obtain a credit card, consent to medical treatments, make living arrangements, and sign contracts. Each of the 50 states determines what rights transfer to individuals within that state.

The Individuals with Disabilities Education Act (IDEA) gives states the authority to transfer educational decision-making rights to students who receive special education services at the age of majority. This is called “transfer of rights” under the IDEA.

- In a state that transfers rights at the age of majority, beginning at least one year before a student reaches the age of majority under State law, the student’s Individualized Education Program (IEP) must include a statement that the student has been informed of his or her rights and responsibilities under IDEA.
- The public agency (the school) will provide required notices to both the student and the parents. This regulation does not apply to students who have been determined to be “incompetent” under state law.

Rights that Transfer
In states that transfer educational rights at the age of majority, all of the educational rights provided to the parents transfer to the student when he or she reaches the age of majority.

These educational rights may include the rights to:
- receive notice of and attend Individualized Education Program (IEP) meetings
- consent to reevaluation
- consent to change of placement
- request for mediation or a due process hearing to resolve a dispute about evaluation, identification, eligibility, IEP, placement, or other aspects of a free appropriate public education (FAPE)

What’s the risk? Reaching the age of majority can be an exciting time for most students. However, transferring rights to young adults who are unable to make informed decisions or take responsibility for their choices carries many risks.

Will the student:
- decide to drop out of high school?
- accept a quick diploma and become ineligible for much needed transition services?

Many of the decisions young adults make affect their quality of life after high school. Most young adults, usually at age 18, are granted certain legal rights including special education rights. There are ways for parents to prepare for this and stay involved.

For more information on age of majority and your parental rights, you can call NMPASI at (670) 235-7273/4 or visit us on the web at www.nmpasi.org.
Reliving Your Worst Day

Do you ever find yourself waking up abruptly to the sound of your shutters rattling so hard and hearing the heavy rain and wind howl so loud, your heart starts beating so fast and you find your body shaking and you keep telling yourself it is just bad weather? I have and I go thru the steps to try and calm myself down; however, I will not go back to sleep until the rain and the wind stops. Since Super Typhoon Soudelor and Super Typhoon Yutu, both major disasters that happened here in the CNMI, I find myself still being affected years later. Sometimes just hearing certain machines that sound like a generator, I feel myself being back to those days and I have to snap back to myself. I also find myself getting paranoid whenever I hear that there is a disturbance forming near the CNMI and I find myself constantly watching the path of this disturbance. Although I have never been diagnosed, I have researched that these signs are commonly associated with Post-Traumatic Stress Disorder (PTSD). According to the National Institute of Mental Health “Post-Traumatic stress disorder (PTSD) is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event. It is natural to feel afraid during and after a traumatic situation.”

PTSD is a type of mental illness that affects millions of people around the world. According to the National Alliance of Mental Illness “21% of U.S. adults experienced mental illness in 2020 (52.96 million people). This represents 1 in 5 adults.” Other types of mental illness are Anxiety Disorders, Bipolar Disorder, Depression, Obsessive-compulsive disorder (OCD), Psychotic Disorder, Impulse Control or Addiction Disorder or Eating Disorder. Mental Illness can affect an individual’s mood and behavior and when not treated can cause more harm in your life. If you feel that your mental illness is affecting your life, please seek help from a health professional. Here are some links from the National Today’s website that can help you, a family member or a friend who is experiencing mental illness at www.nationaltoday.com/mental-health-month/:

1. Mental Health America: https://mhanational.org/get-involved/contact-us
3. Suicide Prevention Lines: https://suicidepreventionlifeline.org/talk-to-someone-now/

May is Mental Health Awareness Month. Although Mental Health and Mental Illness have their differences, a poor mental health state can lead to an increased risk of getting a mental illness. Let us join together to help spread the awareness of Mental Health. Sometimes sharing your story with someone can also bring awareness. If you have been subjected to discriminated due to Mental Illness or know someone who has been subjected to discrimination due to their mental illness, the Northern Marianas Protection and Advocacy System, Inc. (NMPASI) can assist you or that individual. NMPASI protects the human, civil and legal rights of individuals with disabilities. Please contact NMPASI at (670) 235-7273/74 or visit our website at www.nmpasi.org.
Children are rambunctious, mischievous, active, and don't always do what they are told to do. After all, kids will be kids. And how was that behavior handled in the past? Kids were spanked by their parents and whacked by a ruler by their teachers in school.

Reading was taught with “Dick and Jane,” sight-reading and phonics.

Things change. When did spanking or rulers become child abuse?

And then behavior modification was used to teach “good” behavior and “modify” bad behavior. Praise and positive reinforcement - not spanking - was used to reward good behavior and ignore or punish bad behavior.

And Dr. Engelmann developed “direct instruction” for teaching reading.

Things change. When did a child’s impulsivity, inattention, and hyperactivity become ADHD? ADHD is Attention-Deficit/Hyperactivity Disorder and is characterized by a “persistent pattern of inattention and/or hyperactivity/impulsivity that interferes with functioning or development.” American Psychiatric Association, DMS, 5th ed. (2013).

As parents and teachers face the onslaught of children diagnosed with ADHD, the Individuals with Disabilities Act (IDEA) was enacted to insure that all children are provided a free and appropriate education (FAPE). And Special Education programs were developed so that no child was left behind.

And reading programs were developed to meet the needs of children with different learning styles.

Things change. What else can be done to enable children to progress and not get lost in the works?

One idea is self-advocacy.

Parents and teachers work hard to educate our children academic skills as well as behavior skills.

Now let’s teach our children to self-advocate. One place to start is www.understood.org.

Understood has put together (1) 6 self-advocacy sentence starters for grade-schoolers with ADHD and (2) 5 self-advocacy sentence starters for middle-schoolers with ADHD. www.understood.org adhd self-advocacy.

ADHD is not limited to children and can have serious detrimental effects on one’s ability to function. ADHD is considered a disability under the Americans With Disabilities Act and, for an employee who has ADHD, the Act can require the employer to provide reasonable accommodations, as long as it doesn't create undue hardship for the business.

For more information, contact NMPASI at (670) 235-7273/4 on Saipan, (670) 287-9937 on Tinian, and (670) 287-9943 on Rota.