



# Exceptional News

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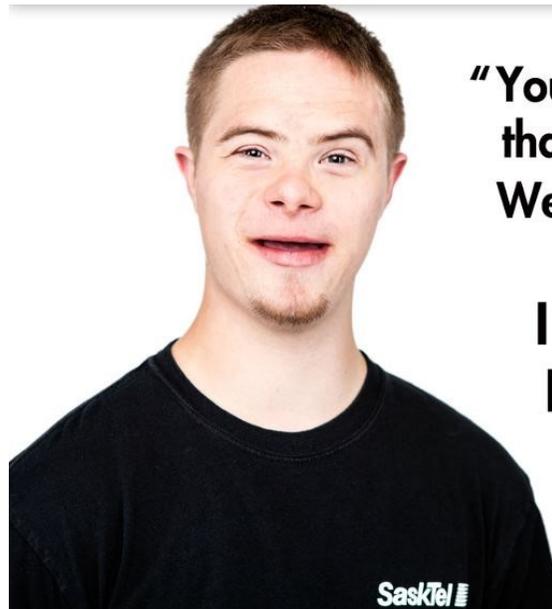
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## DID YOU KNOW

Down syndrome is a chromosomal condition that is associated with intellectual disability, a characteristic facial appearance, and weak muscle tone (hypotonic) in infancy. All affected individuals experience cognitive delays, but the intellectual disability is usually mild to moderate. People with Down syndrome may have a variety of birth defects. About half of all affected children are born with a heart defect. Digestive abnormalities, such as a blockage of the intestine, are less common. Individuals with Down syndrome have an increased risk of developing several medical conditions. These include gastro esophageal reflux, which is a back-flow of acidic stomach contents into the esophagus, and celiac disease, which is an intolerance of a wheat protein called gluten. About 15 percent of people with Down syndrome have an underactive thyroid gland (hypothyroidism). The thyroid gland is a butterfly-shaped organ in the lower neck that produces hormones. Individuals with Down syndrome also have an increased risk of hearing and vision problems. Additionally, a small percentage of children with Down syndrome develop cancer of blood-forming cells (leukemia).

CONTINUED ON PG. 2



**"You don't have to believe that we are not different. We ARE different but in a good way. I am proud I have Down syndrome."**

- Nicholas Popowich, the face of the "See the Ability" campaign.

Read more: [www.cdss.ca/ndsaw](http://www.cdss.ca/ndsaw)

Visit us on Facebook!

<http://www.facebook.com/Ansbachefmp> or call: 09802-83-2883

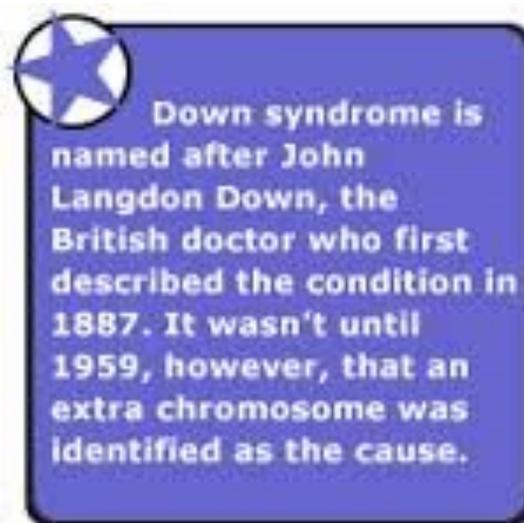
## DID YOU KNOW

Delayed development and behavioral problems are often reported in children with Down syndrome. Affected individuals' speech and language develop later and more slowly than in children without Down syndrome, and affected individuals' speech may be more difficult to understand. Behavioral issues can include attention problems, obsessive/compulsive behavior, and stubbornness or tantrums. A small percentage of people with Down syndrome are also diagnosed with developmental conditions called autism spectrum disorders, which affect communication and social interaction. People with Down syndrome often experience a gradual decline in thinking ability (cognition) as they age, usually starting around age 50. Down syndrome is also associated with an increased risk of developing Alzheimer disease, a brain disorder that results in a gradual loss of memory, judgment, and ability to function. Approximately half of adults with Down syndrome develop Alzheimer disease. Although Alzheimer disease is usually a disorder that occurs in older adults, people with Down syndrome usually develop this condition in their fifties or sixties.



### **Did you Know...** How common is Down syndrome?

Down syndrome occurs in about 1 in 830 newborns. An estimated 250,000 people in the United States have this condition. Although women of any age can have a child with Down syndrome, the chance of having a child with this condition increases as a woman gets older.



To learn more about what's going on in the USAG Ansbach community, check out the FMWR website!  
<http://www.ansbach.armymwr.com/europe/ansbach/>

### What causes stuttering?

Although the precise mechanisms are not understood, there are two types of stuttering that are more common. (A third type of stuttering, called psychogenic stuttering, can be caused by emotional trauma or problems with thought or reasoning. At one time, all stuttering was believed to be psychogenic, but today we know that psychogenic stuttering is rare.)

### What is stuttering?

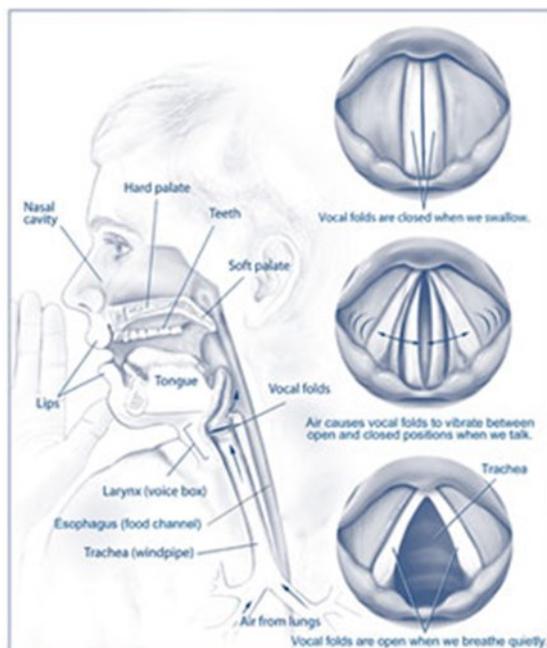
Stuttering is a speech disorder in which sounds, syllables, or words are repeated or prolonged, disrupting the normal flow of speech. These speech disruptions may be accompanied by struggling behaviors, such as rapid eye blinks or tremors of the lips. Stuttering can make it difficult to communicate with other people, which often affects a person's quality of life. Symptoms of stuttering can vary significantly throughout a person's day. In general, speaking before a group or talking on the telephone may make a person's stuttering more severe, while singing, reading, or speaking in unison may temporarily reduce stuttering. Stuttering is sometimes referred to as *stammering* and by a broader term, *disfluent* speech.

### Who stutters?

Roughly three million Americans stutter. Stuttering affects people of all ages. It occurs most often in children between the ages of 2 and 5 as they are developing their language skills. Approximately 5 percent of all children will stutter for some period in their life, lasting from a few weeks to several years. Boys are twice as likely to stutter as girls; as they get older, however, the number of boys who continue to stutter is three to four times larger than the number of girls. Most children outgrow stuttering. About 1 percent or less of adults stutter.

### How is stuttering diagnosed?

Stuttering is usually diagnosed by a speech-language pathologist (SLP), a health professional who is trained to test and treat individuals with voice, speech, and language disorders. The speech-language pathologist will consider a variety of factors, including the child's case history (such as when the stuttering was first noticed and under what circumstances), an analysis of the child's stuttering behaviors, and an evaluation of the child's speech and language abilities and the impact of stuttering on his or her life. When evaluating a young child for stuttering, a speech-language pathologist will try to predict if the child is likely to continue his or her stuttering behavior or outgrow it. To determine this difference, the speech-language pathologist will consider such factors as the family's history of stuttering, whether the child's stuttering has lasted six months or longer, and whether the child exhibits other speech or language problems.



FOR MORE INFO VISIT

<https://www.nidcd.nih.gov/health/voice/pages/stutter.aspx>

S

Swords, knives, and similar costume accessories should be short, soft, and flexible.

A

Avoid trick-or-treating alone. Walk in groups or with a trusted adult.

F

Fasten reflective tape to costumes and bags to help drivers see you.

E

Examine all treats for choking hazards and tampering before eating them. Limit the amount of treats you eat.

H

Hold a flashlight while trick-or-treating to help you see and others see you. Always WALK and don't run from house to house.

A

Always **test make-up** in a small area first. Remove it before bedtime to prevent possible skin and eye irritation.

L

Look both ways before crossing the street. Use established crosswalks wherever possible.

L

Lower your risk for serious eye injury by not wearing **decorative contact lenses**.

O

Only walk on sidewalks whenever possible, or on the far edge of the road facing traffic to stay safe.

W

Wear well-fitting masks, costumes, and shoes to avoid blocked vision, trips, and falls.

E

Eat only factory-wrapped treats. Avoid eating homemade treats made by strangers.

E

Enter homes only if you're with a trusted adult. Only visit well-lit houses. Don't stop at dark houses. Never accept rides from strangers.

N

Never walk near lit candles or luminaries. Be sure to wear flame-resistant costumes.

## MAKE HALLOWEEN FUN WITH A EFMP APPROVED PUMPKIN PIE RECIPIE

### **Ingredients:**

#### **Pumpkin:**

1 medium sugar pumpkin (about 3 pounds)

Canola oil, for oiling pumpkin

Easy Pie Crust:

2 cups all-purpose flour, plus more for flouring

1/4 teaspoon salt

2/3 cup (11 tablespoons) cold unsalted butter, cut into 1/2-inch pieces

#### **Filling:**

One 14-ounce can sweetened condensed milk

1/2 cup whipping cream

2 tablespoons cornstarch

2 tablespoons molasses

2 tablespoons canola oil

1 tablespoon ground cinnamon

1 teaspoon ground ginger

1/4 teaspoon salt

3 large eggs

#### **Directions:**

For the pumpkin: Preheat the oven to 375 degrees F.

Remove the stem from the pumpkin and scrape out the insides, discarding the seeds. Cut the pumpkin in half and lay the pieces cut-side down on a rimmed baking sheet lined with aluminum foil. Rub canola oil all over the skin and bake until fork-tender, about 1 hour. Let cool. For the easy pie crust: While the pumpkin is cooking, make the crust. In a large bowl, combine the flour and salt. Add in the butter and work into the dough with a fork until the mixture is crumbly. Stir in just enough cold water (4 to 5 tablespoons) with a fork just until the flour is moistened. Divide the dough in half, shape each half into a ball and flatten slightly. Wrap one ball in plastic wrap and refrigerate for another use. Roll out the remaining dough ball on a lightly floured surface to a 12-inch round. Transfer to a 9-inch-diameter glass pie dish.

Fold the overhangs under and crimp decoratively. Pierce the dough all over with a fork. Chill in the refrigerator for 15 minutes. Line the crust with foil, fill with dried beans or pie weights and bake until the sides are set, about 12 minutes. Remove the foil and beans. Reduce the oven temperature to 350 degrees F.

For the filling: Scoop out the pulp from the roasted pumpkin and puree in a food processor until smooth (you should have about 4 cups). Add the condensed milk, cream, cornstarch, molasses, canola oil, cinnamon, ginger, salt and eggs and combine thoroughly. Pour the filling into the crust and bake until the filling is set in the center, about 1 hour. Transfer the pie to a rack and cool for 30 minutes. Serve at room temperature or chilled.



# October 2015

Sun                  Mon                  Tue                  Wed                  Thu                  Fri                  Sat



1 World Cerebral Palsy Day

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8 EFMP Guy Talk, 0800-1000, SFAC Lobby

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10 National Bipolar Awareness Day

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12 World Arthritis Day

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22 International Stuttering Day

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28 EFMP Support Group 1300-1400, SFAC Lobby

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