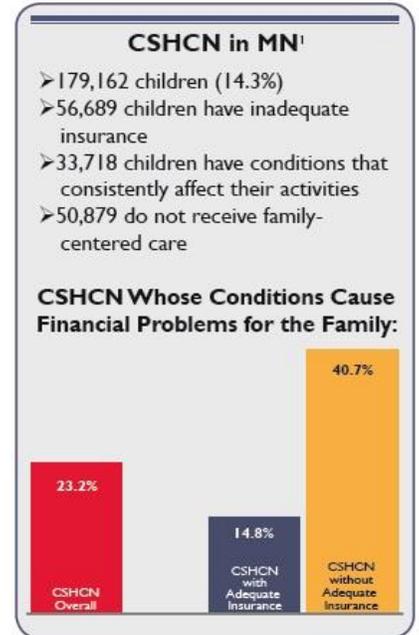


Founded in 1977, PACER Center was created by parents of children and youth with disabilities to help other parents and families facing similar challenges. The F2F at PACER provides a central source for families of CSHCN to obtain support, advocacy, and information about the health care system. PACER promotes family-centered care and family and professional collaboration at all levels of health care and have a strong commitment to promote and support the needs of families from racially, culturally, and linguistically diverse communities.

2016 IMPACT on a FAMILY

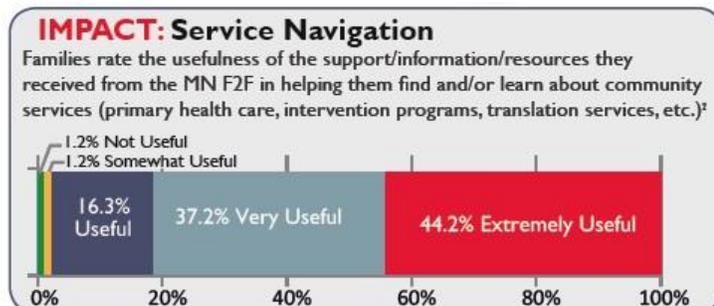
Sarah Nehrbass, 21, has Down syndrome and is hard of hearing — but those aren't the most important things about her. Sarah is an artist who creates, hand paints, and sells her own headbands, and she's just sold her first canvas painting. Sarah's headbands are available at sarahbands.com. Sarah's mom, Cindy Nehrbass, first contacted PACER when she didn't agree with the Individualized Education Program (IEP) written by Sarah's public school district. "In order for Sarah to receive the services she was entitled to, American Sign Language (ASL) needed to be listed as her language," said Sarah's mom, Cindy Nehrbass. "We felt Sarah had the right to choose her own language." PACER advocate Deanne Curran assisted the Nehrbasses in having ASL written into Sarah's IEP, and Sarah received the services she needed. Today, Sarah uses ASL to communicate. She has finished high school, and spends three days a week creating art in a program for adults with disabilities, Interact Center for Visual and Performing Arts. Cindy Nehrbass says her daughter's never been happier. "Sarah just glows when she is at her easel at Interact."



2016 HIGHLIGHTS

Training Impact More than 1,000 parents, teachers, and administrators and other professionals attended PACER's 11th Annual National Symposium about Children and Young Adults with Mental Health and Learning Disabilities, held on August 9, 2016 at the Minneapolis Convention Center. Many of those attending remarked that this year's Symposium was PACER's best yet. A teacher said, "Every moment was enriching and insightful. Thank you for expanding my awareness as an educator." Parents were just as enthusiastic. "The Symposium was touching, educational, and broadened my horizons with the experiences of others. It also provided me specific education on issues directly relevant to my family," said one mother.

Innovative Youth Impact At PACER's National Symposium in August 2016, the Simon Technology Center presented a workshop on how teens with disabilities can use apps to monitor and improve their health. According to a recent study by the Pew Research Center, 91% of all teens are online with mobile devices, with the vast majority of them using smartphones. "Teens with disabilities have plenty of options for apps that will help them manage their wellness in a way that works for them," said John Newman, Assistive Technology Specialist at PACER. "These apps complement traditional treatments, and help motivate teens to keep track of and use the strategies that help them feel their best."



CONTACT

PACER Center: 8161 Normandale Blvd, Bloomington, MN 55437
Phone: (952) 838-9000 ♥ **Toll-Free:** (888) 248-0822 ♥ **Fax:** (952) 838-0199
Website: <http://www.pacer.org/> ♥ **Contact:** Pat Lang, Pat.Lang@Pacer.org

¹National Survey of Children with Special Health Care Needs. NS-CSHCN 2009/10. Data query from the Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health website. Retrieved 04/03/2014 from www.childhealthdata.org.
²FY2016 F2F data represents families and professionals served through one-to-one contact, training, and broader outreach from June 1, 2015 through May 31, 2016.
³This report was developed by Family Voices National Center for Family/Professional Partnerships (www.fv-nctpp.org) under grant number U40MC00149, funded by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.