

Detecting Differences

BY MAUREEN SHERRY-KLINSKY AND AIMEE GARN

The process starts with a small voice in a parent's head: "My child seems to struggle to learn simple things." "My son doesn't have any real friends." "My daughter cannot complete tasks." At that point the parent has to decide if the child's difficulty is simply a phase in his growth, or if it is significant and requires professional help.

"What should parents do when they think that their child is struggling?" was the question posed by moderator Dr. Cecelia McCarton, a specialist in pediatric developmental disorders, to a panel of prominent doctors at a seminar entitled "Needles in the Haystack: How to Identify Learning, Attentional and Behavioral Problems Your Child Might Have." The seminar was presented by Resources for Children with Special Needs, Inc., NYC-Parents in Action and The Parents League at Park Avenue Christian Church on October 21, 2003.

The first thing to keep in mind, according to Dr. Paul B. Yellin, the National Director of the Student Success Program at All Kinds of Minds Institute, is that the world can accommodate many types of children and adults, with different strengths and weaknesses. Parents should not be dismayed if their child seems to stray from the mean. "Your child should spend time on subjects he enjoys, and have a chance to excel at something," said Dr. Yellin. "You don't want a child to be intimidated by the learning process. Parents should maintain communication with the child's teacher." If parents see over time that a child cannot accomplish the tasks that are expected of him, Dr. Yellin advises them to seek help. "About forty percent of parents feel their kids have issues, and forty percent wait at least a year to get help. Don't wait. Identify the problem."

Some parents may regard "identifying" a child's learning issues as "labeling" them, and there is concern

that we label children too early. "Labels are broad, and not always negative," said Dr. Yellin. "They give you a base to work from." Esteemed child psychiatrist and author Dr. T. Berry Brazelton, who attended the event and joined the panel for questions, further assured parents: "Kids are smarter than we give them credit for being. Kids know their own labels. How can we help them to know themselves, if we don't give them a vocabulary to work with?" Once a child's issue has been identified, parents have to decide how to intervene.

Judith R. Birsh, Ed.D., the President of the International Dyslexia Association's New York branch, stressed that reading issues should be addressed as early as possible. "With reading, a good beginning has no end, whereas a bad beginning has big consequences," she said. "If you see your child struggling, check his comprehension, and note if he confuses words. Reading skills can be evaluated early, and we know how to monitor them. Intervention may take the form of one-on-one training or work in small groups. Often dyslexics are creative, resourceful, alternative thinkers. They can succeed, but parents must champion their cause and get them the help they need early on."

Dr. Alan Wachtel, a Clinical Associate Professor of Psychiatry at New York University School of Medicine and a specialist in learning issues, spoke to the parent who wonders if a child has attentional issues. "Be inquisitive," he said. "The backpack is the window into children's lives. You want to find out if your child is managing his work load. The desk at school tells a lot about the child's level of organization. Too often parents wait to take action. Get in there early, so the child's self-esteem is maintained."

Intervention with issues of attention often requires medication, and the decision about whether to use medication concerns parents. Dr. Wachtel emphasized

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NYC-Parents in Action School Rep Luncheon

BY TESSA NAMUTH

Dr. Ralph I. Lopez spoke to a NYC-Parents in Action meeting on November 17th in a talk entitled “It’s Confidential: What Doctors and Nurses Know About Your Child That You Don’t.” The address was followed by a question-and-answer session with Dr. Lopez and with Nancy Scully, R.N. Dr. Lopez has a full-time private practice of adolescent medicine in New York City, and recently published a book, “The Teen Health Book: A Parent’s Guide to Adolescent Health Care.” Nancy Scully, a graduate of Skidmore College Department of Nursing, recently retired after eighteen years as the nurse at the Brearley School.

Dr. Lopez first outlined areas that create stress for Middle School children. “Younger kids are concerned with their growth and how they compare to others of the same age,” Lopez said. “They ask many questions on the subject, such as ‘When do boys and girls stop growing? Why am I short? Why are girls taller than boys?’” Until the 6th grade, boys and girls generally grow at the same rate, but at that point girls grow faster and often develop more rapidly, which can be a source of stress for kids. “Kids have the same concerns

today that we had when we were young,” Dr. Lopez said, “But the external pressures and stresses are felt much earlier than in our childhood.”

In 7th and 8th grades, children face the more abstract concerns that continue into late adolescence. Dr. Lopez finds this group wondering: “Why is popularity so important? How do I resolve a problem when no one will talk to me? What do you do if someone asks you to smoke or drink at a party?” Throughout childhood and early adolescence, children may also encounter events that contribute to their stress, such as illness, a learning disability, their parents’ divorce, or a parent’s illness or death.

As adolescence progresses, parents may find it difficult to help children deal with stress. “Your adorable 11-year-old develops into this teenager who doesn’t want to be seen with his parents, let alone talk to them,” Dr. Lopez says. This is where an adolescent doctor can enter into their lives; it is important to choose a physician with whom a teenager feels comfortable.

In teenagers, one of the most common causes of stress is sleep deprivation. But, Dr. Lopez cautions, “tired”

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that parents should not make that decision until a diagnosis is clear. “All interventions have some downside, but ask yourself: ‘What is the cost of not intervening?’” He recommends that parents find a professional with whom they are comfortable, review all the options, and start with the least aggressive intervention. “A parent’s job is to help empower the child. Positive feedback enables a child to go out and repeatedly do something well. Help your child make things happen, and give consistent reinforcement.”

Child psychiatrist Dr. Joshua Sparrow, an Assistant Professor of Psychiatry at Harvard Medical School, and the Associate Director of Brazelton Touchpoints Center, addressed the case of children who experience

emotional difficulties. “Young children see themselves as the center of events around them. If parents fight, the child feels responsible. Children use coping mechanisms to deal with overwhelming emotions, and their behavior can be unusual. Parents should evaluate its significance by the context, and the point in a child’s development. If the behavior is not persistent, it may simply indicate that the child is on the verge of a new step in his growth.” Dr. Sparrow pointed out that parents know best, and that if they feel that a child has emotional issues, they should seek professional help. “Be aware that depression in children can appear as irritation and not sadness. Children rarely understand their own depression, so it is up to parents to recognize the symptoms and take action.”

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NYC-PARENTS IN ACTION FAMILY BENEFIT

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and “stressed” are almost universal complaints made by teenagers. “A tired teenager is not automatically in trouble; tiredness can be a natural effect of growth and of having too much to do, whether it’s studies, sports, or parties.” Most teenagers can handle appropriate stress, but people close to them, whether the parent, teacher, school nurse or pediatrician, should be alert to extremes in behavior that can indicate problems like depression, an eating disorder, or substance use. “Look for isolation, sudden mood swings, or grades slipping, although you can’t assume that the ‘A’ student is not depressed. A runny nose and a cough can signal drug use.” Parents should, Dr. Lopez advises, be aware of their child’s group of friends, and watch for those who might facilitate drug or alcohol use or other destructive behavior.

Dr. Lopez advises parents to discuss the issues of stress and substance use with their teens as a couple, presenting a united front. For a cost of about \$100.00, a parent can order a drug screen, which can alert the parent and pediatrician to the presence of drugs in the teen’s system. Dr. Lopez says that recently eating disorders have crossed the gender gap; anorexia and bulimia are becoming more common in boys as well as girls. Suicide is rare among teens, but Lopez cautioned that girls may attempt an overdose, while boys are more likely to shoot, jump, or hang themselves. If parents have worries about a teen’s eating behavior or drug and alcohol use, they should not hesitate to order a physical examination and drug screen, followed by individual or family therapy.

For the physician, the issue of confidentiality is an important one. “I can tell you — the parent — about strep throat, growth patterns, and pimples, but if a teen talks to me about sexual matters, it is privileged information,” said Dr. Lopez. “However, if a teen trusts me and confides, I can start an educational process or an intervention.”

Parents should realize that they are asking teenagers to be “adult” when they may actually find it difficult

to define what an “adult” is. There are, Dr. Lopez points out, three main questions that adults address in the process of maturing: “Who am I? How do I present myself as a man or a woman? How do I become independent?” These are the questions that a child must answer as he matures and grows within and outside the family.

Questions from the audience showed a range of concerns. A question about alcohol use prompted Dr. Lopez to point out that parents have to consider carefully what they communicate to children on that subject. The parent who regularly “needs” a pre-dinner drink to relax is giving a different message from the parent who only drinks wine at the dinner table. Dr. Lopez suggested that watching television together might offer a chance for parents to broach the subjects of drug or alcohol use with kids. “Rarely will they reveal what they are going through,” Lopez advised, “but they will talk about their environment.”

Nancy Scully addressed the subject of stress in younger children, as she observed it in her years as a school nurse. “Nine-year-olds know how to get out of something they aren’t enjoying,” she laughed. “They would come to the nurse’s office complaining of a headache or stomachache, and I would ask them generally how things were going. Often I found that they were having a problem in the classroom or with a personal concern.”

Both Dr. Lopez and Mrs. Scully noted that there was pressure on teenage girls to engage in oral sex, which has become accepted among kids as young as 7th and 8th grades. “It’s so impersonal and generally a one-way sexual act,” Mrs. Scully remarked. “Girls felt pressured to do it, which indicated to me that they were not feeling good about themselves.” Regarding peer pressure to engage in sexual activity or substance use, Scully advised parents to take any opportunity to talk to kids about the issues. “Keep talking to kids — give them all the information you can at home. If you keep talking, some of your message will be absorbed.” ●



Letting Kids Be

As busy New York parents, we sometimes forget that raising children is more about responding than directing: responding to their needs, their strengths and weaknesses, their changing selves as they grow and learn. NYC-PIA advisory board member, Dr. Jean Mandelbaum, Director of All Souls School and a member of the faculty of the Bank Street College of Education, recently talked with newsletter co-editor Eva Pomice. She shared her views on letting children learn in their own way and in their own time.

Q NYC-PIA: What can you do in a child's early years to lay the groundwork for self-confidence and self-esteem?

A MANDELBAUM: The most important thing is to make your child feel she has a real place in your home, that there are people there who take the time to know her. A child needs to know that he is listened to, appreciated, and respected. A three-year-old should be expected to act like a three year old; a four-year old, like a four-year old, so they will not feel out of sync with others' expectations.

Q NYC-PIA: Isn't that hard in New York where parents feel their children need to perform and compete from an early age?

A MANDELBAUM: We all have ideas of who we think our children should be when they are born. It's the family's ability to modify those ideas that gives the child a sense that she is understood for the person she is and appreciated. It must not be a matter of, "we wish you were another sort of child."

Q NYC-PIA: How can parents set goals for their children without adding to stress they may already feel?

A MANDELBAUM: There's a difference between encouraging and pushing. From the time a child is two or three, she should be brought in on working out her own problems and goals. What tasks are important to her? What would she like to improve? Parents should understand a child's own impulse to grow in a particular way and master certain skills that are developmentally appropriate for their age. It shouldn't be parents pushing kids through as if they're on an assembly line.

Q NYC-PIA: In our efforts to build self-esteem, are we creating praise-addicted kids?

A MANDELBAUM: Children naturally want to learn. They should not feel that they are constantly judged and given gold stars and smiley faces for their efforts. If they

learn to work for external validation, they might end up feeling that they aren't appreciated for what they are, but for what they produce. They may lose their own motivations for learning, and the ability to discover their own interests and talents.

Q NYC-PIA: Do you think that schools sometimes have expectations for children that don't seem developmentally appropriate?

A MANDELBAUM: The truth of the matter is that some schools operate as if there are standardized children, and there aren't. We want children to be the best they can be, not an unhappy copy of someone else's ideal.

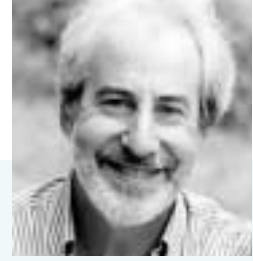
A lot of skills have little to do with intellect but rather the readiness of a child to master them emotionally and temperamentally. Sooner or later, children learn these things. The question is, at what cost. I believe it is not what is learned, but how it is learned that's important. If you get the feeling that a school's expectations are way out of sync with yours, if other things that are important to you and your child are being sacrificed—hobbies, friends, downtime—you know that it is not the right place for your child.

Q NYC-PIA: What role can parents play in helping children navigate life's twists and turns?

A MANDELBAUM: A parent's role is perspective giving—perhaps to affirm that a night's sleep may be more important than getting an "A" on a particular test. Children need to be helped to understand that sometimes you succeed and sometimes you fail, that you don't have to be perfect.

Q NYC-PIA: As parents, we want to keep our children safe, but also foster their independence. How do we achieve that balance?

A MANDELBAUM: It's a matter of ages and stages. Parents have to be flexible in changing their image of a child over time. As children move through stages of development, parents have to keep modifying their approaches and give them more and more responsibility and freedom. Eventually, they have to have enough experience and information to make appropriate decisions for themselves. One day it's about walking up the stairs by themselves to class, and eventually it's about walking to school alone or going out with friends. But the most important thing is to let children be children and not to rush them through these crucial growing-up years. ●



Your Child's Emotional Life: Nurturing Wellbeing in a Complex World

BY MAUREEN SHERRY-KLINSKY

“If you are finding parenting to be an impossible task to perfect and feel your child has problems, you are right,” said Dr. Jonathan Cohen. His statement was acknowledged with amusement by the NYC-Parents in Action audience, and he went on to describe how parents and schools can work together to foster children's social and emotional growth.

Early in life, parents are usually their children's primary teachers; schoolteachers and peers become as important in that role as the years go on. Dr. Cohen offers six ways to become more active teachers:

- 1) **Make social and emotional learning a goal at home.** “Parents need to be purposeful and more conscious of the fact that they are shaping the way a child feels about himself,” says Dr. Cohen.
- 2) **Be an active listener.** Listen in a way that makes your child feel heard and recognized.
- 3) **Figure out where anger is coming from.** Dr. Cohen suggests, “After an explosive conversation or fight, take a moment to think about what your child is really trying to say. Anger is second to some underlying need.”
- 4) **Problem solve.** Talk selectively about your own problems. If we share more about our own lives, chil-

dren are less likely to feel isolated when they have problems themselves.

5) **Rid childhood of bullies.** Parents and teachers need to stand up to bullies and say their behavior is wrong. Children will follow our lead and gain comfort in the fact that being different or being “the other” is not bad.

6) **Partner with the school.** Since academic and social and emotional learning go hand-in-hand, our children's teachers and the school should also take responsibility for creating a safe and emotionally supportive environment.

What a school can do to be effective in becoming a caring, responsive, and responsible culture:

- Create safe and caring classrooms.
- Enhance awareness of self and empathy for others.
- Help students become more able to cooperate, form relationships, be self-motivating and become both followers and leaders.
- Set long-term goals for the school that include ways to implement these principles.
- Help children be effective in solving problems for themselves.
- Collaborate with the families. ●

NYC-PARENTS IN ACTION CALENDAR

SPRING 2004

February 9, 2004
Trinity School, 6:00-7:30 pm

Teen Scene XVIII

April 21, 2004
All Souls Church, 6:00-7:30 pm

An Inner Life: Your Child's Spirituality
Panel Discussion

Jonathan Cohen, Ph.D., is the co-founder and president of Center for Social and Emotional Education (www.csee.net). He is a professor in psychology and education at Teachers College, Columbia University and a practicing psychologist and psychoanalyst. His books include *Educating Minds and Hearts* and *Caring Classroom/Intelligent Schools*.

NYC-Parents in Action, Inc. invites speakers to present their opinions and expertise on specific topics. Their opinions and comments are not necessarily those of NYC-PIA.

BOOK NOTES

We are excited to introduce a new column to the NYC-PIA newsletter – BOOK NOTES. We are sure that you will find the books, many written by our advisory board members, useful and engaging.

— Janie Goodwin – Editor

- **WHAT ARE YOU DOING IN THERE?**
Balancing Your Need to Know with Your Adolescent's Need to Grow
by Charlene C. Giannetti and Margaret Sagarese
- **HEALTHY TEENS, BODY AND SOUL**
by Andrea Marks M.D. and Betty Rothbart
- **A TEEN HEALTH BOOK:**
A Parent's Guide to Adolescent Health Care
by Ralph I. Lopez M.D.
- **NOT MUCH, JUST CHILLIN':**
The Hidden Lives of Middle Schoolers
by Linda Perlstein

To purchase these and our other recommended readings please visit BOOK NOTES at www.parentsinaction.org.

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For parents who are beginning to seek help on these issues, there is a wealth of information. Resources for Children with Special Needs provides free consultations, and can be reached at 212 677-4650. Their website is www.resourcesnyc.org. ●

If you'd like to be in touch with NYC-Parents in Action, you can reach us at:

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