

HEALTHY choices

Spring/Summer 2005

For Families of
Pre-adolescents in
Grades 6-8



BULLIES and Preteens

Bullying at school is getting new attention as researchers find mental health implications in the fact that as many as one-third of students say they have either bullied someone or been the target of bullying. Researchers also consider it important that some 70 percent of the young persons who committed extreme acts of school violence such as shootings were later found to have been either victims or perpetrators of bullying in their schools.

Existing research suggests as much as a four-fold increase in criminal behavior on the part of bullies by the time they reach their mid-20s, while those who have been bullied appear to have higher rates of depression and poor self-esteem. Experts now understand that bullying is not just "part of growing up" but is dangerous behavior with serious consequences.

In thinking about bullying, we may fail to discuss the role of bystanders who watch bullying take place and do nothing to intervene. Witnessing bullying is in itself an experience in which students directly learn fundamental lessons about power, authority, empathy, injustice, social responsibility, and courage or the lack of it—lessons that are likely to be more salient than academic lessons about civic responsibility taught in schools. By failing to intervene the bystander has passively supported bullying.

How to Help If Your Pre-Teen Is Being Bullied

Being a good listener is one of the best ways to comfort your pre-adolescent. Just talking about the problem and knowing you care can be helpful. Your early teen is likely to feel vulnerable while discussing bullying, so it's important to show your love and support.

You should also reassure your pre-teen that he or she isn't to blame. Explain that bullies are often confused or unhappy people. They do not know how to gain approval in a kind and constructive way.

Also consider asking your student thoughtful questions, such as:

- What's it like walking to the bus stop or home from school?
- What's it like on the bus ride to and from school?
- What happens during activities before or after school?
- What happens in the hallways at school or during lunchtime?
- Have any bullies in the neighborhood or at school threatened anyone you know?
- Do some kids you know get emails, instant messages, or text messages that are upsetting, threatening, or insulting?

What Can Your Pre-Adolescent Do?

The key to helping your pre-teen deal with bullying is to help him or her regain a sense of dignity and recover damaged self-esteem. Bullying is not just an activity of



young males; a growing number of girls are being threatened by this anti-social activity, especially on the computer. Here are some tips to share:

- **Hold the anger.** Not only will getting angry or violent not solve the problem, it will only make it worse.
- **Never get physical or bully back.** Tell your pre-teen that it's best to hang out with others, stay safe, and get help from an adult.
- **Act brave, walk away, and ignore the bully.** Tell your son or daughter to look the bully in the eye and say something like, "I want you to stop right now." Counsel him or her to then walk away and ignore any further taunts. Encourage "walking tall" and holding his or her head up high.
- **Tell an adult.** If your teen is bullied again, emphasize that it's very important to tell an adult. Teachers, principals, coaches, parents, and lunch

For more information:

Bullying information is available at the Center for Health and Health Care in Schools Parents' Resource Center at <http://www.healthinschools.org/parents/bullying.htm>

Blueprints for Violence Prevention Series: Book Nine: Bullying Prevention Program. Available from: Center for the Study and Prevention of Violence, University of Colorado at Boulder (303) 492-8465 or on the web at <http://www.colorado.edu/cspv/publications/blueprints.html>. A universal school intervention program for the reduction and prevention of bully/victim problems.

Bullying at School: What We Know and What We Can Do by Dan Olweus (Blackwell Publishers/AIDC, RO, Box 20, Williston, VT, 1993, \$22.95). A book that provides the standard approach to bullying prevention, reflected in such programs as the University of Colorado Blueprints for Violence Prevention project. Information about the Olweus Bullying Prevention program is available online at www.clemson.edu/olweus.

Bully Proofing Your Child: A Parent's Guide by Carla Gerrity, Ph.D., Mitchell Baris, Ph.D., and William Porter, Ph.D. (2000, Cambium Learning, 4093 Specialty Place, Longmont, CO, 80504, 1-800-547-6747, www.sopriswest.com) \$12.95 plus \$4.00 shipping and handling. Every family should have this 100-page book on how to create a "Bully Proof Plan." Covers boy bullies, girl bullies, their victims, and how bullying exhibits at different ages. Helps families face this serious problem.

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EARLY MATURING TEENS: *At Risk of Substance Use and Abuse*



A group of over 5,000 10-to-15-year-old students in grades 5, 7, and 9 completed surveys about their use of dangerous substances, including tobacco, alcohol, and marijuana in recent university research.

When students of the same age and grade were compared, students who matured earlier were two to three times more likely to report ever using and currently using substances than students who were in an earlier stage of puberty.

Puberty is a time when pre-teens place greater emphasis on relationships with their peers, and the hormonal changes associated with physical maturation may lead to higher levels of risk-taking and sensation-seeking that could lead to substance use. Although there's little you can do about the timing of pubertal development, the results of this study indicate that fostering family and school connectedness may help to protect kids against substance use and abuse. Please seek regular opportunities to spend time with your child and his or her friends (a dinner invitation usually works, as does leading the scout troop or assisting in the school play). Support your child's school and extracurricular activities, and talk to your middle schooler's doctor or school counselor if you suspect your pre-teen may be using tobacco, alcohol, or drugs.

For More Information

Healthy Teens: Facing the Challenges of Young Lives by Alice R. McCarthy, Ph.D. (Bridge Communications Inc, 2000, \$14.95+\$3.50 s/h, [800] 808-9314) This award-winning book has excellent chapters on puberty and adolescent risk-taking behaviors.

WARNING: *Talk to Your Middle Schooler about Ritalin*

Some students with attention deficit hyperactivity disorder (ADHD) take the stimulant methylphenidate (Ritalin). Ritalin is a powerful stimulant that abusers take as a pill or grind up and inhale. Students are using Ritalin to get high, to complete a big project, or to reduce their appetite. Abusing or overdosing on Ritalin can backfire and cause serious symptoms including high blood pressure, irregular heart beat, mood changes, hallucinations, seizures, uncontrolled movements, and vomiting. Talk carefully with your middle schooler. Taking Ritalin when it is not prescribed can cause major health problems.

PARENT NOTIFICATION LAWS WON'T STOP *Teen Sex*

Laws aimed at forcing teens to get their parents' permission before getting contraception will do nothing to prevent youngsters from having sex and may in fact increase rates of teen pregnancy, according to U.S. researchers and reported by Maggie Fox, Health and Science Correspondent at Yahoo News, in January 2005.

Trying to frighten teenagers about the risks of pregnancy is equally ineffective, a second study found.

The researchers said their findings support the argument that teens need to get good information about contraceptives, including condoms, and argue against current federal policies pushing abstinence-only education.

"The research published in January shows abstinence-only does significant disservice to American youth by increasing the risk of pregnancy and disease," said Cynthia Dailard, an analyst at the nonprofit Alan Guttmacher Institute, a reproductive health think tank.

A study of 1,500 girls under the age of 18 who used family planning clinics, which provide contraceptive and pregnancy services, showed the parents of 60 percent of them knew the young women were using the clinics, said the Institute's Rachel Jones.

Close to 20 percent of the girls said if they had to get permission to use contraceptives from their parents, they would do without, Jones and colleagues report in the *Journal of the American Medical Association*.

In the second study, Dr. Peter Bearman, who directs the Columbia University Institute for Social and Economic Research and Policy, found that fear of pregnancy did little to keep a girl from having sex, and those

with positive attitudes about contraception were much less likely to become pregnant.

"Policymakers often have concerns that talking positively about contraception encourages young people to have sex," Bearman said in the journal *Perspectives on Sexual and Reproductive Health*.

"There's a lot of research to show that's just not true," said Dr. Bearman. "Even those adolescents who most actively believe they are not going to



have sex before marriage, for instance, those who take virginity pledges, 80 percent of them will eventually have sex before marriage."

Parents need to be informed about the kinds of information related to human sexuality provided in middle school health classes.

In Michigan, there is an opportunity to serve on district-wide committees related to HIV and Sex Education programs. Please call your child's principal for more information.

ANOTHER PLOY: *Flavored Cigarettes*

In January 2005, the Michigan Department of Community Health Director Janet Olszewski and Michigan Surgeon General Dr. Kimberly Dawn Wisdom called for American cigarette manufacturers to halt the production of flavored cigarettes, saying the products are blatantly targeted toward children and non-smoking adults.

"Despite their continued insistence that they do not target cigarette marketing campaigns to youth and adult non-smokers, companies like R.J. Reynolds continue to create products that are specifically marketed to these groups," Olszewski said. "Candy-flavored cigarettes clearly have their greatest appeal to new smokers. The practice is solely designed to hook young people on these products."



"This new tobacco marketing strategy undermines our public

health efforts to protect youth from a serious threat to their

long-term health," Dr. Wisdom said. "We now face a new and very real challenge."

Tobacco companies have also taken to advertising these products in magazines and other publications specifically for younger audiences, such as *Rolling Stone*, *Elle*, *Glamour*, *Cosmopolitan*, and *Sports Illustrated* — further evidence that these products are targeted toward first-time smokers, said Dr. Wisdom and Ms. Olszewski.

Tobacco marketing is highly effective in influencing children. Check with your pre-teen and explain the dangers of beginning to smoke. Research tells us that smokers who begin at an early age have the most difficulty quitting.

Books for Parents

Consuming Kids: The Hostile Takeover of Childhood by Dr. Susan Linn (The New Press, 2004, \$24.95) "Consuming Kids should be read by every parent, policymaker, and professional who works with children."—Alvin Poussaint, M.D., Professor of Psychiatry, Harvard Medical School

Your publisher could not agree more. The dialogue goes like this: "But Mommy, I want it!" If you have kids—and I have had five—chances are you've heard this kind of wheedling. What you may not know is that advertisers spent \$15 billion last year getting kids to nag their parents this way. Nagging, as classified by marketing research, comes in two flavors: *persistence nagging* (children repeatedly and incessantly badger their parents until they give in), and the much more effective *importance nagging* (children offer a "reason" for why they must have a particular product—a reason included in advertising, of course). This is just one of the alarming revelations from Dr. Susan Linn.

Dr. Linn offers this paragraph on page 114: "An extraordinary video from the Media Education Foundation, called *Wrestling with Manhood*, addresses the disturbing

behaviors and values the World Wrestling Entertainment (WWE) promulgates, focusing on what its shows teach boys about manhood. One thing the WWE teaches them is that men are bullies. Day after day, large wrestlers pick on smaller ones, beat them up, jump on them when they are unconscious, and taunt them for being weak. To cheers from fans in the audience, characters display an exaggerated relish at humiliating their opponents or their underlings both physically and psychologically."

Susan Linn is an instructor at Harvard Medical School and Associate Director of the Media Center at Judge Baker's Children's Center.

The Good Father by Mark O'Connell (Simon & Schuster, 2005, \$25.00) Dr. O'Connell has a psychotherapy practice and serves on the Boston Psychoanalytical Institute and at the Harvard Medical School. This is an important book for both fathers and mothers. The strength in the book is in Dr. O'Connell's method of drawing on his own fathering (lack of it, actually, due to his father's very early death) as well as from his practice and his own parenting. He writes clearly about many of the issues of being

a "good" father, in addition to being a male. Thought-provoking and excellent.

If You Could Be Anything, What Would You Be? by Jeanne Webster (Dupuis North Publishing, 2004, \$19.95) "You Could Be Anything," a 13-lesson curricula and book, suitable for use in social studies, life style, and health education. Both the book and the curriculum provide students with character and life skills to allow them to apply education in real life. The author provides students with structure for self-definition, principles, values and ethics, and stresses decision-making and emotional control. Ms. Webster is a former drama teacher with broad experience as a life coach. The book and curriculum are very well written. Suggest the curriculum and the book to your middle school principal.

Mobilizing Citizens for Better Schools by Robert Sexton (Teachers College Press, 2004, \$18.95) Tired of the complacent attitudes Kentucky politicians showed toward education, a group of concerned citizens formed the Prichard Committee for Academic Excellence. Robert Sexton tells the

story of the Committee's determination to change the face of education in Kentucky. Sexton provides invaluable guidance for citizens of all states who are interested in implementing school reform. Available through Education Week Press, 6935 Arlington Rd., Suite 100, Bethesda, MD, 20897-1476.

Ready or Not, Here Life Comes by Mel Levine, M.D. (Simon & Schuster, 2004, \$26.00) Dr. Levine says that young people are unable to find a "good fit" between their minds and their career direction. He says they must master the four "Is" of personal growth: Inner direction (knowing yourself, your aims and aspirations); Interpretation (understanding the world); Instrumentation (developing skills); Interaction (working with others). This methodical approach, he says, should be applied to building a career.

Kidnapped: How Irresponsible Marketers are Stealing the Minds of Your Children by D. Acuff & R. Reihner (Dearborn Trade, available June 2005, \$18.95). Excellent.



Resources for Parents

www.FirstGov.gov Located here is governmental information from student loans to Social Security benefits to finding recreation activities, to getting a passport application. Written for specific audiences (kids, parents, seniors, etc.); fantastic opportunity to “get it done online,” including how to contact government officials. Español and other languages.

www.GirlPower.gov is a colorful, interactive site created by the Department of Health and Human Services to promote positive values for girls ages 9-13. The messages are targeted for younger and pre-adolescent girls and include fun ideas for wholesome indoor and outdoor activities. The site carries encouraging messages from astronaut Ellen Ochoa and singer Brandy.

www.healthinschools.org/sh/psychotropic.asp Recent increases in the use of psychotropic medications by children and adolescents, and limited information on the benefits of these therapies for children, and concerns about the adverse consequences of certain drugs have prompted a growing disquiet.

Chronic Obstructive Pulmonary Disease (COPD) is a term referring to a large group of lung diseases characterized by obstruction to airflow that interferes with normal breathing. Emphysema and chronic bronchitis are the most important conditions that compose COPD and they may co-exist. Primary symptoms of COPD include chronic cough, shortness of breath, a greater effort to breathe, increased mucus production, and frequent clearing of the throat. For the second annual educational partnership to raise public awareness about COPD and the importance of early diagnosis, the American Lung Association and ALTANA Pharma US have launched the “**Hungry for Air: Care. Share. Commit**” care packages designed to encourage smokers and friends and family member of smokers to become more knowledgeable of COPD and to seek diagnosis and treatment options that may help lead to longer, more active lives. Care packages are available by calling (877) COPD-INFO or by visiting **www.lungusa.org**. Yes, we know this is a newsletter about the health of early adolescents, but we care about parents—and we know if parents quit smoking they set a telling example for their pre-teens.

To help us understand and to suggest ways to prevent it, the **National Strategy For Suicide Prevention** has created a web site that combines the resources of suicide researchers, clinicians, and survivors. On it, you'll find information on understanding and helping the suicidal person; teen suicide; how to prevent suicide; the link between depression and suicide; and what to do if you are thinking about suicide. The site, **www.mentalhealth.org/suicideprevention**, offers a gateway to dozens of federal, state, and private organizations that have materials on suicide and its prevention.

Alice R. McCarthy, Ph.D., publisher of the *Healthy Newsletters* for the past 14 years is now writing a weekly column on adolescence for the *Observer Eccentric Newspapers*, a large chain of newspapers serving 775,000 customers in three states including Michigan. She has 11 years of experience writing parent-oriented columns for two major newspapers and has published 10.3 million copies of the *Healthy Newsletters*. To access her column, go to **www.hometownlife.com/Livonia/News.asp**, and then type “Alice R. McCarthy” in the “Keyword Search” box.

Research shows that more than four in 10 people who start drinking alcohol before age 15 eventually become dependent on it. As a result, the **National Institute on Alcohol Abuse and Alcoholism (NIAAA)** is taking steps to help middle school children (ages 11 to 13) learn skills to resist peer pressure to drink and to promote reasons not to drink.

A large part of NIAAA's campaign is a web site called *The Cool Spot*, which uses a comic book style called “anime” to present graphics and games that deliver important messages about the risks of underage drinking. Among the site's features:

- **Reality Check**—quizzes about drinking in the United States
- **Deep Digging**—why using alcohol to solve problems spells trouble
- **Peer Pressure**—animated scenes to help identify peer pressure “tricks”
- **Know Your No's**—various ways to say “no”

The site, at **www.thecoolspot.gov**, also has an interactive quiz that can be printed and used in class to gauge how effectively students have grasped the site's messages.

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room personnel can all help to stop it.

- **Talk about it.** Urge your pre-teen to talk to a counselor, religious leader, teacher, or friend—anyone who can give your adolescent the support he or she should have.

- **Use the buddy system.** Enlisting the help of friends or a group may help both your early adolescent and others stand up to bullies. The bully wants to be recognized and feel powerful. Therefore, a lot of bullying takes part in the presence of peers. Tell your 6th or 8th grader to make a plan to buddy up with a friend or two on the way to school, on the bus, in the hallways, or at lunch—

wherever he or she thinks there might be a bully.

If you've tried all of these methods and still feel the need to speak to the bully's parents, it's best to do so within the context of the school, where a school official, such as a counselor, can mediate. The bully should apologize, say researchers.

Check the health lessons at your school to determine if bullying is covered. If there are no lessons on conflict resolution or bullying prevention, share this column with the teacher in charge of teaching health.

Study your school's bullying prevention plan. If there is no plan, set up a committee to develop one. Be sure to include parents, community leaders, and school personnel.

With special thanks to **www.healthinschools.org/focus/2004/no2.htm**, and **www.kidshealth.org**.

We want to hear from you!

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The goal of this newsletter is to help parents and caregivers teach children to make health decisions and to support the teaching of health in our nation's schools. A coordinated school health program includes health education. Please contact your child's teacher or principal with your questions.

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