

## Overscheduled Children?

From birth through high school, it seems that many children today have a full calendar every day of the week. And for families with two or more children, and parents who work outside the home, it can get pretty hectic trying to get everyone to the right place at the right time.

It's hectic for the parents. But what about the kids?

University of Michigan child psychologist Michelle Kees, PhD, a clinical assistant professor of psychiatry at the U-M Medical School who counsels families and children, says there's such a thing as too much, and every child's "too much" is different.

So how can you tell when your child is overstressed because he or she is overscheduled? The signs aren't much different from those seen in adults, Kees says.

"Children who are overscheduled have a higher incidence of anxiety, especially performance anxiety and wondering how they're doing in a certain activity, or striving for perfection or overachievement. We often see that these children are showing some signs of depression, such as withdrawal from friends and family, and feeling badly about themselves when they don't quite measure up," she says.

"Being overscheduled and overstressed can also have an impact on a child's basic functions, things like sleep interruptions and changes in eating patterns," she adds. "We also see some children start to show signs like headaches, stomachaches, and not wanting to go to school or not participating in activities."

Kees is quick to note that non-school activities are great for children, helping them explore new talents and providing structure to their lives. But the key, she says, is moderation.

"Some activities, if kept in balance, are very beneficial for learning social skills, for learning a hobby, or developing a



passion or an interest," she says.

### Tips for Parents on Avoiding Overscheduling Kids and Teens:

- Activities such as sports, arts, music, clubs and Girl or Boy Scouts can be great additions to a child's life, and provide enjoyment while developing skills and talents. The numbers of these activities available has increased in recent years, and experts have noticed an increased emphasis by parents on enrolling their

children in multiple activities.

- In addition to activities, child psychologists say it's important for families to spend time together, and for children to be allowed to play and explore, without structured schedules.
- The definition of overscheduling, and the stress that comes with it, varies from child to child. Typically, children who take part in one or two scheduled activities per day or several per week are considered to have heavy schedules. Parents should routinely assess whether a child's schedule is too much for the child, and ask what the child is getting out of an activity.
- Signs of stress that overscheduled kids may exhibit include headaches and stomachaches, withdrawal or reluctance to take part in activities, and changes in sleep or eating patterns. Any sharp change or decline in behavior or schoolwork should prompt parents to seek help.
- Stress can be a "trigger" that sets off episodes of depression or anxiety in vulnerable children and teens; symptoms of depression include irritability, hopelessness, loss of pleasure in activities that a child once enjoyed, changes in sleep and appetite, reduced energy and social interactions, and a decline in performance at school.

# Pointers for Parents — Honesty: The Anti-Drug

Picture this: You're driving your child home one afternoon and she turns to you and asks, "Mom, did you ever do drugs when you were a kid?" Or, you're helping your child with homework and he asks, "Dad, did you smoke pot when you were in high school?"

These are questions many parents hope to avoid. Unless the answer is an unequivocal "no," it may be difficult to know what to say.

## How honest should you be?

Behavioral scientist Tony Biglan, PhD, recommends an honest answer when a child asks about your past. Otherwise, you risk losing credibility with your kids. This doesn't mean you should recount every detail of your high school or college years. Rather, ask clarifying questions to make sure you understand exactly what your child is asking before you answer.

**What if your child thinks that since you admitted to using drugs and you've grown up just fine it is OK for her to do drugs, too?** The fact is, we all want what's best for our children.



Today, we have more information about the negative consequences of drug use, and we understand the hazards of drugs better than we did when we were kids.

We can also draw on real-life examples of friends who had troubles as a result of drug use, such as the family member who was an addict, the teen who used marijuana for years and lost interest in school, or the neighbor who caused a fatal car crash while high.

What if you are afraid of sounding like a hypocrite? "Do as I say, not as I do" has never been a good method of parenting. You should emphasize that this discussion is about your child's

future, and not about your past. Even if you made mistakes in the past, be clear you do not want your child to repeat them.

Most importantly, remember that when your child asks you about your past, he or she has just opened the door for an ongoing dialogue about drugs, alcohol, tobacco, or other forces that could cause harm.

If you would like more tips on communication and parenting, visit [www.theantidrug.com](http://www.theantidrug.com), (a website designed to help parents learn how to talk to their children about staying clean, safe, and drug-free).

**HELPING  
HAND**

v1716

Copyright© MMVI  
Troy, Michigan

Performance Resource Press, Inc.  
1270 Rankin Dr., Suite F  
Troy, Michigan 48083-2843  
248-588-7733  
[www.PROnline.net](http://www.PROnline.net)

Editor: Erin Bell

Graphic Designer: Diane Chatterson

Please send suggestions or contributions to the editor at the above address or through your student assistance program.

HELPING HAND is published monthly (September-May) to provide timely information to readers; its contents are not intended as advice for individual problems. Editorial material is to be used at the discretion of the reader and does not imply endorsement by the owner, publisher, editor, or distributors.

## DEA Says Misuse of Cough Syrup/Soft Drink Mix on Rise

Mixing cough syrup and soft drinks or power drinks has become a popular to get high in some parts of the US, the Drug Enforcement Administration (DEA) says.

USA Today reported that users mix prescription cough suppressants and codeine with soda or sports drinks, sometimes adding a Jolly Rancher candy and ice. The mix causes euphoria and impairs motor skills.

The cough-medicine cocktails, known as "Lean," "Sizzurp," "Purple Drank," or other nicknames, are especially popular in the region.

A 2004 survey found that 8.3 percent of Texas secondary-school students reported using codeine-based cough syrups to get high. Officials from Texas to Florida report misuse of the prescription medication. The syrup often is obtained from online pharmacies.

Cough-syrup use has been popularized in rap songs, including mixes by Houston disc-jockey DJ Screw (who died of a cocaine overdose in 2000) and songs by Three 6 Mafia ("Sippin' on the Syrup").

# Children With OCD Are Frequent Targets of Bullies

Children with obsessive-compulsive disorder are three times more likely to be bullied than other children, and the name-slashing could cause symptoms of OCD to worsen, University of Florida researchers have found.

"One of the things we have noticed working with many kids with OCD is that peer relations are extremely impaired," said Eric Storch, PhD, a UF assistant professor of psychiatry and pediatrics and lead author of the study. "Kids target kids who are different. Kids with OCD sometimes exhibit behaviors that peers simply don't understand."

More than one-quarter of the children with OCD who researchers studied reported chronic bullying as a problem, according to findings described in the September issue of the *Journal of Clinical Child and Adolescent Psychology*.

By comparison, only 9% of kids in the two other groups researchers studied — healthy kids without medical or mental conditions and children with type 1 diabetes — reported serious problems with bullies.

Nearly all children are bullied at least once in their lives. But chronic bullying equates to about one taunt per day, ranging from kicking or hitting to name-calling or excluding children from activities in school.

"The kids with OCD are really experiencing higher rates of peer problems than other kids," Storch said. "We're not saying one causes the other, but there is a positive relationship between [OCD and bullying]."

About one in 100 children struggle with OCD, an anxiety disorder that leads people to engage in rituals such as hand washing to drive away obsessive thoughts about germs or other worries. Rituals often become so involved that they interfere with a person's ability to function, according to the National Institute of Mental Health.

"Their day becomes filled with repeating behaviors," Storch said. "For a lot of kids, peers don't understand what is going on. They are isolated. They are ostracized because it doesn't make sense why they are washing their hands. Why they keep repeating questions."

The researchers also found links between bullying and other problems, namely loneliness and depression, in children with OCD, Storch said. Kids were also apt to internalize bullies' negative comments, telling themselves, "No one will ever love me," or "Maybe I am a loser," Storch said.

# Inhalants at Home and School



March marks National Inhalants & Poisons Awareness Week. Many parents don't think to monitor the levels of everyday household products, but inhalant use has grown in popularity among teens. These substances are legal, inexpensive, accessible and a quick high. In fact, according to the National Survey on Drug Use and Health, inhalants are the third most abused substance among 14-to-15 year olds.

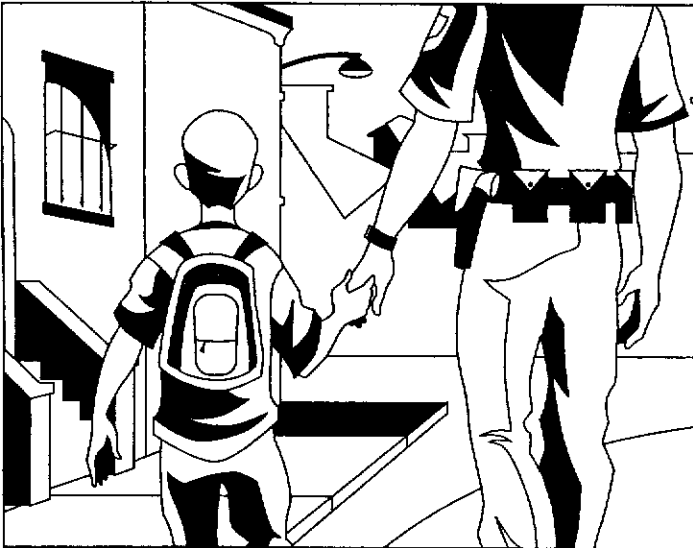
Do you know what qualifies as an inhalant? Items such as glue, nail polish remover, spray paints and air fresheners are in the bathroom cabinets, under the kitchen sink and elsewhere throughout your home and even at school. Inhalant use is like playing Russian roulette. One "huffing" episode may result in some nausea while a second episode may be deadly. It's important, as a parent, that you are informed about inhalants so you can talk to your teen about the dangers.

Following are some specific things you can do to keep your teen safe from inhalants:

- **MONITOR THE LEVELS** of everyday household products. Next time you're cleaning, take stock of all solvents, gases and nitrites in your home, such as paint, cooking spray and whipping cream aerosols. It can be as easy as using an ink pen to mark the bottle.
- **LEARN THE WARNING SIGNS** and health effects. Inhalants are toxic, volatile substances. There are telltale signs, such as chemical odors on breath and clothes, nosebleeds, slurred speech and disorientation that can alert you if your teen is using.
- **TALK TO TEENS** about the health effects. Communication is the best form of prevention. Learn about the long- and short-term effects of inhalant use and impress upon teens how dangerous these substances are to their health.

# What Should a Child Do If a Weapon Is Encountered at School?

As all of us struggle to find answers to the horrifying new streak of violence plaguing our schools, many children are confused, uncertain, and scared. Here's what parents and educators need to do. Eminent psychologist and author Dr. Ken Druck, an authority on school violence says: be prepared. Here are Dr. Druck's "Five Dos and Don'ts":



1. **DON'T** do anything to put yourself in danger, such as taking matters into your own hands. **DO** go to a phone or to someone in authority ASAP. Be specific and report the details.
2. **DON'T** go around telling your friends. Word may get back to the person carrying the weapon that you have been talking about her. **DO** talk about it only to the authorities. They will know how to handle the situation.
3. **DON'T** ignore, minimize, or deny the danger of someone having a weapon. "It's OK, he's not going to hurt anyone," is a cop-out. **DO** take responsibility for making your school and neighborhood safer by taking safe action.
4. **DON'T** antagonize the person carrying the weapon, or try to take it away from him. **DO** try to calm down and reason with the person carrying the weapon, especially if there's no escape and you or another are at risk.
5. **DON'T** touch a weapon if you come across one, but don't leave a weapon unattended **DO** send someone for help, if you see or discover an unattended weapon.

## For more information, contact:

For more information on Chippewa Valley Schools' Student Assistance (drug and violence prevention programming and/or the ChippewaValley Coalition for Youth and Families, please contact 723-2360.