

# Street Smart: What Children Need to Know about Personal Safety and Asserting Themselves

BY RICHARD MEYER

What should you do if you learn that your child is being bullied at school? What should the school do? How do you get your child to talk to you about these problems? How can you help a school-age kid have the “street smarts” to negotiate the city safely? How can you make sure your child has the tools to be assertive and deal with behavior that makes him or her feel uncomfortable? These were some of the topics covered by four experts at a lively panel discussion on October 18 called “Street Smart: What Children Need to Know about Personal Safety and Asserting Themselves,” co-sponsored by NYC-Parents in Action, Resources for Children with Special Needs, and KiDS of NYU Foundation.

The panel included Dr. Jess Shatkin, Director of Education and Training at the NYU Child Study Center and Assistant Professor of Child and Adolescent Psychiatry at the NYU School of Medicine; Meriann Taylor, M.Div., Director of Guidance and Health Education Coordinator at the Spence School; Donna Chaiet, the founder and president of Prepare, Inc.; and Dr. Alan B. Wachtel, Clinical Associate Professor of Psychiatry at NYU School of Medicine and founder and director of Familyhealth Associates.

With a son and daughter in elementary school, I want to equip my kids to be safe in the world, and especially when they start to navigate New York City on their own. Also, as a father, I can imagine few situations that would upset me more than the bullying of my child by another. Judging from the audience ques-

tions, I’m not alone. Fortunately, the panelists offered valuable advice and guidance.

Bullying is a widespread problem, more common than many of us might think. Dr. Shatkin said that although research in this area is limited, studies have shown that 30% of kids from primary school to high school say they have been bullied. In about 80% of those situations, other people saw the bullying and could have intervened but didn’t.

What exactly is bullying? While many people think of it as one boy beating up another at the playground, Dr. Shatkin said bullying behavior is much broader than that. Name-calling, sexual harassment, “flaming” on the Internet, and exclusion and ridicule by cliques also victimize kids on the receiving end. Bullies generally have a range of problems, including anger and family difficulties, that drive them to target a victim. The bullies’ victims, according to Dr. Shatkin, are kids who “don’t have the peer support to help them resist, and are not part of a group the bully wouldn’t interfere with.”

Although some kids engage in bullying behavior at school, Ms. Taylor said that by 5th grade students are savvy enough not to act out in front of teachers. Therefore, teachers and administrators have to keep their eyes and ears open and watch what’s happening when the children don’t think they are being observed. Ms. Taylor stressed that kids need to have “a responsible adult they can trust to reach out to” at their school so that they can be safe and not suffer bullying in silence. Parents and the school need to work together when a student is being bullied, but

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# PRESIDENT'S Letter

## Winter 2007

Many of the things I've learned about parenting I've learned with NYC-Parents in Action. I started attending facilitated discussion groups when my older daughter was in kindergarten, and we were making the transition from our downtown neighborhood pre-school to an uptown ongoing school. Our schedule was hectic, with after school activities and play dates, a faster pace for holiday celebrations, class trips, book fairs and birthday parties, all punctuated by dashes to the pediatrician with the inevitable childhood illnesses. And the three-mile commute to school made it all feel like a marathon— for kindergarten!

I don't remember what we discussed in the earliest facilitated groups—bedtimes, play dates, videos— but I was amazed at the range of parents' views and concerns. In the group I heard from parents whom I didn't know personally, and their diverse opinions provided good information.

When my older daughter was in second grade and the younger in kindergarten, the compelling topic at discussion groups was cliques and “mean girls.” Long before psychologists and movie directors focused on girls' aggression, we had experience in the trenches. In discussion groups, views ranged widely. Some parents were unaware of the behavior; mothers of girls being excluded or bullied were upset and concerned. There were also mothers who encouraged their daughters' exclusivity and aggressiveness—one believed that her daughter's toughness would prove useful in the work world. I was encouraged by the comments of a mother with older daughters who remarked that the behavior should diminish as the girls matured.

A few years later I began to attend seminars to report on them for the Parents in Action newsletter. At a lecture by Dr. Mel Levine on learning, I had a revelation about different learning styles and the importance of the right school match. My children had made the transition to middle school, and the marathon felt like a triathlon, with more homework, choral singing, piano lessons and social calendars that included Bat and Bar Mitzvahs. When my daughters were prepar-



ing for high school, we put Dr. Levine's advice to good use and applied to schools that would be a better fit with their learning styles.

“Previewing,” a skill that Dr. Levine discussed in another seminar, is the ability to think ahead to predict an outcome. In my own parental obstacle course of minutiae, previewing fell by the wayside. I was stunned the day I realized that I would have to let my children out of the house by themselves. Alone. They were going to have to make decisions, advocate for themselves, define and pursue their interests and go away to college—all on their own.

I congratulate parents who grasp earlier that the ultimate goal of parenting is independence. I had to back-pedal to equip my daughters with skills of self-reliance—from navigating transportation to handling allowance and the many responsibilities that come with autonomy. They learned some lessons the hard way.

At my first Teen Scene, I saw why helping teens to develop independence in decision-making is crucial when they shift their focus from family to their peer group. The high school panelists were frank about the pressure to experiment with alcohol, drugs and sex. While they were all articulate, accomplished kids, they varied in physical maturity and probably in judgment. In other seminars, I heard the opinions of experts and I became convinced that working with my children—parenting them—would help avoid early experimentation.

Programs like these are coming up in the next months: PIA facilitated discussion groups are booked in record numbers, and I hope you will have the opportunity to attend one. Our annual Teen Scene will be on February 5, 2007, at Trinity School, and Dr. Mel Levine will give a lecture on April 26, 2007, at the 92nd Street Y. The mission of NYC-Parents in Action is Effective Parenting is Substance Abuse Prevention. We invite parents to be involved, informed, and connected to one another. We are all learning as we go, and we hope you'll take advantage of the resources we provide to help you along the way. ●

# Homework for Parents: Helping Kids Help Themselves

BY MAUREEN SHERRY KLINSKY

It can be ever so tempting to do a child's homework for him, but it's not helpful. What is? This fall, Parents in Action joined the JCC in Manhattan to co-sponsor a panel of experts to tackle this subject. With parent educator Laurie Gerber moderating, panelists included Milton Sipp, the Head of Middle School at Riverdale Country School; Mary Ellen Kail, a learning specialist at Columbia Grammar and Prep School; Donna Goldberg, organizational consultant and author of *The Organized Student* (Simon & Schuster, 2005); Patti Sayre, a parenting expert and therapist; Theresa Peduto, the director of SPINS (the Students' and Parents' Information Network Support), a non-profit for families of students with learning differences; and Dr. Paul Yellin, a pediatrician and the National Director for Clinical Programs for All Kinds of Minds. The experts advised parents to shift the control and success of homework to the students.

## Homework and why we have it

We know that homework reinforces what a child learns in school, but Mr. Sipp believes it also promotes an important life skill—working independently. The experts agreed that homework isn't meaningful if parents are doing it. If a child doesn't understand the homework, it is better to have him write his questions on the page rather than hand in his parents' answers. Ms. Kail explained that this will let the teacher do his job and reinforce that home is a safe place to fail.

## How involved should parents be in homework?

Limiting parental involvement accompanies the notion that homework builds independent work skills. Ms. Goldberg says that different kids and grade levels need different amounts of monitoring. She likes to think of parents as homework “consultants” not “doers.” For example, you can encourage your child to begin her homework with the toughest subject first.

Ms. Sayre sees parents unknowingly throwing off negative feedback to their children. A family's attitude toward homework is important. When a parent is too

involved in the homework process, Ms. Sayre encourages the parent to take a step back. A child may learn more if the parent resists the temptation to save him from failure. Parents need to be patient. It can take months to break a bad habit.

Mr. Sipp sees children improving by being put in situations where they are allowed to make mistakes. If a child is helped too much, the child can become paralyzed with the fear of making mistakes. He recommends giving homework a non-pressured tone and asking what resources are available at school.

## Organize!

Ms. Kail pointed out that homework routines are laid out in the early years, and bad tendencies can sabotage later years. The panel stressed the importance of an organized work space. Have all supplies ready and shut off any electronics not needed to complete the assignment. Many students use a planner starting in lower school. In the beginning, help your child assess how long each assignment will take. Be involved in supporting the process, not content, of homework.

Ms. Goldberg noted that today's digital clocks tell a moment in time and don't convey the passage of time. She recommends buying an old fashioned analog clock—watching the hands go around teaches children how long things take. Another tip from Ms. Goldberg: fill a tackle box with supplies necessary for completing homework. The box can travel to any “homework spot” in the home and keeps kids on task.

## Active study skills

Parents can also encourage an active learning method. Understanding your child's learning style—and having your child understand it—is key. Visual learners will rely on observation, while auditory learners like to hear information spoken. A kinesthetic learner will succeed by working with manipulatives.

Regardless of learning style, children must take written exams. Ms. Kail says that written tests require written studying. Students can make their own practice tests or redo old homework assignments and

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Ms. Taylor said they shouldn't enter the situation too soon. Instead, they should empower the child to solve the problem and be there to help him or her work through to a solution.

It's very important, Ms. Taylor said, for parents to get to know other parents at the school, plugging into a sort of informal support network. In addition to helping parents diffuse potential problems, establishing ongoing relationships can make it much easier if your child is being bullied and you have to talk to the parent of the kid who is doing the bullying.

**...parents need to engage with their kids and listen to what's on their minds on an ongoing basis, not just when there are problems.**

Dr. Wachtel stressed how important it is for children to feel they can talk to their parents about their problems, and to know that their parents will help them work towards solutions. If you've established a long-term, trusting relationship with your children, they will be more likely to come to you if they're being bullied at school. To build that relationship, said Dr. Wachtel, parents need to engage with their kids and listen to what's on their minds on an ongoing basis, not just when there are problems. Dr. Wachtel said that despite our busy lives we have to make that kind of time with our kids every day, even if it's just a phone conversation, so that the children will feel comfortable discussing problems when they arise.

Dr. Wachtel advised if a child tells a parent that he or she is being bullied, the parent should listen non-judgmentally and work with the child to come up with a way of handling the problem. Children need to have an ongoing relationship of trust with their parents and know that the parents won't judge them. If children know they have the parents' support, said Dr. Wachtel, "they will have a sense of power

and retain self-esteem because they have their family behind them."

If your child is being bullied, should you call the bully's parent? Making this kind of call isn't easy. The child of the parent you're calling is making your kid's life miserable, which of course makes you angry and upset; Dr. Shatkin says parents sometimes even take the bullying of their offspring as a personal affront. The parent receiving the call may be distressed to learn that his or her child is a bully. Having established ongoing relationships with the other parents at school can make it easier to discuss the problem with them, said Ms. Taylor, but under any circumstances it is a difficult conversation. It can also be tricky because, as Dr. Wachtel pointed out, the parent you're calling might be a bully himself—a not uncommon contributing factor to a child's bullying behavior—and the call might lead the bullying parent to come down hard on the bullying child, who in turn might then do even worse things to the victim.

Ms. Chalet and Ms. Taylor stressed that if you make the call, you have to view it as an avenue to open a dialogue with the other parent to arrive jointly at a solution. That means describing the situation calmly and being careful not to come across as emotional or blaming. Because this is such an emotionally charged situation, Ms. Taylor and Ms. Chalet cautioned that you have to know exactly what you are going to say before making the call, even to the point of writing out an outline. Also, because the school needs to be involved in solving the problem, Dr. Wachtel and Dr. Shatkin both emphasized the importance of letting the school know what's up before you make the call.

If children see another being bullied, what should they do? Should they just watch without intervening, as happens in the majority of bullying incidents? Should they try directly to stop the bully? Dr. Wachtel's advice to parents is to tell their kids to seek help from a responsible adult if they see a bullying incident. Dr. Shatkin underscored the importance of teaching social responsibility at school and at home,

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which will lead children to view themselves as part of a larger community and to want to stop the victimization of another child when they see it. To make this happen, said Ms. Chaiet, children in a school community have to be given the courage and skills to act for themselves and for others.

The panel also spoke about “street smarts”—the kinds of precautions kids need to take as they go around the city. Although Dr. Shatkin lamented that “we strip away our kids’ childhood too early,” the panelists all agreed on the importance of giving our children practical advice on how to be safe. Children need to learn skills to help them deal with situations that make them feel threatened or uncomfortable, said Ms. Chaiet. These situations can involve physical threats or attacks, but also include Internet seduction and even having someone sit too close to you on a park bench when nearby benches are empty. What they all have in common is what Ms. Chaiet called “boundary failure”: someone crosses a boundary—physical or emotional—in a way that makes you feel uncomfortable. Whatever discomfort adults feel in a threatening situation, said Ms. Chaiet, “multiply it by 100 for kids.” While Ms. Chaiet flagged gender differences in the way boys and girls deal with threatening behavior, she said all children must be taught how to be assertive and to act quickly and decisively if necessary.

**Children need to learn skills to help them deal with situations that make them feel threatened or uncomfortable.**

One surprising fact about street safety was that children are safest in pairs, not threes or more. Another notable addition to the advice “don’t talk to strangers” is “don’t communicate” with strangers—for example, no responding to questions even by nodding your head to answer “yes” or “no”. Older children often take taxis in New York City, but Ms. Taylor said it’s important to teach them that taxis are not always safe

places. Children, she said, should look at and talk to the driver before getting in the cab; if there’s anything about the driver that makes them feel uncomfortable, they should not take that cab. Children should tell cab drivers to stay on city streets and not take the FDR Drive or the West Side Highway, where there are few traffic lights and drivers can go at high speeds. This makes it harder to leave the cab if the driver does anything that feels dangerous or threatening, while the stop-and-go traffic on city streets affords frequent opportunities to get out of the cab if necessary. (There is a comprehensive list of “Awareness Tips” and other useful information on the web site of Ms. Chaiet’s organization, [www.prepareinc.com](http://www.prepareinc.com).)

The audience came away from the panel discussion with helpful guidelines for dealing with bullying in all its forms and with useful advice on helping our children develop “street smarts.” Parents need to maintain constant open lines of communication with their children and listen non-judgmentally. They should help them come up with strategies for asserting themselves and for putting a stop to being bullied. The parent of a kid who’s being bullied should work with the other child’s parent to end the behavior. Schools need to be vigilant and involved, working with parents to prevent bullying and giving their students access to responsible adults with whom they can feel comfortable discussing problems. Bullying will unfortunately never be eliminated, just as a city like New York will always present threatening situations, but we can help our children deal with bullying and ward off some of the potential dangers they may have to confront while learning independence in the city. ●

## Teen Scene XXI

Monday, February 5, 2007

6-8pm

at The Trinity School

101 West 91st Street

# When Too Much is Not Enough

Why are privileged kids suffering?  
Two new books offer insight.

BY CAROL SCHATZ PAPPER

We all know money can't buy happiness. But shouldn't it at least provide a happier childhood? Disturbing new research on affluent kids says not always.

Two topical new books, *The Price of Privilege: How Parental Pressure and Material Advantage Are Creating a Generation of Disconnected and Unhappy Kids* (HarperCollins, 2006) by Madeline Levine, and *The Overachievers: The Secret Lives of Driven Kids* (Hyperion, 2006) by Alexandra Robbins deserve a good look from parents and educators. Dr. Levine's book focuses on why affluent children as a group are trending towards a growing number of serious emotional problems; Ms. Robbins' book casts a critical eye on our competitive college-obsessed educational environment and shows how deeply and negatively it affects our kids.

Take a deep breath: the news is unsettling. "Depression, anxiety disorders and substance abuse are all hitting kids from comfortable homes at a rate clearly 'in excess of normal expectancy,'" writes Dr. Levine, "with as many as 30 to 40 percent of twelve-to-eighteen-year-olds from affluent homes experiencing troubling psychological symptoms." This, she is not afraid to say, is an epidemic. High risk for depression and anxiety among affluent girls begins as early as age twelve; private school juniors and seniors are two to five times more likely than the general school population to break rules or have serious problems.

Psychologists have only recently turned their attention to affluent children, and their findings are startling. Children of privilege not only have more emotional problems than the average child, but they experience them at rates equal to, or perhaps greater than, children of poverty. Instead of protecting, privilege hurts. And it can hurt for a lifetime: early drug and

alcohol use wreaks havoc on the developing adolescent brain and foretells an ongoing battle with addiction. Adolescent depression elevates risk of early mortality from suicide, anorexia, overdose or car accident.

Dr. Levine, a longtime clinical psychologist, decided to write her book after she saw more and more adolescent patients who looked "great on paper" but were hiding depression, illegal drug use and emotional disorders like cutting and bulimia. Her practice is "increasingly filled by teenagers whose problems seem out of proportion to their life circumstances." While she discovers that many kids are "depressed, anxious, and angry," their parents are often surprised by their child's request to enter therapy. Some even dismiss or ignore substance abuse if academic and athletic performance is on track.

"America's newly identified at-risk group is preteens and teens from affluent, well-educated families...."

The latest research shows it is a serious mistake for society to trivialize or ignore the problems of troubled rich kids. Citing a recent study led by Dr. Suniya Luthar of Columbia University's Teachers College, Dr. Levine writes: "America's newly identified at-risk group is preteens and teens from affluent, well-educated families. In spite of their economic and social advantages, they experience among the highest rates of depression, substance abuse, anxiety disorders, somatic complaints and unhappiness of any group of children in this country."

What's up? For one thing, pressure. Pressure to look good, excel in school, play competitive sports, gain admission to a status college, and live up to perfectionist values and expectations. Secondly, physical and emotional isolation from parents, resulting in what Dr. Levine calls a "toxic brew of pressure and isolation." "The finding that, as a group, affluent teens are less likely to feel close to their parents than children in

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## Understanding and Protecting Against HPV

BY ANN WOZENCRAFT WILLEY

On June 8, 2006, the Food and Drug Administration (FDA) licensed the first vaccine developed to prevent cervical cancer and other diseases in females caused by certain types of genital human papillomavirus (HPV). The vaccine, marketed by Merck under the trade name of Gardasil®, protects against the four types of HPV that are responsible for 70% of cervical cancers and 90% of genital warts.

On June 29, 2006, the Advisory Committee on Immunization Practices (ACIP), which is a federal committee that advises the Department of Health and Human Services on vaccines in general, voted to recommend giving this vaccine to girls and women ages nine to 26.

This prophylactic vaccine, made from non-infectious HPV-like particles (VLP), offers a promising new approach to the prevention of HPV. Because it does not work for all genital HPV types, sexually-active people must also rely on other prevention strategies.

NYC-PIA newsletter writer Ann Wozencraft Willey talked to Dr. Bruce Polsky about the basics of HPV, the breakthrough of this new vaccine, and the importance of teaching our children to be careful, honest and respectful. Dr. Polsky is a virologist who specializes in infectious diseases. He is Vice Chairman of the Department of Medicine and Chief of the Division of Infectious Diseases at St. Luke's-Roosevelt Hospital Center in New York City. He is also the parent of a teenager.

### Q What is genital HPV infection?

A Genital HPV infection is a sexually-transmitted disease (STD) that is caused by human papillomavirus (HPV). HPV is the name of a group of viruses that includes more than 100 different strains or types. More than 30 of these viruses are sexually transmitted, and they can infect the genital area of men and women, including the skin and internal linings. Most people who become infected with HPV will not have any symptoms and will clear the infection on their own. Some of these viruses are called “high-risk” types, and may cause cancer. Others are called “low-risk” types, and may cause mild Pap test abnormalities or genital warts.

### Q How do you get HPV?

A You get HPV through genital contact and intercourse. Most HPV infections have no signs or symptoms, so most women don't know they are infected until they get an abnormal Pap Test, which can detect pre-cancerous and cancerous cells on the cervix.

### Q How common is HPV?

A HPV is a highly prevalent infection and the most common sexually transmitted infection in the United States. More than 20 million men and women are currently infected with genital HPV infection, with 6 million more infected each year. At least 50 percent of sexually active men and women acquire genital HPV infection at some point in their lives. By age 50, 80 percent of all women will have been infected with HPV. Approximately 10,000 new cases of cervical cancer are diagnosed every year, with around 3,700 deaths.

### Q Why is this vaccine important?

A It's a major medical breakthrough. If you can vaccinate women against the major cancer-causing HPV strains at an age before they are exposed, the potential health benefit is enormous. The rationale is to get girls vaccinated before they become sexually active. What science has done is take four of the most dangerous strains, including the two most associated with cervical cancer, and make a vaccine that protects women. Cervical cancer, within a generation, should become a thing of historical interest.

### Q Who should get the vaccine?

A The HPV vaccine is recommended for 11- to 12-year-old girls, but can be administered to girls as young as nine. The vaccine is also recommended for young women ages 13 to 26 and ideally should be administered before the onset of sexual activity. Currently, there is no test available for clinical use to determine whether a female has had any or all of the four HPV types in the vaccine, and there are no efficacy data available to support use of HPV vaccine in males.

### Q Does the vaccine work?

A The HPV vaccine has been tested in more than 11,000 females, ages nine to 26, in clinical trials in many countries around the world, including the United States. The

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effectiveness of this vaccine has mainly been studied in young women between the ages of 16 and 26 who had not been exposed to any of the four HPV types in the vaccine. It's worth pointing out that this vaccine has demonstrated 100% efficacy in preventing cervical pre-cancers caused by the targeted HPV types, and nearly 100% efficacy in preventing vulva and vaginal pre-cancers and genital warts caused by the targeted HPV types. However, if a girl or woman is already infected with one of the HPV types in the vaccine, the vaccine will not prevent disease from that type. The most important thing is that it's virtually 100% protective of cervical cancer caused by these major serotypes. It's a huge breakthrough.

### Q Does the vaccine have side effects?

A The main side effect is injection site pain, but otherwise, the studies found that the vaccine was safe and caused no major side effects.

### Q How is the vaccine administered?

A The vaccine is given in a series of three injections over a six-month period. The second and third doses should be given two and six months after the first dose. Pediatricians and adolescent doctors should be offering this vaccine to their female patients as a standard practice, ideally in the same visit as other age-appropriate vaccines. It's unclear how long the vaccine provides protection, but current studies show that it is effective for at least five years.

### Q How should parents discuss this issue with their children?

A We need to foster open and honest communication with our children and create an environment where there is a realization that certain things will happen, including sex. We have to teach our kids how to protect themselves. I think this is especially important for girls, who are particularly vulnerable. Boys often drive the sexual agenda. For parents of sexually active girls, it's important to teach them how to reduce their risks. If they are going to have sexual intercourse, they should insist on a condom. They should also be taught that oral sex is sex. It's very important to discuss the sexual practices that kids are engaging in and to understand what your child believes is sex and what puts him or her at risk. The message is that these are dangers that you will be exposed to in the world, even if you are with a caring sexual partner.

### Q Is it important to discuss drug and alcohol use when you are discussing sex?

A Kids need to understand the role of drugs and alcohol in sexual activities. Kids are not in touch with the effect that drugs and alcohol have on their bodies and their brains. The brain is still under construction in adolescence.

### Q Does the sex discussion change depending on whether you are talking to your daughter or to your son?

A It's very important for the parents of boys to instill respect for girls in all matters, but especially when it comes to sex. Believe it or not – and I am still somewhat shocked when I hear it – there is still a prevalent feeling among some parents of boys that “boys will be boys” and that it is not their responsibility to educate them on sexual matters. That creates responsibility in the parents of girls to protect their girls and to educate them on how to protect themselves. Parents of both boys and girls should stress caring and respectful relationships.

### Q When is the best time to begin this discussion?

A I always find it is best when the subject comes up naturally. Our kids are exposed to such highly sexualized images in the media—on television, in their music, online. Once kids hit middle school, you lose control very quickly unless you pay attention. There is good data that constant bombardment of sexually suggestive images does create a response in these kids that moves them along more quickly. They need to be educated and prepared. ●

For more information on HPV, please see the Centers for Disease Prevention and Control web site at [www.cdc.gov](http://www.cdc.gov).

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.

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poverty—less likely than any other group of teens for that matter—surprised me,” writes Dr. Levine.

High expectations are not in themselves bad, says Levine, but turn deadly when love is experienced as conditional on success. Instead of promoting a sense of achievement and competency, parents who demand perfection may activate feelings of shame and hopelessness in their children.

Helicopter parents—intrusive parents who micromanage kids and protect them from healthy setbacks—fare no better. Ever-present in their children’s lives, they transmit anxiety without connecting with their children. As 15-year-old Kyle tells Dr. Levine, “my mom is everywhere and nowhere at the same time.” By overprotecting, says Dr. Levine, helicopter parents also delay maturation because children grow from handling setbacks and disappointments.

*Privilege’s* portraits of affluent, high-achieving teens in serious distress raise difficult issues, but the author is empathetic in her approach and offers a wealth of parenting insights. The goal, from the early years on, is to help a child develop an authentic self and what she calls an “internal home” of “self-liking, self-acceptance and self-management.” Parents who set limits, model self-control and are clear about the value of dealing with frustration and delaying gratification are guiding their children towards self-management. The ability to self-monitor and set internal standards, writes Dr. Levine, “is a great predictor of psychological adjustment and academic achievement.”

In other words, affluent parents must resist the temptation to soothe an unhappy child with the latest cell phone or designer jeans. They are not helping their adolescent in the long run by calling school when a teacher is tough or a coach disappoints. Dr. Levine, wants all parents to monitor adolescents and spend more time with them. She also advises them to examine whether their own feelings of dissatisfaction are sabotaging their parenting.

Alexandra Robbins’s book, *The Overachievers*, provides an insider’s view of perfectionism run amok. By following high-achievers in their senior year at Walt Whitman High School in Bethesda, Maryland, Ms. Robbins shows how adolescents can get separated from their authentic selves and wrapped up in parental values while experiencing disabling stress. Along the way, Ms. Robbins reports on grim national trends of teenage suicide, cheating, high-stakes testing, drug use, and sports overuse injuries.

**High expectations are not in themselves bad...but turn deadly when love is experienced as conditional on success.**

Her book urges readers to stop the insanity. “This is not just a book about high school,” states Ms. Robbins. “This is a book about how a culture of overachievement has changed the school experience so drastically in even the last ten years that it has startlingly altered what it means to be a student today...This is a book about pressure—about how the pressure on students, parents, teachers and graduates has whirled out of control and will continue to do so exponentially unless there is a massive change of attitude and educational policies...Whitman could be any competitive school, public or private, almost anywhere in the country.”

While her book is set at Whitman, Ms. Robbins interviews high-achieving students across the country and finds the same high expectations. She also gains access to the lower school admissions process at the Trinity School in Manhattan to find out how decisions are made for coveted kindergarten spots. “But how does one evaluate a toddler?” she asks, mystified.

Not surprisingly, Ms. Robbins discovers that Trinity’s hard-working admissions staff is caring and the evaluation process carefully considered. In the end, however, the school’s family-oriented mission favors sibling, legacy and staff families. Remaining slots are

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# Too Perfect? Nutrition, Body Image and Disordered Eating

BY SALLY SHERWOOD

Don't look now, but the children are watching, listening and learning as we rave about the few pounds we've lost, gloat over a newly sculpted frame, or curse a slightly expanded post-holiday waistline. These not-so-subtle messages have helped spawn a nation of eating disorders among 36 million people. According to a 2005 study published by the National Eating Disorders Association, Anorexia Nervosa alone was a leading cause of reported death among females between the ages of 15 and 24, accounting for more premature deaths than any other mental illness. Sadly, the shame, secretiveness and emotionally charged nature of the condition can contribute to a dangerous delay in treatment.

**Given our cultural obsession with body image, it's not surprising that children can develop disordered eating patterns early in life.**

On November 7, 2006, Parents in Action and the KiDS of NYU Foundation hosted a panel of professionals who offered insight, compassion and hope to parents eager to understand the nature and prevalence of disordered eating patterns among a growing number of young people. Panelists represented the three key disciplines of comprehensive treatment programs for eating disorders: Melissa Nishawala, M.D., a psychiatrist specializing in general, child and adolescent psychiatry and director of the Eating Disorders Service at the NYU Child Study Center; Jodi Citrin, registered dietician and private nutrition counselor; and Andrea Vazzana, Ph.D., clinical psychologist and specialist in eating disorders and forensic psychology at the NYU Child Study Center. As a journalist and former editor-in-chief of "YM," "Redbook" and "Marie Claire" magazines, Lesley Jane Seymour addressed the role that media plays in creating body image expectations.

## What is an eating disorder?

Noting that eating disorders are affecting an increasingly younger population, Dr. Nishawala recommends that families, schools and medical professionals encourage kids to engage in physical activity, eat a nutritionally balanced diet and adopt more positive body images. While eating disorders span a broad spectrum of symptoms, the psychiatric community has designated several diagnostic categories: Anorexia Nervosa, Bulimia Nervosa, and "not-otherwise-specified" Eating Disorders, including Binge-Eating Disorder and Night-Eating Syndrome. Both Binge-Eating Disorder and Night-Eating Syndrome are characterized by frequent episodes of uncontrolled, excessive food intake within a specified time frame, and those with Night-Eating Disorder often consume 50% to 75% of their daily calories at dinner or during the night.

Given our cultural obsession with body image, it's not surprising that children can develop disordered eating patterns early in life. While Dr. Nishawala routinely treats high-school and college-age patients, she has seen middle-schoolers suffer from the premature bone loss that comes with certain eating disorders. Many of her patients occasionally vomit after a meal, fast the day after over-eating, or exercise to burn off calories equivalent to food intake. Fifty to 75 percent of young women and ten percent of young men admit to some sort of disordered eating pattern. While we may be aware of purging, fasting and starvation among young women, many young men with "Adonis Syndrome" adopt similar habits to maintain a lean, muscular physique.

Acknowledging the shame associated with eating disorders, Dr. Nishawala observed that many of her patients will admit to depression and anxiety long before they reveal their eating habits. "The more people hear, know and talk about these issues," she added, "the more they will recognize the early signs and seek treatment."

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## TOO PERFECT

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### Eating disorders and nutrition

A healthy, moderate lifestyle of good nutrition and physical activity may be the best defense against early disordered eating patterns in children. Nutritionist Jodi Citrin offered guidelines to help schools, families and friends establish a lifetime of healthy eating habits:

- Children should eat every four hours
- Diets should include 7–9 servings daily of fruits and vegetables
- Meals should contain variety, balance and moderation—and be a family affair
- Water and low-fat milk should prevail over juice, sports drinks and sodas
- Energy bars should be limited

By providing a healthy breakfast, abstaining from “diet” conversations, maintaining regular physical activity, minimizing snacks, choosing wisely from “take-out” menus, establishing structure to meal times, and limiting snacktime to the kitchen, parents can provide a nutritional foundation for growing children.

### Eating disorders and behavior

Psychologist Andrea Vazzana explained that while eating disorders may indeed be linked to a distorted sense of body image, an individual’s psychological profile can determine his/her risk level. Parents who suspect that their children may suffer from disordered eating should attempt to maintain a nonjudgmental dialogue with them and seek an early professional evaluation.

Typically those with Anorexia Nervosa:

- Rigidly categorize foods into right v. wrong, safe v. forbidden
- Have low self-esteem and high expectations
- Suffer from pre-existing anxiety or depression
- Tend to be perfectionists, eager to please
- Maintain strict discipline
- Consider food intake and body weight two items they can control

She suggested that parents of kids with Bulimia limit the inventory of highly sugared, fatty foods likely to be targets for binge eating. Telltale signs of this disorder, characterized by its secrecy, may reveal:

- Candy wrappers or food hidden around the house
- Redness or puffiness around the eyes from vomiting
- Sudden interest in breakfast to hide the smell
- Tooth decay, tooth chips or sore throats

### Eating disorders and the media

How we nurture attitudes toward food is especially critical, given the messages surrounding us. Maintaining a positive body image is challenging for a society bombarded by gaunt icons and models glaring from the covers of trendy magazines and the screens of reality TV. Lesley Jane Seymour, a long-time fashion editor, sees encouraging signs of backlash against the “thin sells” school of media. Tabloid headlines have begun to decry emaciated stars and synthetically bulked-up athletes as more and more fans applaud the realistic proportions of Oprah, Jennifer Lopez and Scarlett Johansson.

Seymour enjoined parents to express their concerns to advertisers and media that promote unhealthy body images. “Open up the conversation....Make them listen to you.” ●

## TRAIN TO BE A DISCUSSION GROUP FACILITATOR

### VOLUNTEERS WANTED!

Throughout the year, NYC-Parents in Action sponsors parent discussion groups at member schools. The goal is to strengthen connections among parents and create a communications network that will be in place through lower, middle and upper school. The discussions, led by our trained facilitators, provide a forum for an exchange of ideas and concerns with other parents. We are looking to train new facilitators who are articulate, comfortable speaking in groups and interested in parenting issues.

If you are interested in learning more about facilitator training, please call NYC-PIA at (212) 426-0240

# Internet Safety—Staying Ahead of the Risks

BY VERONICA BENNETT

You've been to a talk on internet safety. Your child's school has addressed it in the classroom and through internet use policies. While it may seem as though you've covered the territory, the message from internet safety experts is that there is likely more to be done. This rapidly evolving landscape requires regular attention from parents. From identity theft to cyberbullying to online solicitations, the risks are real and more commonplace than one might think. At NYC-Parents in Action's "Safety Net" seminar in October, parents heard practical advice from United States Secret Service Agent Kent McCarthy, who presented at our internet safety seminar last year and was joined for the first time by Darryl Nitke, co-founder of HyperCube Personal Technology Services.

**Photos posted online remain in cyberspace forever, and can be downloaded for whatever purpose.**

Agent McCarthy and Mr. Nitke informed parents of the dangers, updated them on important changes about how kids are using the internet and gave advice for being safe online. If they seem overly concerned, it is because they know all sides—the desire for independence by kids, the relative lack of knowledge of parents and the determination of online criminals. As a member of the New York Electronic Crimes Task Force, Agent McCarthy has spoken with approximately 10,000 children and parents over the last few years in New York City and is regularly involved in investigations involving the vilest online criminals. His warning was clear—parents are still not educated enough, kids already educated about safety are still putting themselves at risk and those who engage in unsavory and criminal online activities are capitalizing on opportunities. Mr. Nitke illustrated the disparity between what most of us are doing online and what we know about protecting ourselves.

Agent McCarthy presented these conclusions and statistics for parents to consider:

- There is currently a “bad mix” of social naiveté on the part of kids and teens and computer naiveté on the part of parents. At one school Agent McCarthy visited, less than half of the 5th graders that he spoke with said that their parents know what they are doing online.
- Dateline NBC's “To Catch a Predator” presents a real picture, not reality TV. Go to [www.dateline.msnbc.com](http://www.dateline.msnbc.com) for useful information, and to [www.familywatchdog.us](http://www.familywatchdog.us) to see how many registered sex offenders live in your neighborhood. Approximately 75% of online predators engaging in chat ultimately want to meet in person.
- Although many New York City school kids have heard him speak, Agent McCarthy stresses that kids still don't understand the importance of not posting identifying information online. This includes name, photos, address, school, activity locations, IM account or screen names, and names of friends/family.
- The popularity of certain online social networking sites has lulled students into a false sense of security. When [www.facebook.com](http://www.facebook.com) recently changed hands, many students who believed that access to their profiles required a school email addresses were shocked to find their profiles—including full name and photos—suddenly open to anyone worldwide.
- Photos posted online remain in cyberspace forever, and can be downloaded for whatever purpose. Cyberbullies post them to humiliate and harass classmates. Pedophiles create online caches and hard copy “scrapbooks” of children and teens. Predators use them not only to find children, but also to create false online identities used to “befriend” children. Sites like [www.youtube.com](http://www.youtube.com) up the ante by putting video online forever. Do the antics of the last slumber party really belong there?

Mr. Nitke had a wealth of practical advice, and the HyperCube web site is a good resource for informa-

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## INTERNET SAFETY

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tion on how to protect your computer and your family ([www.HyperCubePTS.com](http://www.HyperCubePTS.com)). Some highlights include:

- Use passwords and create “limited accounts” for children.
- Educate yourself about online scams—don’t respond to any inquiry that asks you to link to a web site with login information; the web site is probably part of a phishing scam.
- Password protect your wireless network to prevent others from using it. Mr. Nitke surprised many in the audience by describing how he was looking for an internet café one day in Manhattan, and discovered 14 private wireless connections available for use on one corner of Park Avenue in the 70s. Despite the belief by some that there is nothing wrong with using others’ connections, be aware that if the person piggybacking on your connection does something illegal it is your computer that will be flagged to police.

- Educate yourself on the websites your children visit, and discuss safety.
- Ensure that your children are seeing only age-appropriate content.
- Keep computers in an open area if possible. Recognize that safe computing at home can be undermined when kids go online outside the home and by internet-enabled wireless hand-held devices.
- Create and enforce computer use rules. Going online is a privilege not a right.
- Keep kids and young teens off social networking sites. Discuss appropriate online behavior with older teens. Is the posting something you would show to college admissions or a future employer?
- Discuss porn and the dangers of online predators with teens. ●

*Agent McCarthy’s first NYC-PIA presentation was reported in our Spring 2006 Newsletter, available at [www.parentsinaction.org](http://www.parentsinaction.org).*

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## WHEN TOO MUCH IS NOT ENOUGH

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few; rejection is rampant. Of the five tots she observes interviewed at Trinity, none gain admission.

Competition may be cutthroat today (Ms. Robbins says the high number of college applicants will not decrease until 2010), but there are measures we can all take. Her book concludes with constructive recommendations for parents, students, schools, colleges, and counselors. Suggestions for parents include limiting young children’s activities, scheduling family time and placing character above performance. Older students should pare down their own activities, disregard the superstar mentality, try an unrewarding

activity, reclaim summer, accept that admissions decisions aren’t personal, and take charge. Schools can delay high school start times so teens don’t get sleep-deprived, drop class rankings, limit APs, deemphasize testing, and provide less-competitive alternatives after school. “It is time to stop prioritizing how children look on paper over their health, happiness and well-being,” she says.

And, say both authors, it’s time for parents to stop living through their children and work instead on their own self-development. As one of *Overachievers’* beleaguered teens puts it: “I wish my parents had some hobby other than me.” ●

## HOMework FOR PARENTS

Continued from page 3

quizzes and correct them—in writing. A pretest from the teacher should be practiced as if it were a real test. Students can study information by trying to explain or “teach” it to another person—like Mom or Dad—and should then see if they can write it out.

### What if my child can't get motivated or needs more help?

Ms. Peduto believes success is a great motivator. Compliment your child's successes as his own, not as something he did for your approval. Reward hard work and not grades. Enlist technology where appropriate. For example, typing a paper can motivate a child who gets bogged down with handwriting issues.

There are children who will benefit from a tutor's attention. Evaluate whether a child's issues are related to content or process—is it the subject matter or does she have trouble with “output”? Dr. Yellin acknowledges that staying objective about your own child is difficult but necessary. Don't label him as “lazy.” Some children have difficulty starting homework, some have trouble sustaining energy through it, and others have trouble finishing it. Talk to the school, and don't be afraid to seek outside help.

### It's not finished until...

It's put back in the backpack. Your child is ready for another successful day. ●

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

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