

# Parenting Matters

Quarterly Newsletter

April 2008

For Colorado Parents

## Prescription Drug Abuse

**In light of the recent death of actor Heath Ledger** from an overdose of common prescription drugs, parents must be aware of the risk in their own homes. Medicine cabinets contain any number of pills that offer a grave temptation to teens and their friends. Teens say prescription drugs are readily available—in their own homes, from friends or relatives and online pharmacies. Learn how to safeguard your prescription and protect your teen.

### YOUR HOME

A teen may scout his own home first if he's looking to get high from prescription or over-the-counter (OTC) drugs. Drugs are in the bathroom, bedroom and kitchen; all areas should be monitored and safeguarded. Both prescription and OTC drugs should be kept in a locked medicine cabinet. Examples of OTC drugs include Sudafed and Coricidin Cough and Cold. Sort through medicines, checking for unneeded or expired drugs. Painkillers, such as OxyContin, Vicodin and Tylenol with Codeine are the prescription drugs most

likely to be abused by teens. If you think your child might be abusing painkillers, look for signs like constricted pupils, mood swings, clumsiness or drowsiness.



### PROPER DISPOSAL

For environmental reasons, drugs should never be flushed down the drain or toilet. Rather, properly conceal and dispose of medications by putting them in a bag or container, and mix them with something unappealing, such as coffee grinds or kitty litter. Remove personal information, like names and prescription number, from the bottles before sealing and tossing in the trash.

### HAVE THE TALK

Educate yourself by reading websites, such as [www.theantidrug.com](http://www.theantidrug.com). Here you will find tips, resources and advice for dealing with youth and drug abuse. Then, sit down with your child and talk. Be sure to have the conversation when you are calm and aren't rushed for time. Set clear rules and expectations for use of all drugs in your home, including alcohol and illicit drugs. Tell your teen prescription drugs are powerful and, when abused, can be just as dangerous as street drugs. The risks far outweigh any "benefits". And most importantly, remember you are your child's most influential role model. Be responsible in your own use of drugs and set a good example for your youth.

*Parents can make a difference. Your kid may be mad now, but they will thank you later.*

*Katie,  
19 year-old college student*

**PARENTING MATTERS, PREVENTION WORKS**

## Sibling Rivalry

by Elizabeth Pantley  
www.pantley.com/elizabeth

The word “sibling” refers to brothers and sisters, and “sibling rivalry” means the competitive feelings and actions that often occur among children in a family. There are things that you can do to try to reduce sibling rivalry:

- Treat each child as an individual. Help children understand that they are treated differently by you and have different privileges and responsibilities because they are different individuals.
- Respect each child’s space, toys, and time when he wants to be alone, away from his sibling.
- Avoid labeling or comparing one child to the other. This feeds into their competitiveness.
- When a new child comes into the family, prepare the older sibling for her new important role. Make her feel like it’s her baby, too.
- Play detective. Watch and note when siblings are not getting along (before dinner, in the car, before bed) and plan separate quiet activities for those times.
- Watch how you treat each child to see if you are contributing to the rivalry. Make sure you are not playing favorites.
- Have realistic expectations of how they should get along, cooperate, share, and like each other.

- Positively reinforce them when they are getting along or when they solve their own conflicts.
- Make each child feel special and important. Try to spend one-on-one time with each child every day.
- Take the time out for yourself to re-energize. Remember, sibling rivalry is a normal and expected part of family life.



## Pleeeeeeease Stop Whining!

by Margery D. Rosen  
available at <http://lifestyle.msn.com> (adapted to fit this publication)

Whether he’s a toddler or a tween, your child has probably mastered the whiny wheedles guaranteed to set your teeth on edge. To fight back, stand strong and make no mean no.

**Ages 3-5:** Preschoolers aren’t deliberately trying to bug you. That high-pitched wail is a normal step between crying and communicating well. “She’s probably tired, frustrated, thirsty, bored, sad (or all of the above), and whining is the only way she knows to tell you,” says Alvin Rosenfeld, M.D., a child and adolescent psychiatrist and lecturer at Harvard Medical School. The good news: at this age, whining is one of the easiest discipline dilemmas to solve. The bad news: if you don’t catch it now, whining can spiral into back-talk, arguments, and meltdowns. First, label the behavior: “uh-oh, is that a whine I hear?” Demonstrate a better alternative: “You can say, ‘Juice, please’ in a soft voice or your nice voice.”

**Ages 6-10:** If he’s still doing it now, he’s learned that whining works to get your attention. Kids are perfectly willing to settle for negative attention, so the more you keep telling him that he needs to stop whining, the more he’ll continue to do it.” Better: set a non-negotiable, zero-tolerance policy. “If you whine, the answer is an automatic no.” Don’t cave in or let the whining wear you down.

**Ages 11-14:** Peers drive behavior and if hers are all “doing it,” she’ll assume she deserves the same privilege. Acknowledge her feelings, but stick to your values. If the nagging continues, try the broken record tactic: you say “the subject is closed.” If she responds, you repeat “the subject is closed.” At such times it is also perfectly OK to add, “Because I said so.”



Available in Spanish by request

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## Tips for Getting Baby to Sleep

Newborns usually don't have trouble falling asleep and they usually sleep a lot, waking when they need something such as food or a diaper change. They don't yet recognize when it's nighttime or daytime, so they will split their sleep between day and night almost equally, and they sleep for different lengths of time each day. An unpredictable sleeping pattern is normal in very young babies.

A newborn baby usually needs to be fed every 2 to 6 hours, and you should feed your baby on-demand (whenever he or she is hungry). This is an exhausting time for parents, since you may be up a lot at night.

As they grow, babies begin to learn the difference between day and night (usually at about 4 months). This is when people start to think that babies will just naturally start to sleep through the night. Actually, this is pretty rare. Babies usually need some help from parents to learn how to sleep through the night.

### Hints for getting baby to bed:

**Remember, they're babies.** Newborns sleep a lot, just not necessarily at night. Because very young infants need to be fed frequently and are still learning how to get on a night-sleeping/ day-waking schedule, we generally wait to teach babies to sleep through the night until they are between 5 and 6 months old. This is just about the time that the need to feed them at night stops.

**Keep it routine.** One thing that really helps babies learn when it's time to go to sleep is a bedtime routine. The bedtime routine is a cue for children.



**Turn off the TV.** The goal of the bedtime routine is to help children relax and get ready for bed. Television shows are often noisy and stimulating, and sometimes even scary and violent. This isn't relaxing for a child, and may even make them feel more awake.

**Where's Teddy?** A "lovey" stuffed animal or soft blanket can be an important part of a child's routine. Some parents choose to give their children a "lovey" that the child uses to comfort and soothe him/herself to sleep.

**Read the signs.** As parents get to know their babies and their babies grow a little older, parents will begin to recognize the signs of when their baby is hungry or sleepy. Yawning is the most obvious hint that she is ready to take a rest, but there are others, too.

**Go to sleep...awake.** It's important

to put your baby down while he or she is sleepy, but still awake. When you put your baby down while he's still awake, he learns to soothe himself and put himself to sleep.

**Plan for protests.** As your child learns a new way of falling asleep, she may cry or protest. Thinking about these issues before they happen helps you feel more prepared.

**Patience, patience.** Even though they may seem overwhelming at times, sleep problems can be solved...but they take patience and consistency. Consistency is important because it helps children learn what to expect.

**Babies are people, too.** There are situations and events that can impact a baby or child's sleep pattern, for example, a divorce, a new sibling, a new caregiver, witnessing violence, experiencing abuse, etc. Life events like these can create or intensify sleep problems.

**Keep the faith.** Remember, your baby will learn how to sleep on his or her own. It takes time, consistency, and patience - but it will happen.



This article was edited  
to fit the publication.

www.zerotothree.org  
Zero To Three: National Center for  
Infants, Toddlers & Families

# COLORADO OPERATION: MILITARY KIDS

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# OPERATION: Military



Operation: Military Kids (OMK) is the U.S. Army's collaborative effort with America's communities to support children and youth of active duty families impacted by the Global War on Terrorism. State 4-H Military Liaisons lead OMK State Teams in 34 states in partnership with the National Guard, Army Reserve, the Military Child Education Coalition, Boys and Girls Clubs of America, the National Association of Child Care Resource and Referral Agencies, The American Legion, and schools.

These and other community organizations are joining Army Child & Youth Services to support military children and youth before, during, and after the deployment of a parent or loved one. Another helpful link is: [PBS VIDEO: "WHEN PARENTS ARE DEPLOYED" INFO & DOWNLOAD http://www.sesameworkshop.org](http://www.sesameworkshop.org)

## PARENTING MATTERS, PREVENTION WORKS



Colorado State University, U.S. Department of Agriculture and Colorado counties cooperating. Cooperative Extension programs are available to all without discrimination.

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