

Self-Esteem

Childhood Fears

Decision Making

Creativity

Sleep

Values

Competition

Empathy

Bonding

Family Meals

Sports

Sibling Relationships

Perseverance

Boundaries

Downtime

Body Image

Social Skills

Exercise

"Entertaining and inspiring, this book belongs in the home of every parent — and grandparent!"

— NATHANIEL BRANDEN, PhD,
author of *The Six Pillars of Self-Esteem*



The A to Z Guide to
**Raising Happy,
Confident Kids**

Dr. Jenn Berman

Praise for *The A to Z Guide to Raising Happy, Confident Kids*

“A beautifully written, lively exploration of the challenges involved in raising children—and the best we know today about how to meet those challenges. Entertaining and inspiring, this book belongs in the home of every parent—and grandparent!”

— Nathaniel Branden, PhD, author of *The Six Pillars of Self-Esteem*

“Finally, rather than a list of problems from A to Z, a refreshing, encouraging book for parents with answers from A to Z.”

— Rabbi Steven Z. Leder, author of *The Extraordinary Nature of Ordinary Things* and *More Money Than God*

“G is for Great! I love Dr. Jenn’s *The A to Z Guide to Raising Happy, Confident Kids*. Its easy accessibility touches lightly yet profoundly on subjects we parents confront daily. Her practical advice mixed with insight on how to grow a confident, healthy individual is spot on. I will be sure to recommend this chock-full reference to my patients and friends. I know it will have a place on my shelf for years to come.”

— Marilyn H. Kagan, LCSW

“*The A to Z Guide to Raising Happy, Confident Kids* is filled with wisdom and deep insight into modern parenting. From cultivating a healthy relationship with food and body to teaching your child about love and self-acceptance, this book gives parents the information they need on the issues that arise. Dr. Jenn’s book is a true gift to parents!”

— Elyse Resch, nutrition therapist and coauthor of *Intuitive Eating*

“When they are all finally asleep in their beds and you have crawled into yours, *The A to Z Guide to Raising Happy, Confident Kids* is the perfect ray of hope to visit for courage, comfort, and practical solutions that will give you a restful night’s sleep.”

— Don Elium, bestselling author of *Raising a Son* and *Raising a Daughter*

“Reading this book is like sitting down with a trusted friend who just happens to know everything—from the intimate details of parenting to the big picture of raising a child. The chapter titles and subheads have the catchiness of pop tunes, while the content achieves breadth and depth with the grace of a superbly tuned orchestra.”

— Greg Keer, syndicated parenting columnist and publisher of www.familymanonline.com

“Parenting becomes infinitely easier if you remember that you were once a child, too. Dr. Jenn’s brisk and insightful guide to child rearing provides a welcome reminder that informed parenting results in better kids. The tips and cautions alone make this book a confidence booster for handling parental pressure.”

— Paul Petersen, child advocate and founder of A Minor Consideration

“A helpful, practical approach to parenting. The personal anecdotes combined with clinical research make this guide a must-have for parents. As pediatricians, we value the importance of raising a happy, healthy, and confident child. Dr. Jenn’s book will help parents accomplish this goal.”

— Scott Cohen, MD, FAAP, and Bess Raker, MD, FAAP,
Beverly Hills Pediatrics

The A to Z Guide to Raising Happy, Confident Kids

Dr. Jenn Berman

Foreword by Donna Corwin



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All the vignettes in this book are taken from a combination of the author's clinical experience, personal experience, media work as a therapist, and letters and emails she has received. She has changed all names and identifiable details to protect the privacy of her psychotherapy clients. Any similarity between the names and stories of individuals described in this book and those of individuals known to readers is purely coincidental.

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*This book is dedicated to my incredible parents,
Barry Mann and Cynthia Weil.*

*Without your love, encouragement, and belief in me,
this book would not exist. You made me believe that I could
accomplish anything that I set my mind to. You taught me
that rejection and difficulty are just part of the road to success.
Thank you for always hearing me, understanding me, and loving me
with all your hearts. I aspire to be as good a parent as you both are.*

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FOREWORD

Dr. Jenn Berman has given the alphabet new meaning. In *The A to Z Guide to Raising Happy, Confident Kids*, she offers insightful, informative advice to parents. Dr. Jenn has broken down the basics of child-rearing into twenty-six of the most important issues facing parents today. She starts with helping your children form healthy eating habits, then goes on to cover everything from childhood fears, raising twins, and sibling rivalry to family time and sleep issues. Parenting is a challenging and often frightening journey. Dr. Jenn has joined with parents in this journey and shares her vast psychological knowledge and grounded advice. She navigates the internal needs of children, and at the same time offers practical solutions to parents. Along the way, she even reminds parents to take time for themselves—a novel idea!

In the chapter “F Is for Free to Be Me!” Dr. Jenn explores parenting’s most vital issue—self-esteem. She gets at the heart of what creates healthy children: their inner confidence and ego strength. Self-esteem, as she notes, forms the core of a person. As she reminds us, “Psychologically, parents are the mirrors in which kids see themselves reflected; your children look to you to figure out who they are and how they fit in the world.” With sensitivity, she guides parents in making positive choices when it comes to discipline and child-rearing. Perhaps one of the most important issues is allowing children to see their weaknesses as an opportunity for growth. Dr. Jenn draws on her longtime work with children, families, and teens. She cites real-life cases to exemplify the importance of self-esteem and its core function in a child’s life. She shows parents how to validate a child’s feelings and to become positive role models.

Dr. Jenn is also an expert on eating disorders. In “A Is for Apple: Helping Your Children Form a Healthy Relationship with Food,” she addresses a serious, pervasive problem. In the process she provides parents with strategies to help their children deemphasize diets and food obsession and to replace negative eating patterns with healthy food choices. It is worth buying the book just for Dr. Jenn’s vast knowledge of the subject of eating disorders.

This essential parenting book is sure to become a classic. There is something here for every parent, on every subject. You will reread this invaluable manual over and over. I cannot recommend *The A to Z Guide to Raising Happy, Confident Kids* highly enough. It should be on every parent’s bookshelf. I know it will be on mine.

— Donna Corwin, author of *The Tween Years* and
Pushed to the Edge

INTRODUCTION

Raising children is an art, not a science. The questions most parents have cannot be answered in black-and-white terms, which makes it more difficult to figure out what is right for the family and the children. There are so many different theories and approaches to consider, but most parents don't have the time to read up on everything they would like to know about. Yet they know that the more information they have, the better equipped they will be to make smart parenting decisions. This is where *The A to Z Guide to Raising Happy, Confident Kids* comes in.

I am a licensed Marriage, Family, and Child Therapist working with children, adults, and families in private practice and a parenting expert appearing on television and radio. In addition, I have written a parenting column called "Dr. Jenn" for the past five years. This column won the silver medal in parenting and child development from the Parenting Publications of America. I am also the mother of two children. Both my professional and personal experiences put me in a good position to help you master the art of parenting.

I am frequently asked for recommendations on parenting books but have never been able to find one book that covers all the questions that parents have asked me. In compiling this book, I have included some of the most important tips parents need in shepherding their children through early childhood. I have also tried to address the most frequent issues that I have tackled in my private practice, in my television and radio work and my column about parenting, and in my own parenting struggles.

My hope in writing this book is that parents will find the short, self-contained chapters easy to read and use for reference. Because each chapter is only a few pages long and can stand on its own, you can quickly read what you need, as you need it, instead of reading the book straight through. This book can serve as a helpful resource that you can turn to throughout your children's childhood as different issues arise.

One valuable idea I stress throughout this book is that sometimes raising a happy child means making your child unhappy in the short term in order to teach long-term values, such as delayed gratification, manners, and impulse control. Many parents make the mistake of thinking that raising a happy child means gratifying her every whim immediately. The challenge then is finding an appropriate balance between giving to their child and teaching important life lessons. It may seem daunting now, but rest assured, it will get easier.

Confident children tend to be those who have been given the optimal balance of freedom and boundaries, a challenge for any parent. Striking the right balance takes time, experience, and patience. But the reward will be worth it: a confident, thriving

child. In *The A to Z Guide to Raising Happy, Confident Kids* I have tried to give parents all the information necessary to make the best choices for their children. There are no greater gifts you can give your kids than happiness and confidence. I hope you will find this book helpful in raising your happy, confident children.

Best wishes on your parenting journey!



Helping Your Children Form a Healthy Relationship with Food

Kaley is a slender six-year-old girl who tells me that she is “fat.” She shares her food philosophies with me: Carbs are bad. Fat is bad. Sugar is bad. Fruits and vegetables are good, but only if they don’t have too many carbs.

Landon is a chubby seven-year-old boy. Other kids make fun of him when he plays sports at school, so he avoids physical activity. At home he watches TV and plays a lot of video games. His family doesn’t eat together, and he is pretty much on his own for meals, which he picks out of the refrigerator.

Unfortunately, I am seeing more and more children like Kaley and Landon in my psychotherapy practice. Eating disorders are striking at younger and younger ages, and obesity is now considered a national epidemic. Researchers use the body mass index (BMI), a measurement of body mass based on calculations of height and weight, to determine healthy weight, which is generally considered to be a BMI of 18.5 to 25. According to the National Center for Health Statistics, 63 percent of Americans are overweight, with a BMI of over 25, and 31 percent are obese, with a BMI above 30. It is not surprising, therefore, that more than 27 percent of children and 21 percent of adolescents are obese. The good news is that parents have a huge influence on their children’s relationship with food and their bodies, but not necessarily in the ways you might think.

Sugar, Fats, and Carbs, Oh, My!

The worst thing you can do to influence your child’s relationship to food is to restrict the foods she is allowed to eat. Many well-meaning parents refuse to allow their children to eat high-sugar or high-fat foods, but what they don’t realize is that food

restriction creates a deprivation mentality, which just compounds the problem. Children tend to find the restricted foods more exciting and thus more preferable to the nonrestricted foods. Kids who have been kept from certain foods, therefore, have more difficulties controlling their eating when presented with those foods.

Lisa came to see me after she noticed that her ten-year-old daughter, Casey, was getting sick after spending time at her girlfriends' homes. Lisa learned from the mothers of these girls that when Casey visited she would gorge herself on potato chips, crackers, and candy. Lisa was a very slender and attractive woman who had been a chubby child and lived in fear of gaining weight. She was on a low-carbohydrate, sugar-free diet and refused to keep any foods in the house that were not on her diet. Lisa was terrified of what would happen if she was around those foods, and even more important, she wanted to keep them away from her daughter. I worked with Lisa to help her slowly bring those foods back into the house. Initially, both Lisa and Casey binged on those previously forbidden foods. Yet after some time passed, these foods began to lose their emotional charge for both mother and daughter. Lisa now stocks the home with a wide variety of groceries, and the family is able to eat a varied and healthy diet.

Most parents are terrified that if they allow their children unrestricted choices, their kids will eat nothing but gummy bears and ice cream for the rest of their lives. That is just not my experience. Children who are raised to be what Elyse Resch and Evelyn Tribole, registered dietitians and authors of *Intuitive Eating*, refer to as "intuitive eaters," or unrestricted eaters, naturally chose a variety of foods. Lisa and Casey are fairly typical. Both adults and children who are accustomed to adhering to strict food rules initially choose previously off-limits foods when they are made available but eventually tire of them when they realize that those "forbidden fruits" will not be taken away.

Don't Touch That!: The Problems with Restricted Eating

A majority of the clients in my psychotherapy practice who have food or weight problems were put on diets during their childhood. Teaching a child to follow a food plan, to ignore her hunger, or to deprive herself of foods she wants sends a powerful message to her that she cannot trust her own body. When a child learns not to listen to and obey her body's signals of hunger and satiety, she is more susceptible to eating and weight problems. This also explains why dieting in childhood is actually a predictor of later obesity.

Studies show that the risk of developing an eating disorder is eight times higher in fifteen-year-old girls who diet than it is in their peers who don't. Even though diets have been estimated to have between a 95 and 99 percent failure rate, it has been estimated that half of all American women are on a diet at any given time. So commonplace is restrictive eating in our society that one California study reported that 45 percent of all third-grade and 80 percent of fourth- and fifth-grade girls are on diets. While it was once believed that this trend predominantly affected white, teenage girls, we now know that unhealthy eating attitudes and practices affect people of nearly all

ethnicities, genders, and classes, irrespective of age or geographical location.

Many theories explain why restrictive eating leads to a loss of control with food and to binge eating. Some theorists believe that it is the dieter's inability to manage powerful surges of hunger that leaves her vulnerable to erratic eating behavior. Researchers have found that the greater the degree of dietary restraint, the more severe will be the ensuing eating pathology. In addition, we now know that in addition to slowing down the body's ability to burn calories, metabolic changes have a profound impact on the brain. For the 4 percent of the population with a biological predisposition to developing an eating disorder, this spells the beginning of a serious lifetime problem.

What Is Normal?

The best thing a parent can do to fight this problem is to help her child develop the ability to read and honor her body's cues, allow her to eat a wide variety of foods, avoid labeling foods as "good" and "bad," and aid in identifying and addressing emotions so that she does not use eating as a coping strategy. The more you teach your child to trust and honor her body, the better her chances will be of avoiding an eating disorder.

Part of the reason that it is so difficult for adults to teach healthy eating to their children is that so few have mastered it themselves. Normal eating is difficult to find in this day and age. Listening to our bodies, eating when we are hungry and not eating when we are satisfied, and not eating for emotional reasons all run counter to what we have been taught by our culture, which recommends diet plans for everyone—even for young children.

In her book *How to Get Your Child to Eat . . . But Not Too Much*, Ellyn Satter provides a very helpful definition of normal eating:

Normal eating is being able to eat when you are hungry and continue eating until you are satisfied. It is being able to choose food you like and eat it and truly get enough of it—not just stop eating because you think you should. Normal eating is being able to use some moderate constraint in your food selection to get the right food, but not being so restrictive that you miss out on pleasurable foods. Normal eating is giving yourself permission to eat sometimes because you are happy, sad, or bored, or just because it feels good. Normal eating is three meals a day, most of the time, but it can also be choosing to munch along. . . . Normal eating is trusting your body to make up for mistakes in eating. . . . In short, normal eating is flexible. It varies in response to your emotions, your schedule, your hunger, and your proximity to food.

Hunger Scale

Rate your hunger using the hunger scale, and teach your children to use it too

when they are developmentally ready. The goal is to eat when you are a “3” and stop when you are a “5” or “6.” If you allow yourself to get hungrier than a “3” you are likely to overeat. If you eat when you are more than a “5” or “6,” you are feeding your emotions, not your body.



- 0 = Starving
- 1 = Empty
- 2 = Ravenous
- 3 = Hungry
- 4 = Pangs of hunger
- 5 = Neutral
- 6 = Satisfied
- 7 = Full
- 8 = Stuffed
- 9 = Uncomfortably stuffed
- 10 = Sick to your stomach

The good news is that children are born intuitive eaters. They come into this world eating to satisfy energy needs and being able to self-regulate calorie intake. In a study in which infants were fed formula in more diluted forms at some times and more concentrated forms at others, researchers found that the babies consumed more of the diluted formula than the concentrated one. They adjusted the volume to maintain a relatively consistent energy intake.

In *Intuitive Eating*, Resch and Tribole point out that most toddlers are intuitive eaters as well. They play until hungry and then go inside to eat a meal. They often leave food on their plates, even their favorite cookies, and then go back to play when their hunger has been satiated. If we want children with healthy attitudes about food, we need to help them maintain that intuitive ability.

Letting Go of Control

One of the biggest obstacles faced by parents who want to help their children develop a healthy relationship with food and their bodies is their own preconceived notions of what their child’s body is “supposed” to look like.

Your job as a parent is to make foods available to your children, not to tell them how much to eat. You cannot control how much your child weighs or what kind of body type she has. The more you try to get your child to gain or lose weight, the more

likely your plans will backfire and result in helping her develop a problem with food. You must make food available to your child when she is hungry and then let go of the outcome. I know that this is easier said than done!

When Veronica brought her six-year-old daughter, Rose, to the pediatrician she was told that her daughter was on the high end of the weight chart for her height and that it “might be a good idea to keep an eye on her.” Veronica, who had been a chubby child, was terrified that her daughter would feel bad about herself and get teased by her peers, like she had. She went home that day and threw out all of the “bad” food in the house. In the beginning this approach worked; Rose lost a pound or two, and Veronica was pleased that the family was eating healthier. But soon Rose felt deprived and started asking for her favorite desserts again. Veronica told her that she couldn’t have them because they didn’t keep them in the house anymore. When Rose asked why, Veronica said that she was trying to help Rose lose weight. Rose began to cry. She told her mom that she must have done a terrible thing to make her mom remove all the goodies from the house. Veronica didn’t know what to say. Shortly after that interaction, Veronica noticed that Rose started gaining weight again. She was still carefully controlling what she gave her daughter to eat, so she couldn’t figure out how this was happening. That was until one day when she was looking for a pair of earrings she had let Rose use to play dress-up and found a drawer of hidden sweets. Veronica realized that keeping the food out of the house was not the answer, since doing so was creating the need for Rose to sneak food into the house and eat it anyway.

Shortly after this incident Veronica came to see me. We talked about how important it was for Veronica to work through her issues surrounding her own childhood weight problem so that she could be better equipped to help Rose. Then we decided that Veronica would take a more neutral stance in her approach to food at home. While she would make sure that there were nutritious foods in the house to choose from, she would not try to regulate exactly what or how much Rose ate. She would also bring the candy bars back into the house so that they would be available in the hopes that, once Rose realized they would not be withheld from her, she would stop binging on them. Veronica would encourage Rose to listen to her body’s cues and to eat only when she was hungry and to stop eating when she was satisfied. She would limit television but would not try to force Rose to exercise to lose weight. In addition, she would increase the number of nights each week that the family ate dinner together, since many studies show that families who eat together have healthier eating habits.

It took a while for Rose to believe that certain foods weren’t going to be taken away from her again. At first she overate, but gradually she started to eat less and to listen to her body’s cues more. Because Rose learned to be an intuitive eater at a young age, as a teenager she maintained a healthy weight and never developed an eating disorder. Not every young girl is so lucky.

Risky Business

In the United States, females account for 90 percent of all people who have eating

disorders. Psychology experts have found that particular personality traits—the most common being perfectionism, the desire to please, the ability to ignore pain and exhaustion, obsessiveness, and the burning desire to reach goals—make certain children more susceptible to eating disorders. Many of those same traits make children great athletes or performers. Children who participate in activities in which there is pressure to be thin such as ballet, modeling, acting, gymnastics, wrestling, horse racing, and acting are at a higher risk for developing eating disorders. Studies show that the rate of anorexia nervosa in children who participate in these activities is ten times that of the general population, owing largely to the fact that thinness is a prerequisite for success.

According to the organization Eating Disorder Awareness and Prevention (EDAP), parents should watch for three red flags that can indicate future eating-disordered behavior: body dissatisfaction, dieting behavior, and a drive for thinness. A girl who is dissatisfied with her body is very prone to dieting. If she has a high drive for thinness, she is very likely to engage in unhealthy behaviors that will lead to an eating disorder.

More Than Baby Fat

There are many reasons why children end up overweight. It is difficult to know if this is a nature or nurture issue. Sometimes there is a lack of nutritional information at home. Many parents were never taught how to feed their own bodies and therefore are not able to be good role models. Literature shows that if one parent is overweight, half the children in the family will also be overweight, and if both parents are overweight two-thirds of their children will be. One study even found that children of overweight parents had lower metabolisms than those of healthy weight parents.

Other times children are overweight because they have a sedentary lifestyle. Children tend to be as active as their parents are. Overweight children are at a disadvantage because they are often uncomfortable playing sports and therefore become less skilled, which in turn makes them less active. Another reason children end up overweight is that our culture encourages inactivity. Children often spend hours a day in front of the television, the computer, and the PlayStation. Studies show that television watching actually slows down children's metabolic rates. It is believed that the trance-like state children experience when they watch television slows down their metabolism. Normal-weight children experience a 12 percent decline in metabolic rates while watching television, while obese children experience a 16 percent decline. On top of that, eating in front of the television makes people less conscious of how much they are eating: researchers have found that people who watch TV while eating eat eight times more food.

Spoon-fed Images

Today's children are at a higher risk for developing eating disorders than those of previous generations. They are bombarded by images of unrealistic standards of

beauty on television, on the Internet, in magazines, and in movies. The message being sent to children today is that beauty and thinness can change your life. Tune in to any episode of a show like *Extreme Makeover*, and you will start to believe it too.

Research shows a direct correlation between how much exposure a female has to contemporary media and the frequency of eating disorder symptoms she experiences. One study in which women viewed slides of overweight, average, and thin models found that the exposure to thin models resulted in lower self-esteem and decreased weight satisfaction. As bad as this lowered esteem is for adult women, children are even more vulnerable to it.

In the United States up to half of older elementary school girls read teen magazines at least occasionally, and one quarter read them twice a week. Often, the girls read these magazines to get ideas of how they “should” look. One study of eight- to eleven-year-old girls found that they regularly compared themselves to fashion models and other media images and felt bad about themselves as a result.

In other countries, the rate of eating disorders has risen in direct correlation to the influx of American exports, such as television programs and feature films, which bring with them new concepts of beauty and femininity as well as Western clothing, which is geared toward slimmer figures. For example, in Fiji, after being exposed to American television for only three years, Fijian teens who had never before been exposed to Western culture experienced significant changes in their behaviors and their attitudes about food and body image. Fifteen percent of Fijian high school girls started vomiting for weight control (a fivefold increase), 74 percent of Fijian teens said they felt “too big or too fat” at least some of the time, and 62 percent said they had dieted in the past month. In the Fijian culture, in which a comment like “you look fat today” was once considered a compliment, the standard of attractiveness has changed. As a result, the teen risk for eating disorders has doubled. In sum, the less time your children spend exposed to media images the better off they will be.

Tips for the Whole Family

- Eat only when hungry, and never let yourself or your children get too hungry.
- Eat dinner together as a family.
- Eat all meals at the kitchen or dining room table.
- Eat without distractions such as television, radio, cell phones, or computers at the table.
- Encourage children to listen to their bodies’ cues.
- Limit television viewing.
- Expose children to a wide variety of foods, and avoid restricting your kids from eating certain foods.
- Do not use food as a reward or punishment.
- Teach your children to identify and express feelings so they don’t resort to emotional eating.

- Do not criticize your own body or your child's body.
- Set a healthy example: do not diet.
- Teach self-acceptance and body appreciation.
- Encourage children to actually taste and enjoy their food.
- Do not keep any scales in your house.

Be a Super Model

The greatest gift you can give your child is to model “normal” eating habits. A study of mothers who engaged in unhealthy dieting behaviors showed that their five-year-old daughters had more weight concerns and were twice as likely to be aware of dieting. Another study that looked at mothers who did not follow their own bodies' cues found that their daughters' eating habits mirrored their mother's. In addition, these daughters were more likely to be triggered by external cues. In other words, if they saw a cookie (even if they were not hungry and hadn't wanted a treat previously) they were more likely to eat one.

Eating practices, neuroses, and disorders are often handed down from generation to generation. If you have food issues, and most women do, you owe it to the next generation to resolve them before you pass them on.



Understanding and Addressing Childhood Fears

When four-year-old Jada awoke in the middle of the night, she knew she had to use the bathroom. Even with the nightlight on, the trail to the toilet seemed dark, scary, and fraught with danger. There could be monsters lurking around every corner waiting to grab her. Mommy and Daddy were all the way down the hall, and they might not be able to get to her fast enough if a monster actually appeared. But Jada was tough and knew that big girls handle things like this on their own. So she got out of bed, heart pounding, and started on the long journey to the bathroom. When she finally got there, she saw something move. She couldn't tell what it was in the darkness. It had to be a monster! Fearing for her life, she jumped off the toilet and ran down the hall to her parent's room, leaving a bright yellow trail on the new Berber carpet all the way from the bathroom to the bedroom.

Childhood fears are not only normal but also an important part of the developmental process. According to well-known pediatrician T. Berry Brazelton, "Fears inevitably crop up at periods of new and rapid learning. The child's new independence and abilities throw him off balance." When children first learn how to do something, even something as simple as getting out of bed in the middle of the night to use the bathroom, they don't know what the outcome will be. It takes the experience of making it to the bathroom in the dark many times before they know it is safe and that they can handle it.

Helping the Cowardly Lion