

Dad tries to fight bedtime battle on a single front

Yvette:

My ex-wife and I are shared parenting our 5-year-old son. Since our separation and divorce three years ago, our son's mother has been living with her parents and sharing a bedroom and bed with our son. I have been attempting to wean our son from sharing a bed and have him sleeping in his own bed at our house but have yet to see any success. He starts out in his own bed but by morning there he is slumbering next to me. What advice can you lend? Can I be successful fighting this battle on a single front?

Don

Don:

Trying to keep your son in his own bed when he is at your house is unlikely to be successful as long as his mom allows him to sleep in her bed. The only way to resolve this is for you and your ex-wife to show a united front on this issue. Your ex-wife needs to get your son his own bed. At 5, he needs to be sleeping by himself unless he is sick or having an occasional bad dream. He is certainly too old to be sleeping with his mom every night.

Try talking with her one more time about your concerns. If that doesn't work, I recommend enlisting your son's pediatrician. A 5-year-old needs his own bed and his own space. As a last resort, consult your attorney.

Yvette

Yvette:

My 12-year-old daughter is about 40 pounds overweight. She is in middle school, and I am concerned that if she doesn't get her weight under control, she will be teased and have a horrible school experience. I am not overweight, and I have tried to talk with her about her eating. However, she seems to have no

interest in addressing her weight — except when we shop for clothes. Then she cries because she can't fit in the cute styles. But afterwards, she falls back into her old habits. What can I do to help her? I don't want to make her feel bad, but I know how cruel kids at this age can be.

Concerned mom

Concerned mom:

You're right to be concerned. Other kids will tease your daughter, which can lead to depression, low self-esteem and more overeating. Moreover, this low self-esteem and depression can carry over into adulthood.

Dr. Robert Murray, director of the Columbus Children's Hospital Center for Healthy Weight and Nutrition, said in addition to the emotional problems, overweight children can develop serious medical problems as they age such as high blood pressure, Type 2 diabetes or cholesterol problems.

"Motivation is the key to weight management, as you might imagine. It's tough to balance calorie intake with activity if the teen isn't really interested in doing it," Murray said. Murray offers these helpful tips:

1. Avoid making the girl's weight an issue.
2. Instead, gradually reshape the meal and snack offerings in your home.
3. Try to cut or eliminate sweetened drinks, a major source of empty calories.
4. Avoid skipping meals, especially breakfast.
5. Focus on whole-grains, fruits, vegetables and low-fat or nonfat dairy products as the core of the diet.
6. Use a greater variety of foods in smaller portion sizes and be especially careful of what foods and how much is ordered when the family eats away from home.

7. The second half of the equation is getting in more active time.

- a. Take the TV out of the bedroom.
- b. Limit TV time to two hours of planned TV viewing per day or less (rather than channel-surfing).
- c. Encourage family activities. Outdoor activities are best at first. Signing her up for a dance class, yoga class or Jazzercise class also may be helpful.

The Center for Healthy Weight and Nutrition provides this kind of information on diet and recreational time through one-on-one counseling. Your child's pediatrician can make the referral. The counseling is covered by insurance. If the tips above don't produce results, please contact your pediatrician to make the referral. If caught and dealt with early on, your daughter's weight problem will not affect the rest of her life. It will not resolve itself. Help by teaching your daughter the importance of a healthy, balanced diet combined with exercise.

Yvette

Yvette:

I have a 13-month-old son who beats his head on everything. If you tell him not to, he sits down and hits his head on the floor. I was in the kitchen making bottles and he was hitting his head on the wall in between the living room and kitchen. When he couldn't get two of his toys to go together, he started hitting them on his head. If you're holding him, he head butts you in the face. He'll walk up to you and start hitting his head on your leg. Once, he sat there in a shopping cart hitting his head on the handle. We don't know what to do to get him to stop. He gets plenty of attention both at home and at the baby sitter's. Why could he be doing this, and what can we do to stop it?

Joy

Families are encouraged to send their parenting questions concerning their children's challenging or difficult behavioral issues to Brown at columbusparent@thisweek-news.com or *Columbus Parent Magazine*, 7801 North Central Dr., Lewis Center, OH 43035.

Joy:

Please contact your pediatrician immediately. He or she can make the appropriate referral for testing. It's probably just a behavioral issue, but there could be other medical explanations for his behavior. I am most concerned about the potential for injury during these episodes. Your pediatrician can conduct a complete evaluation of your son and provide you the answers you need to help him.

Yvette

Yvette:

Do you have age recommendations and suggestions for teaching good manners to toddlers and preschoolers?

Linda

Linda:

It is never too early to teach children good manners. It starts with the basic "please" and "thank you" when children are learning to talk and ask for things. Teach them to share their toys and be kind and respectful. The rest will proceed from there. In short, modeling good manners is the best way to teach children good manners.

Yvette



Yvette McGee Brown is a former Domestic Relations/Juvenile Court Judge. She is currently the president of the Center for Child and Family Advocacy at Columbus Children's Hospital.