Health Information

Talking With And Listening To Your Child

Many parents hesitate to discuss alcohol and other drug use with their child. Some of us believe that our children couldn't become involved with illegal substances. Others delay because we don't know what to say or how to say it, or we are afraid of putting ideas into our children's heads.

Don't wait until you think your child has a problem. Many young people in treatment programs say that they had used alcohol and other drugs for at least two years before their parents knew about it. Begin early to talk about alcohol and other drugs, and keep the lines of communication open.

Don't be afraid to admit that you don't have all the answers. Let your child know that you are concerned, and that you can work together to find answers.

Here are some basic hints for improving your ability to talk with your child about alcohol and other drugs:

* **Be a good listener.** Make sure your child feels comfortable bringing problems or questions to you. Listen closely to what your child says. Don't allow anger at what you hear to end the discussion. If necessary, take a 5 minute break to calm down before continuing. Take note of what your child is not saying, to. If the child does not tell you about problems, take the initiative and ask questions about what is going on at school or in other activities.

Be available to discuss even sensitive subjects. Young people need to know that they can rely on their parents for accurate information about subjects that are important to them. If your child wants to discuss something at a time when you can't give it full attention, explain why you can't talk, set a time to talk later, and then carry through on it!

* **Give lots of praise.** Emphasize the things your youngster is doing right instead of always focusing on things that are wrong. When parents are quicker to praise than to criticize, children learn to feel good about themselves, and they develop the self-confidence to trust their own judgement.
* **Give clear messages.** When talking about the use of alcohol and other drugs, be sure you give your child a clear no-use example, "In our family we don't allow the use of illegal drugs, and children are not allowed to drink".
* **Model good behavior.** Children learn by example as well as teaching. Make sure that your own actions reflect the standards of honesty, integrity, and fair play that you expect of your child.

Communication Tips

Effective communication between parents and children is not always easy to achieve. Children and adults have different communication styles and different ways of responding in a conversation. In addition, timing and atmosphere may determine how successful communication will be. Parents should make time to talk with their children in a quiet, unhurried manner. The following tips are designed to make communication more successful.

Listening

* pay attention
* Don't interrupt
* Don't prepare what you will say while your child is speaking * Reserve judgement until your child has finished and has asked you for a response.

Looking

* Be aware of your child's facial expression and body language. Is your child nervous or uncomfortable-frowning, drumming fingers, tapping a foot, looking at the clock? Or does your child seem relaxed - smiling, looking you in the eyes? Reading these signs will help parents know how the child is feeling.
* During the conversation, acknowledge what your child saying, move your body forward if you are sitting, touch a shoulder if you are walking, or nod your head and make eye contact.

Responding

* "I am very concerned about..." or "I understand that it is sometimes difficult..." are better ways to respond to your child than beginning sentences with "You should", or "If I were you", or "When I was your age we didn't..." Speaking for oneself sounds thoughtful and is less likely to be considered a lecture or an automatic response.
* If your child tells you something you don't want to hear, don't ignore the statement.
* Don't offer advice in response to every statement your child makes. It is better to listen carefully to what is being said and try to understand the real feelings behind the words.
* Make sure you understand what your child means. Repeat things to your child for confirmation.

Articles Available on Indian Mental Health Issues

Donna Powless, M.S., an Oneida Tribal member, has written a series of articles on Indian mental health in order to better inform Indian communities about mental health issues, and to encourage Native Americans to consider how counseling may be of help to them.

Powless is working on a PH.D. in educational psychology at University of Wisconsin - Madison, and has six years of formal experience as a clinician, presenter and consultant.

Her articles, which are available at $25 each, address a wide range of topics pertinent to Indian mental health, including domestic violence, drinking and driving, parenting, sex, self-esteem, cultural values, stress, addiction, and war.

"My objective is to normalize mental health needs, so people are not afraid or ashamed to seek services," powless said. She can be reached at Native Consulting Services; #37 Red Wing Way; Keshena, Wis. 54135; phone (715)799-4689.

Study links coffee, blood pressure

Experts: Cutting intake reduces risk

The Associated Press

ATLANTA - Healthy men who drink three to six cups of coffee a day experience a significant drop in blood pressure when they kick the habit, researchers said Thursday.

The researchers think the drop might be larger in people with high blood pressure, who should be advised to give up coffee, Dr. Robert Superko of Stanford University said. He's one of the study's authors.

"Maybe this will help them prevent drug treatment" for high blood pressure, said the study's principal author, Jeff Myll of Stanford. "It's worth a try."

The findings were presented a the annual meeting of the American College of Cardiology.

Officials of the National Coffee Association said the drop in blood pressure was small and that other studies had shown no effect of coffee on blood pressure.

"This study should not raise concern among coffee drinkers watching their blood pressure," association officials said.

But Superko said the fall in blood pressure was significant, and that it varied among the subjects in the study.

"There are some people who went down profoundly," he said.

He said many of the previous studies that found no effect of coffee on blood pressure contained too few patients to demonstrate any effect, and thus their findings should be discarded.

The new study was done with 120 healthy men with a median age of 45. They were given three to six cups of coffee a day for eight weeks, and then half of them were taken off coffee.

When researchers compared the coffee drinkers with the non-coffee drinkers, they found a difference of 5 points in systolic blood pressure - when the heart is pumping - and a difference of about 3 points in diastolic pressure - when the heart is relaxed between beats.

The researchers said 56 percent of U.S. residents consume an average of 3.4 cups of coffee a day.

"Coffee may be the most common dietary additive in the American diet," they said.

Superko was the author of a study reported in 1989 that found that drinking decaffeinated coffee raised the levels of harmful cholesterol in the bloodstream.

For that reason, the researchers are not pointing to caffeine as the agent responsible for the health effects they've observed in coffee.

"Coffee is a complex fluid," Myll said. "There's a lot of things in there. We're not sure what's going on. It's not just caffeine."

The relationship between decaffeinated coffee and cholesterol "has to do with the chemical differences in the types of beans they use" for decaffeinated coffee, Superko said.