BEHAVIORAL CONSULT Help Parents Change Style for Raising Teens

dolescents are often the most intimidating of our patients. Let's face it: Most of us chose pediatrics because we like *little* kids. If a 15-minute office visit with a sullen teenager can be so difficult, imagine living with one 24/7.

Actually, many of us won't have to imagine-we ourselves are the parents of adolescents, and we know just how challenging that can be.

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Despite our own feelings of inadequacy, we can help parents make the transition from raising the innocent younger child to guiding the testy teen into adulthood. A failure to make that transition in parenting style can contribute greatly to a suboptimal outcome.

But your guidance needs to start early. When a parent comes into the office demanding that you administer a drug test or a pregnancy test, you have probably missed the window for effective action. The horse is well out of the barn.

The time to start is earlier-much earlier. All of parenting involves the balancing act between supporting dependency and promoting independence. When people first become parents, they are consumed with accepting the huge dependency of their baby. As the child gets older, parents must allow the child more independence for things to go smoothly.

But adolescence is a time when that balancing act requires truly skilled acrobatics. Teens and their parents need to negotiate the "Four I's" of adolescent development: Initiative, Individuation, Independence, and Intimacy.

Adolescents clearly need to take the initiative in their activities, including when they do their chores and how they manage homework. If parents get in the way and try to structure all of that, they're going to get a lot of pushback.

In terms of individuation—discovering who they are-teenagers are highly sensitive to the standards of peers. They're more interested in what their peers think they should do than what their parents think they should do. On one level, this includes how many ear piercings they have and how they dress. But on a broader level, they need to think their parents are wrong about most things in order to



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teens want and need privacy for their budding relationships. Parents need to learn how to be available to talk about relationships, but not

feel "like their own person." Offering an

opinion can be beneficial in giving the

adolescent something to counter, but

ideally save consequences for more sub-

stantial failings. In terms of indepen-

dence, teenagers are better educated by

learning from the conse-

quences of their own actions

when those actions are not

And in terms of intimacy.

harmful to their futures.

ask too many questions. Different teens move through these changes at different times. And on top

of that, the transition may not always go in one direction. A teen may want to be very independent in choosing her clothes. But the same teen may want a lot of parental help on getting her homework done and on handling peer situations. That's part of what makes parenting adolescents so difficult.

Parents need to gradually release

control and let their teens exert more independence. But the key word in that sentence is "gradually," and parents need to be alert for signs that the child is not ready or has not yet earned that freedom.

Let's say the parents have allowed their 13-year-old to have a cell phone. Let's say that a few weeks later, the child hurls the phone against the wall in anger, shattering it beyond repair. Some parents might be tempted to say: "That's it. I'm not buying you another cell phone until you're in college," but that is unlikely to be the most educational solution. The time frame should be measured in days or weeks, not in months or years. If consequences are too severe, kids tend to write their parents off completely and feel they have been written off.

Instead, the parents should give the teen a clear path to re-earning the privilege, negotiating the terms. Maybe he has to contribute 80% of his allowance and do some extra chores until the phone is paid for. Showing that they're reasonable and willing to negotiate is a model of adult behavior, and it's also their key to success.

The older the child, the more impor-

tant it is to negotiate what the rules are to be, and also what exceptions there might be. It's fine if there's a general rule that they can't stay out after 11 o'clock. But if a special event comes along that starts at 10 o'clock and won't end until 2 a.m., it's best to be flexible about the curfew this one time. When teens and parents negotiate one-time exceptions as needed, there is structure but rebellion or sneaking is not brought out.

Negotiation is important. A 30-year longitudinal study from the University of California, Berkeley, demonstrated that parents who managed to negotiate the rules with their children had more harmonious relationships with them later (New Dir. Child Adolesc. Dev. 2005;108:61-9). Often a dynamic arises in

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families where the parents are so generally annoyed with their teen that they reflexively answer, "No!" to any request. That can be really counterproductive when it comes to parenting adolescents. The first response should be: "Yes, if at all possible. Let's talk about it.'

I recommend that parents explicitly discuss the request using the following six points in deciding with the adolescent on their request. Posting these on the refrigerator and making discussing them a routine lets the teen know they are being taken seriously, slows the reflex to say "no," and may help install them as a mantra in the teen's brain for future decision making:

- Six Guides for Decision Making
- 1. Is it safe?
- 2. Is it legal?
- 3. Does it conflict with responsibilities?
- 5. Does it interfere with others?

6. Could it harm his/her development? Anyone who's read "The Catcher in the Rye" (New York: Little, Brown and Co., 1951) by J.D. Salinger knows that teenagers are especially sensitive to hypocrisy. Parents often talk about the importance of being a moral person, but the teen is aware that they're cheating on their income taxes. They will reject their parents' moral code if they see them being hypocritical.

Clearly, the best way for the parent to encourage their offspring to uphold good moral standards is to actually live those standards 24/7. But almost everyone fails to live up to those standards from time to time, and if they're parents of an adolescent, the teen is sure to be right there when they do. Adolescents appreciate and learn from honesty when that happens. The parent could admit, "Yes, I know I said that you should never curse another driver, but I was so angry that I forgot my own rule."

In these days of one- and twochild families, where parents often depend on their own children for friendship and companionship, it can be especially devastating to hear a teen say: "I hate you. You're the worst parents ever." When that happens-and it's almost certain to happen, since it's the rare child who never utters such a sentiment-the parent's best response is not to rise

to the bait of an angry teenager. They don't really mean it. And if the parent shows too much visible distress, or starts to punish them for saying those things, there won't be as much opportunity to recover. A simple "I am sorry you feel that way right now. I can see that you are really angry about [my decision, your curfew. what I said].'

And when the teen notices that the parent has not reacted to such provocation, that in itself is a valuable life lesson. The next time a street tough tosses off an insult, he'll be more likely to simply shrug his shoulders and walk away. For additional information on dealing with adolescents, the American Academy of Pediatrics maintains a particularly good collection of resources for parents at www.healthychildren.org.

4. Does it meet a developmental need? DR. HOWARD is assistant professor of pediatrics at the Johns Hopkins University School of Medicine, Baltimore, and creator of CHADIS (www.CHADIS.com). Dr. Howard's contribution to this publication was as a paid expert to Elsevier. E-mail her at pdnews@elsevier.com.

American Board of Pediatrics Announces Certifying Exams

The requirements for online applications for the 2011 certifying examinations may be found on the American Board of Pediatrics Web site (www.abp.org) or may be obtained by contacting the ABP by mail at 111 Silver Cedar Court, Chapel Hill, NC 27514; by phone at 919-929-0461; or by fax at 919-918-7114. The final month of each registration requires payment of a late fee.

The examination dates are as follows:

- ▶ Developmental-Behavioral Pediatrics: March 28, 2011.
- ▶ Pediatric Hematology-Oncology: March 28, 2011.

▶ Pediatric Rheumatology: March 28, 2011. Registra-

tion for first-time applicants is Aug. 2, 2010, through Nov.1, 2010. Registration for re-registrants is Sept.14, 2010, through Dec. 16, 2010.

▶ Neurodevelopmental Disabilities: Aug. 15-19, 2011. Registration for re-registrants is Dec. 14, 2010, through March 15, 2011.

▶ Pediatric Emergency Medicine: March 28, 2011.* The ABP in collaboration with the American Board of Emergency Medicine (ABEM) will administer the 2011 exam. ▶ Sports Medicine: July 2011.* The ABP in collaboration with the ABEM, the American Board of Family Medicine (ABFM), and the American Board of Internal Medicine will administer the 2011 exam, with the exact date to be determined by the ABFM. Registration for first-time applicants is Nov. 16, 2010, through Feb. 15, 2011. Registration for re-registrants is Dec. 14, 2010, through March 15, 2011.

*All applicants for the Pediatric Emergency Medicine and Sports Medicine Certifying Examinations must apply through the board in which they hold their primary certification.