



*Indian Mound Middle School
December 2009
Newsletter*



David Witte, Principal

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Greetings from Dave Witte.....

“Preparing for the winter . . . preparing for life”

Although the cold December weather has not truly reared its ugly head and forced us to bundle up each and every time we go outside, we all know what awaits us in the near future. We may not have had to take out the snow shovel (or snow blower) and clear the driveway and front path just yet but many of us, if not all, know where the shovels rest and if the snow blower will start. Winter jackets, snow boots, mittens and scarves, ice scrapers, sleds, warm blankets, hot chocolate, and firewood, among others, are all things we may have as we prepare for the upcoming winter. And if the past is truly the best predictor of the future, I am confident we will survive another Wisconsin winter as we experience the first snowfall and the frigid temperatures in our warm clothes and shoveled driveways.

As we each prepare for the upcoming winter, we, as a school community, also do our best to prepare our students for life both inside and outside of Indian Mound Middle School. We prepare our students not only for academic success but also for social and emotional success as our goal is to educate the “whole child” to best prepare them for the challenges of life. One of the greatest tools we utilize at Indian Mound Middle School is the “IMMS Honor Code.” Our students read and listen to the “IMMS Honor Code” during morning announcements three times a week, and the “IMMS Honor Code” is posted in every room within our building. The “IMMS Honor Code” is not just a document or words created by one individual; instead, it is a living contract that was created by the students and staff of IMMS and is the foundation of our student behavior expectations. We use the “IMMS Honor Code” as a tool to help prepare each of our students for success both at school and outside of school in the ever shrinking world we live in.

The “IMMS Honor Code” can be found on the following page. In our preparation for student academic, social, and emotional success, both in and out of Indian Mound, I invite you to read the “IMMS Honor Code” and speak to your student about how it can help prepare them for a successful school year and beyond. Best wishes to you and your family as you prepare for the winter and a wonderful holiday season!

Sincerely,

Dave Witte
Principal

School District of McFarland
Indian Mound Middle School
Honor Code
2008 – 2011

As members of the IMMS school community,
we come together as one
to create a better future
for ourselves and our community.

We are committed to:
Building positive relationships
Respecting and celebrating differences
Inspiring each other to succeed with a “can do” attitude
Standing up for one another when times are tough
Doing the right thing because it is right

We live our lives with honor, integrity,
optimism, and respect.
We are role models for today and tomorrow.

Created by the students and staff of Indian Mound Middle School
October 2008

Guidance News

8th Grade Students Register for High School

On our way to the high school!

Dates to Remember for 8th Graders and H.S. Registration:

With the start of the New Year comes the impending transition to High School for our IMMS 8th graders. This is a very exciting time full of choices and uncertainties. These decisions can be supported and anxious times alleviated through active involvement for students and their parents in the decision making process. Therefore, it will be crucial to keep in mind some important dates when looking to allow for an efficient and successful transition:

Early January: Eighth grade counselor, Ms Runde and guidance intern, Ms. Froehlich will be administering the Wisconsin Career Assessment (WSA).

Thursday, Jan. 21st: 8th graders will travel to the high school to hear about elective choices and tour the building. This will be a great opportunity for students to get familiar with the high school environment and become more aware of the opportunities available for interests outside of the required core classes.

Early Feb.: Jackie Guenter and John Feldner (McFarland High School counselors) will be coming to IMMS in order to provide further information to students regarding high school and possible electives. These meetings will allow 8th graders to indicate their tentative elective choices.

In February, there will be the Parent Orientation Meeting at the high school. Registration forms will be handed out and the process will be explained. After this meeting, you and your child can talk through all decisions for next year and make final choices regarding course selections.

Finalized registration forms with parent signatures will be due at IMMS by Feb. 19th. Please honor this deadline so that your child may be assured of getting the classes he or she has as their highest priority. If you have any questions, please call Jill Runde at 838-4577 – she will be most happy to help!

Ongoing School-Wide Service Project

The McFarland Food Pantry is in constant need of non perishable food and grocery items, toiletries, and funds. The students of IMMS are sponsoring a year-round “food” drive that allows families to contribute items anytime throughout the year. We also want to make it fun for students! For each item brought in, students will receive a raffle ticket (two tickets for each dollar donated, too). Tickets will be drawn daily for small prizes and treats. Together we can help the McFarland Food Pantry help McFarland families!



News from the PSC...

Market Day

December Offers:

Cookie Dough Bonus Buys

Free Uno's Pizza with a \$40.00 purchase

Return order forms to school by Dec. 9th

Internet orders must be placed by Dec. 12th

Pick up @ CEELC on Dec. 16th between 4:30 and 6:00 PM

Thank you to the Brandt family, Jane Butcher, Kris Hildebrandt, and Mary Kopp for helping with the November Market Day.

“Cash for Trash”

The next “Cash for Trash”
competition will be on Jan. 29th. Please
keep collecting over the holidays!

Thank You!

The PSC would like to express our utmost appreciation to the Dane Co. Sheriff's Dept. for their emotional and informative presentation on “The Choking Game.”

If you would like more information about this or other games adolescents shouldn't play visit:

www.gaspinfo.com

www.deadlygameschildrenplay.com

Buzz Books
IMMS Student Directories
(Phone Books) On Sale Now!
IMMS Library—See Mrs. Michels
Only \$2.00
Proceeds go to the IMMS PSC

The PSC appreciates Catherine Lathrop for her cover design, and
Paula Bloyer for assembling the Student Phone Directories.
We would also like to recognize Kris Hildebrandt for
organizing this years' Spirit Wear sale.

Calendar at a Glance.....

December 23—January 3	Winter Break—No School
January 4, 2009	Classes Resume
January 18, 2009	Professional Development Day—No School
January 22, 2009	K-8 Teacher Work Day (full day student release)
January 22, 2009	END OF 2ND QUARTER
February 19, 2009	Conference Release Day
February 26, 2009	Teacher Convention—No School
March 26, 2009	END OF 3RD QUARTER
March 26, 2009	K-8 Teacher Work Day (full day student release)
March 29—April 2	Spring Break— No School

McFarland Youth Center News

Warning Parents...

The following information might provide your student with hours of enjoyment!

McFarland has a youth center, and we want everyone to know about it! The mission of the McFarland Youth Center is to provide the youth of our community a fun, safe, and productive environment to attend after school. The students participate in a variety of activities where they can grow and learn and have fun at the same time. And when students are having fun, we know that students are more likely to be engaged and will learn more. The McFarland Youth Center is a great place for you to send your child after school and you can be confident that your children are at a safe, fun, and supervised location. Please encourage your students to attend and participate in one of our special events or just come and hang out. We offer both recreational and educational activities and events.

The hours of the McFarland Youth Center are 3pm to 6pm Monday-Friday. If you are interested to learn more about the MYC, please call the MYC at 608-838-3839 or visit us at our website: www.mcfarlandyouthcenter.org

WANTED: Individuals who would like to volunteer at MYC. We are always looking for individuals who enjoy sharing their time and talents.

In Thanksgiving-
Tana Laudolff, Managing Director MYC

Coming events:

"A Very McFarland Holiday"-Traditions of the McFarland Family

Dec 5th- Cookie Dough Pick-up at MYC (9-12pm)

Week of Dec. 7th- The Art of Christmas & Surprise Event

Dec. 18th - Holiday Festival Dinner at MYC



Greetings from the Orchestra Room.

“The orchestra room?” you say. “Yes! The orchestra room.”

There is an orchestra at Indian Mound Middle School!!! Currently, the orchestra consists of four 6th graders, one 5th, one 7th and one 8th grader. We meet for full ensemble on Tuesdays after school from 3:10 - 4:00 in the band room. We are currently doing a fiddle tune and a Mozart Quartet. The 6th grade students also participate in one lesson on Thursdays during the school day.

If you are interested in participating in the orchestra, please contact Mrs. Hershey using the information below. We welcome students who currently play, have played in the past, or are brand new to a string instrument – violin/viola/cello/string bass.

Since the orchestra is not yet a part of the curriculum in McFarland, the program is currently fee based. However, we are working to implement the orchestra into the school district curriculum!! If you are interested in this project, please talk to a member of the music staff.

Please contact Leanna Hershey if you would like information.

Phone: 205-2023

Email: hershvln@gmail.com (please put orchestra in the message box)

Music expresses that which cannot be said and on which it is impossible to be silent.

- Victor Hugo -



FYI—From the Health Office



Introducing...

IMMS welcomes a new staff member! Toni Hovel, RN, BSN has joined our Health Services team. She will collaborate with District Nurse, Alison Potter, and Health Assistant, Michelle Sondreal, to provide nursing care for students visiting the health office. Toni has 15 years of hospital nursing experience and has served as a substitute in all health office buildings. She can be reached at 838-4500, ext 4849.

Health Office Policies

If your child has been diagnosed with strep throat, impetigo, or pink eye, they may return to school only after completing 24 hours of antibiotic therapy and the absence of fever (without use of fever reducing medication).

If your child requires prescription medication to be given at school for an infection, a school medication consent form must be completed with appropriate signatures. Medication can not be administered without proper consent. We request a separate bottle of medication be left at school for the duration of the antibiotic therapy.

Please read the information listed below to help determine which illness you or your child may be suffering from.

DIFFERENCES BETWEEN COLD, SEASONAL FLU & H1N1 SYMPTOMS

SYMPTOM	COLD	SEASONAL FLU	H1N1
FEVER	Fever is rare with a cold.	Fever is common with the seasonal flu.	Fever is usually present with H1N1 in up to 80% of all flu cases. A temperature of 101°
COUGHING	A hacking, productive (mucus-producing) cough is often present with a cold.	A dry and hacking cough is often present with the seasonal flu.	A non-productive (non-mucus producing) cough is usually present with H1N1 (sometimes referred to as dry cough).*
ACHES	Slight body aches and pains can be part of a cold.	Moderate body aches are common with the seasonal flu.	Severe aches and pains are common with H1N1.*
STUFFY NOSE	Stuffy nose is commonly present with a cold and typically resolves spontaneously within a week.	A runny nose is commonly present with the seasonal flu.	Stuffy nose is not commonly present with H1N1.
CHILLS	Chills are uncommon with a cold.	Chills are mild to moderate with the seasonal flu.	60% of people who have H1N1 experience chills.
TIREDFNESS	Tiredness is fairly mild with a cold.	Tiredness is moderate and more likely referred to as a lack of energy with the seasonal flu.	Tiredness is moderate to severe with H1N1.*
SNEEZING	Sneezing is commonly present with a cold	Sneezing is common present with the seasonal flu.	Sneezing is not common with H1N1.
SUDDEN SYMPTOMS	Cold symptoms tend to develop over a few days.	Symptoms tend to develop over a few days and include flushed face, loss of appetite, dizziness and/or vomiting/nausea. Symptoms usually last 4-7 days, depending on the individual. Diarrhea is common.	H1N1 has a rapid onset within 3-6 hours. H1N1 hits hard and includes sudden symptoms like high fever, aches and pains. Symptoms usually last 4-7 days, depending on the individual. Diarrhea is common.
HEADACHE	A headache is fairly uncommon with a cold.	A headache is fairly common with the seasonal flu.	A headache is very common with H1N1 and present in 80% of cases.*
SORE THROAT	Sore throat is commonly present with a cold.	Sore throat is commonly present with the seasonal flu.	Sore throat is not commonly present with H1N1.
CHEST DISCOMFORT	Chest discomfort is mild to moderate with a cold.	Chest discomfort is moderate with the seasonal flu. <i>If it turns severe seek medical attention immediately!</i>	Chest discomfort is often severe with H1N1.

PREVENTION TIPS:

- ✓ cough & sneeze into your elbow
- ✓ wash hands with soap and warm water for a minimum of 15 -20 seconds. Sing your abc's or happy birthday to you
- ✓ use hand sanitizer when soap & water are not available
- ✓ avoid touching eyes, nose or mouth without washing or using hand sanitizer first

THE SYCAMORE STREET ENSEMBLE PRESENTS
A LIVE RADIO DRAMA...

*Hot chocolate and
live caroling at 7 p.m.
in the HS Food Court!*

IT'S A WONDERFUL LIFE

Friday, December 4th at 7:30 p.m.
at the McFarland High School Auditorium



Donations of non-perishable food items are encouraged and will be received at the door.

TICKETS

\$10.00 for adults

\$8.00 for seniors & students

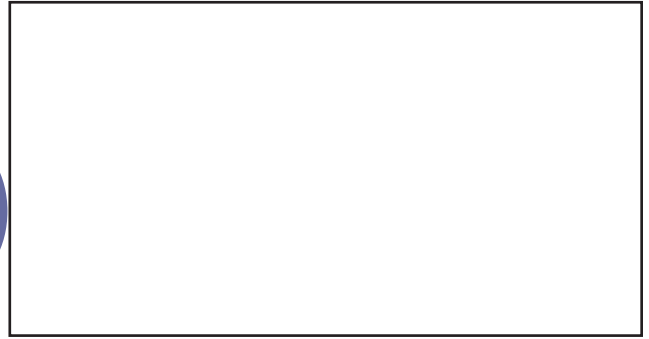
\$4.00 for children six and under

Tickets are available at the performance, on-line
at <http://itsoawonderfultime.com> or
in advance at local churches and businesses.

**ALL PROCEEDS WILL BENEFIT
THE MCFARLAND COMMUNITY FOOD PANTRY**

Call 603-838-8968 or email mcfundraiser@gmail.com for more details.

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Keeping Young Drivers Crash-Free

A recent national survey conducted by The Allstate Foundation shows that while parents know the No. 1 killer of teens is car crashes caused by teen drivers, the majority of parents do not understand the main causes of these crashes or may not be aware of laws that are intended to protect their teens. The survey also found that although parents agree they must play a significant role in preparing their teens to drive, many parents still delay safe driving conversations with their teens until shortly before licensure; think their teens are immune to the risk of car crashes; allow their teens to drive or ride in dangerous conditions; and model unsafe behavior behind the wheel.

According to the survey, nearly 50% of parents polled think crashes involving teens result from drunken driving. In reality, the majority of crashes are caused by driver error, speeding, and driving with distractions. Additionally, while most parents surveyed feel prepared to teach their teens the rules of the road, 60% say they have never heard of or are only vaguely aware of graduated driver licensing (GDL) laws. Intended to protect novice drivers while they are learning, typical provisions of GDL laws include an extended supervised driving period and restrictions on late-night driving and driving with teen passengers during the initial months of licensure.

Parenting Strategies for Keeping Young Drivers Safe:

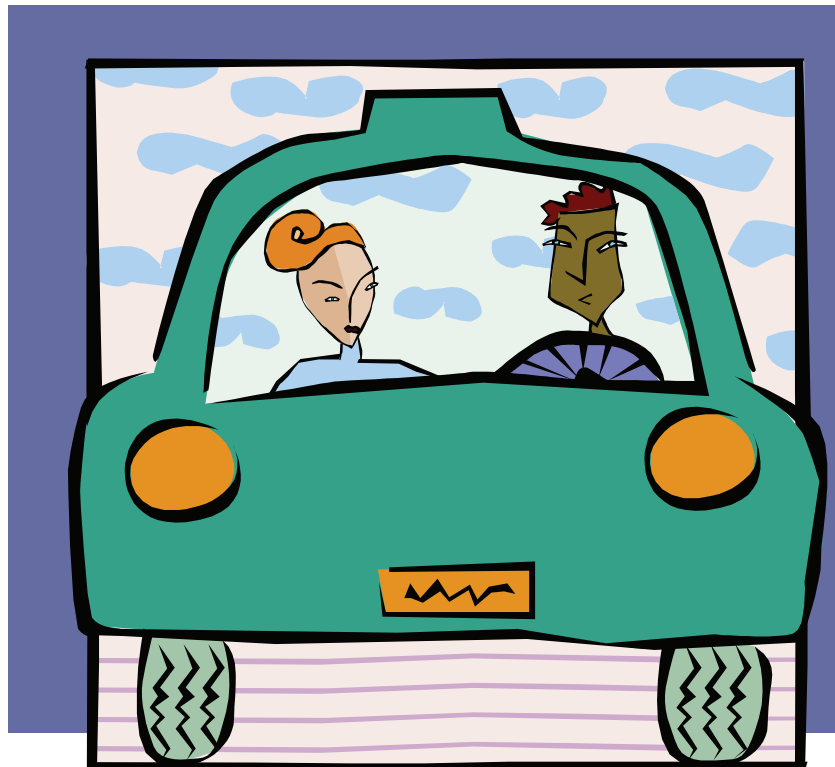
Talk with your child early and often. Most parents do not talk to their teens about safe driving until a year or less before their teens receive a permit—long after children’s attitudes toward driving have developed.

Shake the “not MY teen” syndrome. Parents think their own teens are immune to the risk of a crash—when in reality, the issue affects all driving teens.

Restrict dangerous driving situations. Many parents allow their teens to drive in dangerous situations within the first few months after getting a license, increasing the likelihood of a deadly crash.

Practice what you preach. Parents are not modeling good behavior behind the wheel when their children are in the car.

Exert positive adult peer pressure. Parents are influenced by several factors—especially other parents.



For more information on how parents can talk to their teens and other parents about this issue or to view the full Allstate Foundation parent survey, visit www.ProtectTeenDrivers.com

Grandparents Who 'Rock'

If your grandchild says to you, “You rock,” that’s a compliment. “You’re cool” is another compliment. Of course, depending on where you live, the exact words may be different.

Getting the lingo straight is just one of the many challenges in an increasingly intergenerational world. The grandparent/grandchild relationship is second in emotional importance only to the parent/child relationship. But the world has changed for grandparents.

Today’s grandparents grew up without child safety seats, bicycle helmets, and smoke alarms. They need to get up-to-date about safety, learn how to childproof their homes, and learn to put babies to sleep on their backs instead of tummies.

Parents can help grandparents by sharing with them the latest health and safety guidelines. Grandparents can and should also ask for guidance from the parents.

Thanks to the Internet, grandparents have access to many resources. They can also build and maintain long-distance relationships with their grandchildren by communicating via e-mail.



Tips to Connect With Grandchildren:

- Tune into your grandchild. Listen carefully with your eyes and ears.
- Share her world. Get to know her words and ways, likes and dislikes.
- Let him teach you about something he has learned. He will feel important and respected.

For more information, visit: www.family.samhsa.gov/monitor/grandparentscool.aspx?

'Playing' It Safe

Safe playground equipment and adult supervision are extremely important, but they are only half of the equation: kids must know how to be safe and act responsibly at the playground. Here are some rules to teach children:

- Never push or roughhouse while on playground equipment.
- Use equipment properly—slide feet first, don't climb outside guardrails, no standing on swings, etc.
- Before jumping off equipment, make sure that there are no other children in the way.
- Leave bikes, backpacks, and bags away from the equipment so that no one trips over them and falls.
- Playground equipment should never be used if it is wet, because moisture causes the surface to be slippery.
- During the summertime, playground equipment can become uncomfortably or even dangerously hot, especially metal slides.
- Do not wear clothes with drawstrings or other strings while at the playground.
- Wear sunscreen when playing outside, even on cloudy days.

For more information, visit: www.kidshealth.org/parent/fitness/safety/playground.html

HELPING HAND v19i3
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Troy, Michigan

Performance Resource Press, Inc.
1270 Rankin Dr., Suite F
Troy, Michigan 48083-2843
248-588-7733; 1-800-453-7733
www.PRPonline.net

Editor: Julie Lofquist
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Please send suggestions or contributions to the editor at the above address or through your student assistance program.

HELPING HAND is published monthly (September-May) to provide timely information to readers; its contents are not intended as advice for individual problems. Editorial material is to be used at the discretion of the reader and does not imply endorsement by the owner, publisher, editor, or distributors.

Self-Cutters: Signs and What Parents Should and Should Not Do

Young people who have trouble modulating emotional states—especially sadness, fear and anger—are at higher risk for self-injury. Some signs to look out for are:

- Unexplained cuts or bruises.
- Low self-esteem as evidenced by a tendency to put oneself down.
- Arms and legs are always covered—such as wearing cold weather clothes in warm weather.
- Presence of an eating disorder and possible substance abuse.

If parents discover that a child is self-injuring, their reaction is very important. Parents should NOT:

- react with intensity (e.g., fear or anger).
- use threats and rewards, as they are rarely effective.
- ask “Why are you doing this to me?” or “Why did you do that?”
- believe the myth that only girls self-injure.

But parents SHOULD:

- speak with your child calmly, without being judgmental, while expressing your love and concern.
- listen without offering an opinion.
- offer to educate themselves on self-injury so they can understand the child’s situation.
- tell your child you are concerned about him/her and that he/she can talk to you about anything.

For more information, visit: www.selfinjury.com/

New Tobacco Products Cloud Picture



Fewer teens are smoking cigarettes, but new tobacco products are clouding this picture. Tobacco companies say fruit- and mint-flavored cigarettes are aimed at getting adult smokers to switch brands. However, these products have sparked claims that tobacco makers are also targeting youth. While the debate goes on, parents can help guard their children against the allure of sweet flavors and slick marketing.

Flavored cigarettes and flavored smokeless tobacco recently began appearing in stores. These products come in a range of flavors.

Advertised as paths to parties, pleasure, independence, or new experiences, these products highlight themes that may appeal to youth. Whatever the intent behind the marketing of flavored tobacco products, all too often they will end up in the hands—and mouths—of youths.

At home, watch for signs that your child is using tobacco, flavored or not. Be prepared to remind your child that flavored tobacco is every bit as harmful as regular tobacco.

Flavored tobacco can be tempting for youths looking for something new. While smoking among young people has fallen, flavored tobacco products show that it is too soon to breathe easily.

For more information, visit: www.family.samhsa.gov/monitor/flavcig.aspx?

'Pass the Memories'

For many families, eating dinner together has become a lost art—but it proves to be a simple, effective way to reduce the risk of youth substance abuse and to raise healthier children. Before family dinners go the way of the dinosaur, make the effort to preserve family mealtime.

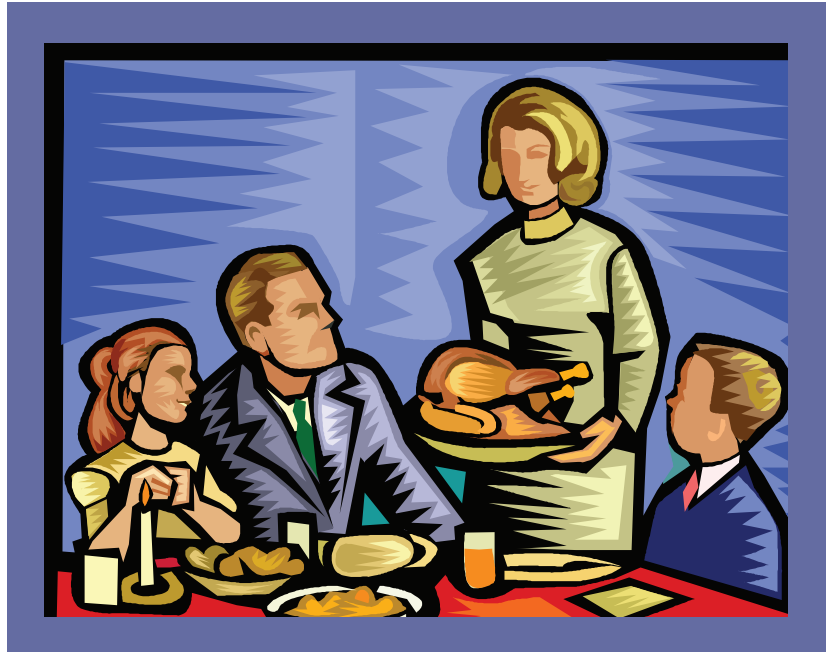
The facts are on the table: eating dinner together every night keeps communication open. It is the perfect time and place to reconnect and to show your kids that they are your No. 1 priority. It can help you direct your children toward positive activities and behavior, reducing the likelihood that they will get involved with alcohol, tobacco, and/or illegal drugs.

Why Are Family Mealtimes Important?

- By eating with your children, it is more likely that meals will be healthier and more balanced.
- Compared to teens that have frequent family dinners, those who rarely have family dinners are three and a half times more likely to have abused prescription drugs or an illegal drug other than marijuana.
- Girls who have five or more meals a week with their families are one-third less likely to develop unhealthy eating habits.

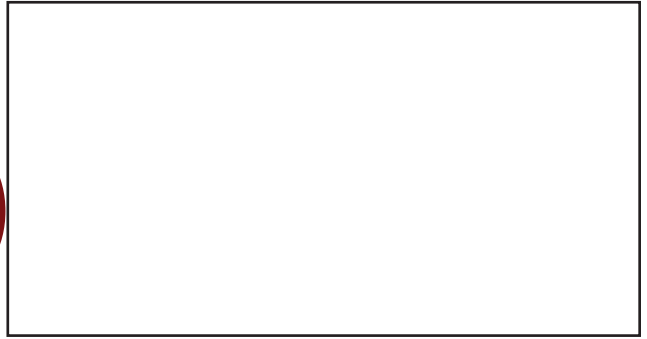
What Should We Talk About?

- Ask everyone to share his or her favorite part or biggest challenge of the day.
- Plan and then let the children pick tasks for the next day's menu.
- Exchange memories about your favorite family pastimes.
- Discuss an activity the family can do together and then put it on the calendar.
- Talk with your children about a book they are reading or a movie they have seen.
- Ask the children about their classes, homework, teachers, and upcoming assignments.



For more information, visit: www.family.samhsa.gov/get/mealtime.aspx

For more information, contact:



Working Together To Help Students Say 'No' to Smoking

In order to help young people avoid using tobacco, experts recommend that parents, teachers, and other adults in the community need to address the issue head-on and work together to keep students smoke-free. To address the powerful factors that influence kids to smoke, teachers, parents and other caring adults can take the following actions:

- **Show students how cigarette ads and images are designed to manipulate them.** Adults can reduce the powerful impact of all the cigarette ads and positive-smoking images that confront kids every day by talking with children about the ads' false ideas of glamour, maturity, coolness, and beauty, and about how the tobacco companies try to manipulate children into becoming their future addicted consumers.

- **Make your schools tobacco-free.** Adults can work together to try to make sure that the schools follow effective anti-smoking policies such as:

- Prohibiting all smoking on school property or at school events.
- Not accepting any funding, curricula, or other materials from the tobacco industry.
- Educating students about the short- and long-term negative consequences of tobacco use, and providing peer-pressure refusal skills.
- Providing prevention education in kindergarten through 12th grade, with intensive education in junior high or middle school and reinforcement in high school.
- Providing tobacco-prevention training for teachers.
- Encouraging parental support of school-based tobacco-prevention programs.
- Offering assistance to both staff and student smokers who wish to quit.

- **Check out online resources for tips and information.** Another way to take action and keep informed is to visit the Action Center or the Campaign for Tobacco-Free Kids' website. The Campaign's website is at www.tobaccofreekids.org and the Action Center is at <http://tfktakeaction.policy.net>

Coach's Corner: Defending Your Goals!

Just because a student is involved with athletics, it does not guarantee that they are smoke-free. However, the athletic field is a great place for adults to pass on a no-smoking message. Coaches can be one of the school's best assets in tobacco use prevention. Here are some quick conversation points coaches can use with their student athletes to promote a no-smoking message.

- You smoke, you choke.** Staying smoke-free gives you more stamina and makes you an asset to your team. The only thing you'll be smoking is defenders. Smoking slows down lung growth and reduces lung function. That can leave you gulping for air when you need it most!

- Throughout America, 3,900 young people will start smoking every day.** Identify a group of 20 kids. Have six or seven of those kids stand up to indicate who will die from tobacco use.

- Three out of four teens who are daily smokers say they keep smoking because it's really hard to quit. Why be hooked on nicotine when you can be hooked on sports? Aren't you already hooked on breathing?** Have youth hold their breath for 45 seconds. After 30 seconds, they will feel how a smoker feels after running the length of a soccer field. After 40 seconds, they will feel how a smoker feels after running twice the length of the soccer field.

How Schools Can 'Step Up' and Prevent Childhood Obesity

Many people think that preventing childhood obesity is the sole responsibility of a child's parent or guardian. However, according to the Center of Disease Control (CDC), there are many strategies that schools can use to help prevent childhood obesity. You can make a difference at your school this year by following these steps:

Step 1: See what you can do to get started. Find other students, parents, teachers, or administrators who also want your school to be a healthy school.

Step 2: Choose one of the ten key strategies below and implement it.

1. Address physical activity and nutrition through a Coordinated School Health Program (CSHP).
2. Designate a school health coordinator and maintain an active school health council.
3. Assess the school's health policies and programs and develop a plan for improvements.
4. Strengthen the school's nutrition and physical activity policies.
5. Implement a high-quality health promotion program for school staff.
6. Implement a high-quality course of study in health education.
7. Implement a high-quality course of study in physical education.
8. Increase opportunities for students to engage in physical activity.
9. Implement a quality school meals program.
10. Ensure that students have appealing, healthy choices in foods and beverages offered outside of the school meals program.

Step 3: Share your success story so others can learn new ways to improve the health of young people at school!

Children Can Still Buy M-Rated Games

In 2008, the Federal Trade Commission released the results of its latest nationwide undercover shop of movie theaters and movie, music, and video game retailers. The FTC conducted a survey with 13-to-16-year-old undercover shoppers to collect data about the extent to which retailers prevent unaccompanied children from buying tickets to R-rated movies, R-rated DVDs, Unrated DVDs of movies that were R-rated in theaters, M-rated video games, and music CDs labeled with a Parental Advisory Label – "PAL" – for explicit content.



The survey found that 20% of underage teenage shoppers were able to buy M-rated video games, a major improvement from all prior surveys, and down from 42% in 2006. With regard to M-rated video games, Game Stop rejected an impressive 94% of underage shoppers, while Wal-Mart and Best Buy spurned 80% of them. Some stores had very different results for different media. For example, while Best Buy rejected 80% of underage buyers of video games, it turned away underage shoppers for PAL music only 47% of the time, R-rated movie DVDs only 38% of the time, and unrated movie DVDs only 17% of the time. Similarly, Target refused to sell M-rated games to underage buyers 71% of the time, but refused sales of PAL music only 40% of the time.

What's the best way to make sure children are buying age-appropriate games? Go shopping with them. Check out what games they have at home. Learn about the games they are playing and make sure they are all appropriate for you child's age group.

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PRP Media, Inc.
1270 Rankin Dr., Suite F
Troy, Michigan 48083-2843
248-588-7733; 1-800-453-7733
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There's A New Kid In Town: Assisting Transfer Students

It doesn't matter whether a child has moved across town or cross-country to attend a new school—a move signifies change in a student's life. Academic changes are a critical issue, but the social aspects of transferring to a new school in the middle of the year can be even more overwhelming.

New students can feel isolated and alone, which can affect their self-esteem and their grades. As caring adults, it is the responsibility of teachers, counselors, and student assistant professionals to make the transition easier for students who transfer mid-year.

Here are some tips to help make the transition easier for students who transfer midyear:

1. *Assign a peer mentor.* A peer guide can inform the student of the layout of the land, from the location of classes, to the social groups that exist within the school. A peer guide will be able to provide the new student with information that they might not get from a handbook and help them to feel less isolated.

2. *Familiarize yourself with the student's academic standing.* Make sure all the student's new teachers are familiar with the transfer student's academic record and standing at their past school. If a student seems to be having a difficult time in class, find out whether the student is academically challenged, or simply having a tough time concentrating because of all of the change in his or her life.

3. *Become informed of the child's home life.* It is important to be aware of any extenuating circumstances in a student's life. Home issues obviously affect a child at school. Counselors should inform teachers if a student is a foster child, if their parents recently have divorced, or if the child has moved because of neglect or abuse. All of the issues will likely effect a child's performance.

4. *Talk it out.* It may sound simple, but in the busy, day-to-day life of teaching, it may be easy to forget just how challenging this mid-year change may be for a student. Keep the communication lines open with the new student. Check in with them to see how they are really doing. Schedule a conference to meet their parent(s) or caregivers.

ADHD: Making the Diagnosis

ADHD may be suspected by a parent or caretaker or may go unnoticed until the child runs into problems at school. Given that ADHD tends to affect functioning most strongly in school, sometimes the teacher is the first to recognize that a child is hyperactive or inattentive and may point it out to the parents and/or consult with the school psychologist.

Because teachers work with many children, they come to know how "average" children behave in learning situations that require attention and self-control. However, teachers sometimes fail to notice the needs of children who may be more inattentive and passive yet who are quiet and cooperative, such as those with the predominantly inattentive form of ADHD.

If ADHD is suspected, the diagnosis should be made by a professional with training in ADHD. This includes child psychiatrists, psychologists, developmental/behavioral pediatricians, behavioral neurologists, and clinical social workers. After ruling out other possible reasons for the child's behavior, the specialist checks the child's school and medical records and talks to teachers and parents who have filled out a behavior rating scale for the child. A diagnosis is made only after all this information has been considered. The family can start by talking with the child's pediatrician or their family doctor. Some pediatricians may do the assessment themselves, but often they refer the family to an appropriate mental health specialist they know and trust.

ADHD or Bad Vision?

Poor concentration, reduced attention span, and high level of distractibility mistakes are recognized signs of Attention-Deficient Hyperactivity Disorder (ADHD), but commonly overlooked vision problems can actually cause many of the exact same behaviors in the classroom. Vision does not only incorporate sight, but also the ability of the person to understand, process and respond to the visual stimulus.

To prevent this from happening, all children should have their sight assessed before school age to allow for treatment of the problem and encourage normal development. Symptoms of poor vision include: difficulty reading, losing their place, squinting, headaches, complaining of sore eyes, frequently rubbing their eyes, poor coordination, and bad handwriting.

Quick Tips For Better Classroom Management:

Identify the specifics of the problem behavior and the conditions that prompt and reinforce it. Every teacher experiences difficulty at one time or another in trying to remedy an individual student's behavior problem that is not responsive to preventative efforts. Because research suggests that the success of a behavioral intervention hinges on identifying the specific conditions that prompt and reinforce the problem behavior, it is recommended that teachers carefully observe the conditions in which the problem behavior is likely to occur and not occur.

Modify the classroom learning environment to decrease problem behavior. Many effective classroom-focused interventions to decrease students' problematic behavior alter or remove factors that trigger them. These triggers can result from a mismatch between the classroom setting or academic demands and a student's strengths, preferences, or skills. Teachers can reduce the occurrence of inappropriate behavior by revisiting and reinforcing classroom behavioral expectations; rearranging the classroom environment, schedule, or learning activities to meet students' needs.

Teach and reinforce new skills to increase appropriate behavior and preserve a positive classroom climate. Teachers should actively teach students socially- and behaviorally-appropriate skills to replace problem behaviors using strategies focused on both individual students and the whole classroom. In doing so, teachers help students with behavior problems learn how, when, and where to use these new skills and increase the opportunities that the students have to exhibit appropriate behaviors.

Draw on relationships with professional colleagues and students' families for continued guidance and support. Social relationships and collaborative opportunities can play a critical role in supporting teachers in managing disruptive behavior in their classrooms.

(Source: <http://ies.ed.gov>)

Sleep for Scholastic Success

According to medical experts, lack of sleep for kids can cause irritable or hyper types of behavior and can also make a condition like attention deficit hyperactivity disorder (ADHD) worse. Adolescents need about 8 to 9.5 hours of sleep per night, but many



don't get it. And as they progress through puberty, teens actually need more sleep. Because teens often have schedules packed with school and activities, they're typically chronically sleep deprived (or lacking in a healthy amount of sleep). Sleep deprivation adds up over time, so an hour less per night is like a full night without sleep by the end of the week. Among other things, sleep deprivation can lead to:

- decreased attentiveness
- decreased short-term memory
- inconsistent performance
- delayed response time

These can cause generally bad tempers, problems in school, stimulant use, and driving accidents (more than half of "asleep-at-the-wheel" car accidents are caused by teens).

Adolescents also experience a change in their sleep patterns — their bodies want to stay up late and wake up later, which often leads to them trying to catch up on sleep during the weekend. This sleep schedule irregularity can actually aggravate the problems and make getting to sleep at a reasonable hour during the week even harder.

Ideally, a teenager should try to go to bed at the same time every night and wake up at the same time every morning, allowing for at least 8 to 9 hours of sleep.

For more information, contact: