

SWIM LESSONS
Learning it the Right Way, Right From the Beginning
WATERWORKS AQUATICS
Ages 4 months through Adult
949.450.0777



Search Parenting OC

ASK THE EXPERTS

- Home
- Print Current Issue
- Browse Back Issues
- Discuss a Topic
- About Us
- Contact Us
- Find Parenting OC
- Advertise in Parenting OC
- Featured Links

CONTENT

- Calendar of Events
- Resource Directories
- Family Friendly Businesses
- Current Features
- Editorial Departments



Carol Clark is Executive Director of The Prentice School in suburban Santa Ana, which specializes in educating students with dyslexia.



Dr. Keith S. Tang is a Family Dentist in Irvine and has been in private practice for over 15 years. He is a graduate of UCLA and a Fellow in the Academy of General Dentistry.



Jody DeVere is currently President of AskPatty.com, Inc. and Woman's Automotive Association International.



Susan Kelsey is a Marriage and Family Therapist and Registered Play Therapist in Costa Mesa.

Diagnosing Dyslexia

My son is struggling with reading, even though he excels in his other studies. Even after a year of tutoring, he is behind the rest of the class. His tutor says he may have dyslexia but how do I know? And what steps can I take as a parent to help him if he does have this disorder? —Cassie, Irvine



There are several clues that indicate a student may have dyslexia. They include:

SPONSORS

You could be "Queen of the Cruise"

Baby Expo & Harbor Cruise
Click Here



PARENTING & KIDS EXPO
by Parenting
CLICK FOR MORE INFO!

GRADE SCHOOL SPELLING BEE
Click for more info!



CUTEST Baby COVER CONTEST

PARENTING & KIDS EXPO
VOLUNTEERS NEEDED!

WIN A FAMILY GETAWAY!

- Delayed language development
- A family history of reading problems
- Difficulty hearing sounds as in nursery rhymes
- Inability to read small words such as “an”, “in” and “that”
- Lack of a strategy to read new words
- Substitution or omission of words or part of words when reading
- Choppy or labored reading
- Trouble reading mathematical word problems
- Need for directions to read in order to complete homework

You mentioned that your son excels in his other studies. Many students with dyslexia are very good students in subjects such as math, social studies and science. For others, they excel in art, music, athletics, computers, etc. Generally, a student with dyslexia has strength in one or more areas.

Since your child has been tutored for a year in reading, I am sure the tutor has seen several of the above clues with your son. Contact your school district or ask your pediatrician for a referral to a psychologist to request a full psycho-educational evaluation. The evaluation will provide you with important information about how your child learns, his learning strengths and the appropriate method or approach of instruction that will enable him to become a successful reader. The district, if he qualifies, will offer services, while a private psychologist will also make suggestions to meet his needs.

For a copy of “Why is school so hard?”—a free brochure with more information about dyslexia—call 1-800-479-4711. —*Carol Clark*

Toothy Situation

My son is almost two and hates getting his teeth brushed. We've tried different toothbrushes and the baby toothpaste, which interested him a few times. But brushing his teeth still remains a battle. Any suggestions on what we can do? How soon should parents take their child to a dentist? —Kelli, Aliso Viejo

As a father of two children (with my younger child at the about the same age as your son) I understand your dilemma.

The key is to be prepared mentally. Changing an undesirable behavior means that you will be exerting your authority as a parent.

Therefore, you may encounter some resistance!

Your partner may have to gently hold your child's hands and legs if they interfere with your home

care. Resistance should decrease as your child gets accustomed to the routine. For the typical child, this could take 1 to 3 weeks. While this may seem more forceful than some parents are comfortable with, the alternative is getting cavities.



Position your child in way that enables you to be able to limit his movement and have good access to clean his teeth. For example, instead of brushing in the bathroom, try brushing and flossing at the corner of his bed. This way, you will limit your child's movement and you won't have to look upside down to brush/

floss his top teeth. Also help your child to open wide. I actually press down on my child's lower teeth when she doesn't open wide enough. If you can't see what you are brushing, it's hard to do a good job.

Systematically shape the desired actions by reinforcing positive behavior. After getting past the initial resistance, count to see how long your child opens wide and stays still. In the beginning, it may be only for 5-10 seconds before taking a break. Reinforce the behavior with a hug, high five, smile, word of praise, etc. As he becomes more comfortable with the routine, stretch out the time by five seconds every few days to a week until you are able to brush all of his teeth thoroughly.

Other helpful hints include:

- When it is possible, brush and floss your child's teeth before he becomes too tired or sleepy. A tired child almost guarantees that he will not be helpful.
- Use distractions like singing to your child or playing with him. One parent I know sang "Old McDonald" and as her child sang "Eeeee iii, Eee iii, Ooooooh," she brushed and flossed.
- Model what you want your child to do. With my daughter, if I open my mouth and say "Ahhhhhhh," she will do the same thing.
- Use a motorized toothbrush and a floss holder. They are faster, more efficient, able to fit into smaller spaces and less likely to lead to gagging. I highly recommend a Rotadent or an Oral B Braun with a child's toothbrush head and Glide flossers.
- If your child has an older sibling who is cooperative, let him watch as you check his teeth.

Brushing with toothpaste is not important at this stage. It's more important to clean his teeth thoroughly. Later when you think he is almost ready to use a fluoridated toothpaste (that he will spit out), transition using a non-fluoridated gel such as Orajel's training toothpaste.

The American Academy of Pediatric Dentistry (AAPD) recommends that all children have their first dental visit when the first tooth appears, or no later than his/her first birthday. In my practice, I typically see children around their first birthday. During this visit, I perform an exam, coach parents on proper home care and offer suggestions that may be specific for their child. I generally find the children who have such early dental care have fewer dental problems over the years. —*Dr. Keith S. Tang*

Car and Driver

[What is the best mini-van out there for children? I hear the Toyota Sienna seems to be more reliable, but that the Honda Odyssey has better turning radius. Help! — Bessie, Tustin](#)

That's a great question. When it comes to family you want to be sure you are not only getting a great vehicle that can fit all your kids and the rest of the items that come along with them, but you want to be sure the vehicle you are driving is safe. Safety ratings for vehicles are determined by the NHTSA (National Highway Traffic Safety Administration) and can be found at www.safercar.gov. The NHTSA does testing and issues ratings for each year and for every vehicle.



The Insurance Institute for Highway Safety (www.iihs.org/ratings/) provides crash test ratings on all vehicles each year, as well. The Institute rates vehicles “good,” “acceptable,” “marginal” or “poor” based on performance in high-speed front and side crash tests plus evaluations of seat/head restraints

for protection against neck injuries in rear impacts.

Although the Honda Odyssey and Toyota Sienna come in at second and third place, respectively, in the testing for the minivan category, the Kia Sedona and the Hyundai Entourage 2007 models with side airbags have the safest overall rating and are listed as Top Safety Picks by the Insurance Institute for Highway Safety.

The first requirement for a vehicle to become a Top Safety Pick is to earn good ratings in all three Institute tests. A new requirement for 2007 is that the winning vehicles must offer electronic stability control. Electronic stability control significantly reduces crash risk, especially the risk of fatal single vehicle crashes, by helping drivers maintain control of their vehicles during emergency maneuvers, according to Institute research.

So to answer your question, both the Toyota Sienna and Honda Odyssey are fantastic choices, especially for functionality and convenience. But if you are looking for the minivan that comes closest to impersonating a tank on the road, then check out the Kia Sedona and the Hyundai Entourage. To see more detailed ratings from each impact test go to www.iihs.org/ratings/ and browse by category. Good luck in your search! —*Jody DeVere*

Separation Anxiety

I have a 1 1/2 year old son who is EXTREMELY attached to me (his mother). I have him in daycare once a week, I involve him in different playgroups so he's not always around me, but he constantly whines and cries to be near me and gets upset when I leave the room. Is there anything I can do to make him more independent and less clingy? —*Jessie, Fullerton*

Clingy behavior can be very frustrating for all parents, especially if this is your first child. The first thing to remember is that 18 months is still very young in a child's development to expect a high degree of independence. Your little guy is still not sure of his world and will rely on you to provide him security and support much of the time. To help encourage his growing independence, I recommend applying these tips:

Visit the daycare and playgroups. Ask the facilitators if your child is able to play independently while he is there to verify that the problem only exists with you. Secondly, find out if he is having problems with aggressive children or other social situations that may be causing him stress in these settings.

Try planning uninterrupted time.

He may be feeling that he is not getting enough “mommy” time. Try to set aside an hour each day to spend quality time spent together. This can go a long way in satisfying his need for you. When he is feeling that his “mommy” needs are being met, that can often mean increased independence in other areas of his life.



Be Patient. Your son may sense that you are frustrated with his lack of independence. If a child senses that you are not happy with his behavior, he will often react with disruptive behaviors like whining, crying and clinginess. If this is the case, I would suggest trying to be a little more patient with him. Your son is still a baby and “this, too, will pass,” just like some of his other behaviors that are no longer a problem due to maturity. Adjusting your expectations can result in a more relaxed parent, as well as child.

Spending quality time, checking for other sources of stress and having realistic expectations can help reduce clingy behavior and promote independence in toddlers. If you have applied these tips, and your son continues to cling to you more than would be expected for his age, you may consider seeking professional help. A Play Therapist is trained to work with youngsters to help discover the source of this problem and to develop strategies to help eliminate them effectively.

—*Susan Kelsey*

Ask an expert

[Send a Letter to the Editor](#)