

Children need help to develop a good self-concept

LAFAYETTE, Ind. — Self-concept is the way we think about ourselves and the feelings we have about ourselves. These thoughts and feelings can be positive or they can be negative. The person who has positive thoughts and feelings is said to have a healthy self-concept.

As adults, we can control and influence our feelings about ourselves. We can accept or reject others' opinions. We can monitor the events in our lives that cause us to feel one way or the other about ourselves.

A young child's self-concept, though, is determined mostly by the "messages" he receives from others, particularly his mother and father. These messages can be deliberate or unconscious, verbal or non-verbal.

Sometimes the message the child receives is not what the parents really intend. For example, a parent may insist on doing everything for the child, even the most simple things the child could do for himself. The parent thinks he or she is sending the message: "I'm doing all these things for you because I love you."

But really, the unconscious, non-verbal message the child may be getting is: "Always rely on Mom and Dad to do everything for you

because you're dumb and helpless."

To understand a child's self-concept you have to try to see the world from his perspective. Even very young children are very occupied with developing competence — that is, learning to do things themselves. It is this continued striving for competence that pushes children to try new challenges and leads them from one stage of development to the next.

Parents can watch for the things a child can do for himself and encourage him to do them, even if he cannot do them perfectly. The

more he learns to do for himself, the more positive his self-concept will be.

One of the most important factors in the development of self-concept is the parent's attitudes towards the child's successes and failures. If the most important people in his life view him as "dumb" or "helpless," it will be almost impossible for him to develop positive feelings of self-worth. Mockery and sarcasm are like the hot sun that causes a flower to wither. But praise is like the nurturing food that helps the self-concept develop and blossom.



In search of strawberries

BY DEBORAH STILES-RENZI
Staff Correspondent

Every year toward the end of January—first of February, I develop an overwhelming, irresistible craving for strawberries. Perhaps it's the snow blanketing the pastures or the mud pervading the kitchen (courtesy of somebody's gum boots) that has me longing for June and balmy summer days, but what is inevitable is a frantic search of the deep-freeze for that last (what-

—have they all been eaten before now?) box last year's frozen strawberries.

Like most farm and rural families in this area we eat locally or home-produced fruits and vegetables in season and preserve the surplus for when they are not. Our household is "seasonal" (reminds you of those little notes in restaurant menus about the melon—"in season only"); we follow the tradition of our immigrant ancestors in allowing the seasons to dictate the menus, with a little more leeway, thanks to the old chest freezer.

Local stores sometimes provide a meager selection of produce shipped from the warmer climes, and although citrus and the like are appealing (since you can't grow them at all here), does a green bean or broccoli head that's traveled two thousand miles compare tastewise or pricewise with one grown last summer by

your own two hands (or your neighbor's)?

Of course not. So you head for the basement. Get in the freezer. And toss out pork chops and corn and apples and half of the freezer cartons in there to find what you're craving.

Which brings me back to strawberries, and why my family

looks at me a little funny every February when I disappear head first into the freezer in the great quest for the elusive frozen red fruit.

I HATE strawberries.

But I eat them in February.

Hurry up, spring—even the frozen zucchini's starting to look good!

BACK HOME



By Michelle S. Rodgers

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Keeping Warm

Our furry caterpillar weather predictor must have been over anxious when he predicted a mild winter. This winter weather is certainly not typical of the last several years but it certainly is a lot more like what I remember of my childhood. There seems to be adequate snow fall every four or five days to keep the sledding and ski slopes in good condition. And the weather man has become the hero of television, especially when he predicts enough snow for school delays or cancellations.

Although a lot of attention is given to the amount of snow fall that we receive, another important consideration is the temperature outside. Recently, our 4-H ski night was cancelled due to the wind chill factor, even though the snow cover provided perfect skiing conditions. Frostbite can be a major concern in extended outdoor temperatures.

Another health concern with the cold temperatures is hypothermia. Accidental hypothermia occurs when a person is exposed to severe cold without proper protection. But in the elderly, this condition can develop after exposure to mildly cold temperatures. Recently in a phone conversation, my grandfather reported that he was snowed in but he was keeping warm. And that is good news!

The elderly are less able to respond to long exposure to cold, increasing their chances of accidental hypothermia. Hypothermia is a drop in internal body temperature, and can be fatal if it is not detected and treated promptly. The condition occurs when the body temperature drops below normal, usually to 95°F or lower.

In addition to low body temperatures, other symptoms include: an unusual change in appearance or behavior during cold weather, slow and sometimes irregular heartbeat, slurred speech, shallow very slow breathing, sluggishness and confusion.

Dressing warmly, even indoors is a way to prevent hypothermia. The purpose of winter clothing is to insulate the body and to retard any heat loss from the body. Contrary to what some people may believe, clothing does not create heat. Clothing prevents body heat from radiating out to colder air spaces by trapping it in air pockets between layers of clothes and air spaces within crumpled yarns and fibers of a garment.

In addition to wearing warm fabrics like wool, acrylic and down, the way we dress can also keep us warm. Dressing in layers is an excellent and stylish way of keeping warm. The first layer of clothing worn next to the body should be absorbent like cotton. This will prevent moisture from trapping between your skin and the garment, which could make you feel cold and clammy. It is interesting to note that wearing several layers of thinner clothes will keep you warmer than wearing one bulky garment of the same thickness.

So, when cabin fever strikes this winter...remember the importance of dressing warmly as you clamor outdoors. Who knows, the furry caterpillar prediction was a little off. Maybe this year the groundhog will be wrong, too!

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Families contribute to caring for elderly

NEWARK, Del. — Today 12 percent of the U.S. population is over age 65. If current trends continue, by the year 2000 half of all Americans will be over 50 and a third will be over 65.

As more families become concerned about caring for elderly relatives, people are starting to ask how providing this care will affect the financial well-being of adult care givers and their families.

Research on this topic as reported in the U.S. Department of Agriculture's "Family Economics Review" shows that, while government programs like Social Security and Medicare provide most of the economic support for the elderly, families also make important contributions. Much of this aid comes in the form of services such as housing or transportation.

"Studies have shown that only about four percent of families regularly make direct financial contributions to their elderly parents," says University of Delaware extension home economist Debbie Amsden. "The size of these contributions is usually limited and very few families report a financial hardship due to such help. This suggests that government programs rather than the family are currently the primary means of transferring income to the elderly."

On the other hand, families play a major role in providing essential services for the elderly. While there are agencies which, for a fee, furnish nursing care and transportation or perform homemaking tasks, families are more likely to provide such services themselves rather than pay for them, the home economist says.

Research also indicates that family members perform these

services as part of a mutual exchange of resources, not just because they have to. Indeed, the care given often covers far more than the older person's actual needs.

It is highly probable that the elderly will live in some type of shared housing late in life, Amsden says. Today the shared home is often that of an adult child.

Sharing housing enables older family members to stretch their incomes. However, combining households may lead to overcrowding and place demands on adult children which deprive other family members of needed attention. In most shared living arrangements the family does the housework, prepares meals, shops and provides transportation for the older individual. As this person becomes less able, family members also assume responsibility for his or her grooming, physical care and financial management.

Over the rest of this decade, America's elderly population is expected to increase — particularly the most aged group, which includes those most likely to have low incomes, health problems and functional limitations and so will be most dependent on family

and public support.

Both families and public programs for the elderly face a challenge as they try to respond to this growing level of need, Amsden says. Trends affecting younger age groups, such as the rising number of women in the work force and the high percentage of single parent families, limit the time and financial resources available for helping elderly relatives.

"Because of these trends," the home economist says, "in the future more people will likely use private agencies to provide home health care for their aging relatives."

To help meet the challenges and cope with the pressures, the Delaware Cooperative Extension Service is sponsoring meetings in New Castle and Sussex Counties for families who care for elderly relatives. One of the issues discussed is the process of selecting a home health care agency.

For more information about these meetings, call the New Castle County Cooperative Extension Service at 451-1239 or the Sussex County Cooperative Extension Service at 856-5250.

