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Mental Health in Young Children

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In early childhood, between birth and five years, the focus of mental health issues is defined by the child's social-emotional and behavioral development. During these early years, children begin to develop the ability to self-regulate, verbalize their feelings, and express themselves in behaviorally appropriate ways. They respond to verbal and visual cues including the stimulation of their environment. Young children are able to form trusting relationships with parents, child care providers, and teachers. This exciting time is when children explore and learn about their world.

Early childhood mental health is influenced by:
• children's temperament,
• learning styles,
• life experiences, and
• the development of expressive and receptive language skills, including the ability to make his/her needs and wants known.

A key factor in the child's mental health is the family and the quality and security of the relationships that the child experiences.

When there are delays in the area of social-emotional development, young children may respond with challenging behaviors. The language of these children is their behavior. It becomes the role of parents and providers to interpret this behavior. Early intervention and prevention at home and in child care settings plays a big role in helping children learn the skills they need for success as they move along the developmental continuum.

Child care settings can provide an environment that promotes healthy mental health development. This is done by consistently teaching and modeling the social-emotional, behavioral, and conflict resolution skills

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From the editor...

The theme for the first of our two newsletters this year is Children's Mental Health. Articles explore positive relationships in child care settings, the development of good mental health, understanding perinatal depression, and information on Shaken Baby Syndrome.

Look for practical information on using humor for reducing stress, preparing for licensing inspections, keeping lead out of your water supply, and benefiting from the income tax credit.

Be sure to check the “Caregivers Resource Corner” for a free kit from the University of Connecticut Cooperative Extension System about infants and toddlers, as well as tips to help you stretch your dollar by applying for Food Stamps.

Your comments about our publication are always welcome.

Harry Mangle, Editor
young children need.

In conclusion, a model for promoting early childhood mental health should have as its focus specific goals, objectives, and strategies that target social-emotional and behavioral development, as shown below:

- **Goal:** To improve the child's ability to take responsibility for self and actions
- **Objective:** Follow classroom routine
- **Strategy:** Provide a visual schedule that tells the child what activities will occur and in which order. These visual cues will help him/her to understand the sequence of events and help him/her to connect visual with auditory directions. Tasks that are presented in this way also help the child to understand what is expected.

The home and child care setting are embedded with opportunities for young children to learn and practice these skills through consistent structure, routines, and rituals that are established in a warm and caring manner.

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Expressing Warmth and Affection, Helping Children Build Relationships


Expressing warmth and affection to children is important for many reasons. It’s also crucial for young children to be appropriately touched and hugged by adults. Touching and holding infants and toddlers helps them learn to trust their caregivers and feel secure. A good relationship (that is positive and supportive) promotes brain development. By remaining calm and responsive to the child’s needs, adults can reassure and calm an anxious child. Finally, these activities will help you develop a good relationship with the children, and this will help you feel good, enjoy your work, and have fun.

Here are some things you can do:

1. **Greet each child warmly.** Smile, make eye contact, and use a positive tone of voice that says you are happy to see the child. Use the child’s name. Help the child to say good-bye to the person who brought them and then to decide what to do as their first activity of the day. This approach is especially important when a child has been absent or is new to a program.

2. **Be friendly and affectionate with each child.** Warmth and affection can be shown through your expression, laughter, voice, and words (e.g., “little one,” “I am glad you are here”). It can also be expressed through touch. Leaning against a child, giving a quick gentle touch on the head, arm or shoulder, and hugging are appropriate ways to show affection through touch. Snuggling with several children while reading together is a natural and enjoyable way to do this. Show each child you care by responding individually and being sensitive to their needs.

Remember to:

- Provide regular positive attention to each child every day
- Get on the child’s level for face-to-face interactions
- Use a pleasant, calm voice, and simple language while making eye contact
- Provide warm, responsive physical contact
- Listen carefully to children and encourage them to use words to express their feelings
- Praise children when they do what you ask them to or are playing well with other children

3. **Think about whether your joy and your good feelings about children are easy for them to see.** Those who need the most warmth and affection.

4. **Make sure that your words and interactions with children are more positive than negative.** Avoid criticism, nagging, yelling, and scolding. Look for each child’s strengths. Enjoy each child’s individuality and sense of humor; smile, laugh, be playful, and have fun.

5. **Show children how to talk to other children and build friendships.** Use group activities such as circle time or story time as well as role-playing to help children learn how to say nice things, share, and help each other. Model these positive behaviors and praise children who follow directions. If needed, use incentive charts or stickers to encourage desired behaviors.

Ed. Note: The Health and Safety E-News and a variety of resources are also available online at http://www.healthychildcare.org/hccpsignup.cfm. For additional information, contact the American Academy of Pediatrics at 888.227.5409 or email childcare@aap.org.

Further information may be obtained by calling Liz Bicio, Program Manager, Early Childhood Consultation Partnership, Advanced Behavioral Health, 860.704.6378.
Humor in Afterschool Programs - A Stress Reducer!

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How lucky we are to work with kids - a constant source of humor, laughter, and fun! Having all three in plentiful supply in your afterschool program will help promote the warm, caring environment every child needs. Relationships among children, staff members, and parents will be enhanced by an infusion of a healthy dose of humor.

Benefits of humor for adults

A good laugh is known to reduce anger, fear, frustration, stress, and improve one's attitude. Laughter helps promote the warm, caring environment every child needs. Relationships among children, staff members, and parents will be enhanced by an infusion of a healthy dose of humor.

What are some of the benefits of humor for the children attending your program? Humor, the great communicator, is a “splendiferous” way to get and hold children’s attention. It can motivate, promote teamwork and positive thinking, increase morale, relax everyone, and release creativity. If children have developed a sense of humor, they can more easily build positive relationships.

Encourage everyone’s sense of humor

Keep a supply of stress-reducing “toys” where staff can take advantage of them. Have a bulletin board where amusing articles, posters, comics, cartoons, and bumper stickers can be posted. Keep a “Grin Bin” of funny magazines, jokes, games, books, and props for humor breaks. Make humor a regular part of your staff development.

Help children liberate their senses of humor

The program staff sets the tone and establishes the atmosphere; they are the role models. Since children may spend the majority of the leisure part of their day in an after-school program, humor, laughter, and fun should permeate every part of it. An ideal way to encourage humor is through books in the quiet area. Children enjoy the humorous poetry of Shel Silverstein and Jack Prelutsky. Keep several collections of jokes and riddles. The amusing series of books by Beverly Cleary about Ramona or Harry Huggins are popular with children; they find Barbara Park’s Skinny Bones hilarious as well. Tales of a Fourth Grade Nothing and Superfudge are just two of the many funny books by Judy Blume. When in doubt about what humorous books to add to your collection, just ask the kids.

Children have a natural sense of humor that should be encouraged whenever possible. Can there be any better job than having the daily responsibility of creating an exciting, enjoyable environment where everyone can have fun? I don’t think so!

Question:

It’s tax time again! I’ve recently received some information regarding a tax credit for eligible parents of children in child care programs. As a working parent of two children, I am very interested in finding out more details, such as what identifying information is needed from my provider to file my taxes.

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Answer:

Indeed, the April 15 tax deadline is not far away. As you mentioned, eligible families are able to participate in several available programs including the following:

- The Dependent Care Tax Credit (DCTC) allows families to subtract a percentage of their child care expenses from their total income tax liability. All families with children younger than age thirteen or a spouse or other dependent of any age who is incapacitated are eligible for this credit, regardless of income level.
- The Earned Income Tax Credit (EITC) is a refundable federal income tax credit for working families who have low to moderate earnings. It is designed to boost the wages of eligible families.
- The Child Tax Credit is a non-refundable credit designed to offset the cost of raising children under the age of 17. All but very high earning families are eligible to receive the credit.

For additional information:

- National Women’s Law Center Tax Credit Outreach Campaign http://www.nwlc.org/details.cfm?id=1742&section=tax
- Center for Budget and Policy Priorities http://www.cbpp.org/d2005/ has useful tax credit toolkits, including materials that can be accessed and downloaded online. Some documents are available in English as well as Spanish.

Furthermore, please contact your provider directly to obtain either their Social Security number or other taxpayer identification number to complete your taxes. If you can’t get this information, be prepared to show that you made a reasonable effort to obtain it. For additional questions, you may also contact the Internal Revenue Service 800.829.1040 or the State Revenue Services 800.382.9463.

Call 2-1-1 Child Care for specific information regarding professional organizations, child care resources, statistics, training opportunities and business loans. The website at www.childcareinfonline.org also provides information on quality child care. For more information on any of these topics, please call 2-1-1 or 800.505.1000.
MAKING ENDS MEET: ELIGIBILITY FOR FOOD STAMPS

Food Stamps help people afford more food for themselves and their families. Food stamps may be used at most supermarkets, some neighborhood grocery stores, and even some farmer’s markets.

Eligibility

People receiving SSI or TANF are eligible for Food Stamps. Eligibility for other individuals is determined based on level of income, number of people in the household, cash in the bank, and monthly expenses.

Examples of Documents needed to apply:

- Identification (birth certificate, driver’s license, or other proof of identity)
- Social Security number for all household members
- Proof of income (Pay stubs, proof of child support/alimony, workers compensation, etc)
- Proof of expenses (Bills for rent or mortgage, utilities, bank statements, and medical expenses if someone in the household is over 60 years old or disabled)

For more information and to apply, contact Tracy Helin, Connecticut Association for Human Services, Telephone: 860.951.2212 Ext. 236; Email: thelin@cahs.org, or the Connecticut Department of Social Services (DSS) at 800.842.1508. The Food Stamp application is also available online at http://www.ct.gov/dss.

Keys to Great Caregiving is a free resource from The University of Connecticut Cooperative Extension System. It consists of eight brochures that give parents and caregivers practical information on fun and learning with infants and toddlers as well as “best practices” regarding their care.

The Keys include:
- Care for Yourself
- Cuddle, Talk, and Read with Your Child
- How Your Child Develops
- Be Playful with Your Child
- Show Your Child the World
- Teach Self Control
- Practice Health and Safety
- Healthy Eating

Many of you may have already received a set of The Keys by mail. Please help us evaluate this new resource by returning the evaluation card that was included in your mailing. To order additional ones or your first complimentary set, visit the website www.thekeys.uconn.edu or contact Cathy Malley at 203.207.3267 or cathy.malley@uconn.edu.

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Shaken Baby Syndrome

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A Tragic Situation

Shaken Baby Syndrome is an issue of tragic proportions. Annually, it victimizes 50,000 children between birth and five years of age and is responsible for 15% of all children's deaths each year. Shaken Baby Syndrome is the result of forcefully shaking a baby, causing the baby's head to whip back and forth, resulting in the child's underdeveloped brain banging against the skull.

As little as three seconds of violently shaking a baby can cause serious injury or death. Shaking a baby usually occurs out of anger and frustration and crying often triggers the anger. It is important that all child caregivers and parents understand the harm caused by violently shaking a baby.

Preventing Shaken Baby Syndrome

All caregivers should have a plan to keep the children in their charge safe from any injury. Preventing shaken baby syndrome should be part of that plan. In the spring of 2003, the Children's Trust Fund launched the Shaken Baby Prevention Project. It was inspired by Dr. Mark Dias, a Pennsylvania neurosurgeon, who developed a parent education program designed to inform and educate new parents on Shaken Baby Syndrome. In referring to his own frustration parent-
The exact cause of perinatal depression is unknown. Some contributing factors are: changes in hormone levels, a difficult pregnancy or birth, medical problems in the mother or baby, lack of sleep, feeling alone, loss of freedom, sudden changes in routines, personal or family history of depression, prior experience with perinatal depression, and/or high levels of stress.

Effects on Mothers and Children

Perinatal depression is seen in 10 - 20% of all new mothers. As a result, mothers are less likely to engage in preventive health behaviors, more likely to smoke, and have limited interactions with their infants. Research has also shown that depression during pregnancy, which extends to the postpartum period, has a negative impact on the emotional and cognitive developmental growth of young infants. It also has been adversely associated with infant temperament and mother/infant attachment.

An infant is typically in tune with the emotional signals in his/her mother's voice, gestures, movement, and facial expressions. As a result, young children with depressed mothers display more negative and fewer positive emotions than their counterparts with non-depressed mothers. In response to negative early experiences, infants of clinically depressed mothers may withdraw from daily activities and eventually avoid any kind of interaction with caregivers. They may also be more irrita-

Dr. Dias recognized that this type of frustration was often at the root of Shaken Baby Syndrome. He believed that shaken baby syndrome could be prevented, saving lives and millions of dollars.

The goal of the Children's Trust Fund Shaken Baby Prevention project is to tell all parents and child caregivers that they should never, under any circumstances, shake their baby or any baby in their charge. In the past several years, the Trust Fund staff presented a prevention program to hospitals, child caregivers, schools, and community-based organizations. The presentation includes facts, a video that highlights families impacted by Shaken Baby Syndrome, and materials.

What You Can Do

As a child caregiver you can prevent shaken baby syndrome by taking these simple steps:

- Make sure that everyone who cares for a child knows about the dangers of shaking.
- Make an agreement with parents that you will call for support if you become frustrated with a child in your care.
- Don't take it personally. The baby is not upset with you. He or she may be hungry, bored, frustrated, angry, or sleepy.

For additional information on the Connecticut Shaken Baby Prevention Project, please contact Gina Beebe at the Children's Trust Fund.

References for this article as well as additional information may be found at:
- www.dph.state.ct.us/BCH/Family%202OH%20H%20FamHS.html
- www.nmha.org
- www.postpartum.net
- www.nimh.nih.gov
- www.dmhas.state.ct.us
Preparing for a Licensing Inspection

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This article addresses questions received by the licensing unit over the years regarding the inspection process for licensed child day care facilities. Connecticut state law requires that child day care centers and group day care homes be inspected every two years. At least one third of all licensed family day care homes must be inspected each year.

Factors that determine the length of the visits are: licensed capacity of the program, time of day for the inspection, number of violations that need to be cited, and if observations of the program are included in the inspection.

Licensing specialists realize that these inspections can disrupt a facility’s normal routine and therefore try to work around the program’s schedule as much as possible. An inspection should never distract a provider from the care and supervision of the children.

Unannounced Inspections

An unannounced inspection is not always a full inspection; it could be a follow-up to a complaint or to a previous unannounced inspection. Unannounced inspections will include these components:

- The licensing specialist will identify him/herself (showing his/her badge), and explain the reason, purpose, and format of the inspection.
- If children are present, the number of children and the staff/child ratios are checked.
- An inspection will be made of all areas of the licensed premises, indoors and outdoors. Inspection and/or supplemental observation forms are completed.
- If the program serves children under age 3 and it is a group day care home or center, an additional inspection form will be used.

How can programs shorten the length of these inspections?

- Be sure that records on children and

Your Drinking Water—Is it Lead-Free?

Clifford McClellan, Sanitary Engineer 3
Private Well Program, Environmental Health Section
Department of Public Health

Where Lead is Found

Lead in drinking water rarely comes from natural sources. Rather, it is more likely to come from metal piping and joining compounds (such as lead pipes, lead-based solder & fluxes, brass faucets & fixtures, and lead contaminants in older copper pipes) that distribute the water throughout your home or facility. Lead levels in your drinking water are likely to be highest with:

- lead water pipes or accessories,
- copper pipes with leaded solder or flux, and
  a. if the building is less than 5 years old, with the natural mineral lining from water not yet formed
  b. if there is “soft” (low mineral content) well water, or
  c. if the water sits in the pipes for hours at a time without usage.

Overexposure to lead is a serious matter.

Any lead exposure to children is unsafe, and drinking water containing lead can add to that exposure. Growing children will more rapidly absorb any lead in the water, which can easily damage a child’s physical development and ability to learn.

Steps to remove lead

1. The first water from the tap normally contains the highest lead levels, so flushing faucets routinely at the start of the day (especially in kitchens) greatly reduces lead levels.
2. Water for drinking, cooking, and preparing baby formula should always come from a flushed cold-water tap. Do not use hot water for...
cooking or drinking as it has a tendency to leach lead into the water.
3. If any of the exposed water supply pipes have a dull gray color and can easily be scratched or bent, they are probably made of lead and should be replaced.
4. Icemakers that have been idle for extended periods should have their water supply lines flushed thoroughly before being used.
5. For new or repair plumbing work, make sure the licensed plumber uses lead-free materials (e.g., lead-free solder & flux paste.)
6. Since stray electrical currents can accelerate metallic pipe corrosion and the potential for lead released in the water, a licensed electrician should be consulted to check the plumbing for proper grounding with an external ground rod.

Your Water System

Public Water Systems - Call the water system and ask them about lead levels in your water.

Private Well Systems - Although the requirements for lead testing are far less stringent in well systems than public ones, your level of protection does not have to be less if you are proactive in having your water tested.

Recommendations

1. The CT Department of Public Health (DPH) strongly advises that you test your well periodically for corrosiveness and lead levels.
2. Contact your local health department or the DPH website at www.dph.state.ct.us/brs/lead/lead_program.htm for information and a listing of state approved laboratories in your area that can conduct these tests.
3. For assistance to interpret tests and to take corrective action, contact your local health department, the DPH Private Well Program 860.509.7296, or the DPH Lead Program 860.509.7299.

Please share the newsletter with all staff.