Spanking, Challenging Behavior and Child Abuse

Hitting children teaches them that it is acceptable to react violently when angry. It does not help them learn how to get what they need in a socially acceptable way. Children with challenging behaviors have a reason for their behavior. Finding out why the child is using the behavior opens opportunities to meet the child’s needs appropriately. Programs in Keystone STARS can ask their Regional Key for an early childhood mental health consultant at https://www.pakeys.org/pages/get.aspx?page=Programs_ECME

Sometimes the child is expected to do something beyond the child’s level of development. In this situation, expectations should be lowered to a developmentally appropriate level. Some children use challenging behavior to seek attention that they are not getting for desired behavior. Some are temperamentally easily excited. They may misbehave when over stimulated. Closely observing children can reveal cues about when and why the child is misbehaving. Adults can use these cues to help the child solve problems.

A recently released position statement of the American Academy of Pediatrics strongly opposes striking a child for any reason. Children can be physically harmed by being hit.

Whenever an adult feels a need to strike a child, it is best to step back from the situation. Take a deep breath and get control of the feelings about the misbehavior. Give the child an opportunity to take a break from the situation too. The child is not “bad.” What the child was doing is a problem that needs to be solved.

As calmly as possible, redirect the child away from the situation where the problem occurred. Help the child go to a quieter place with a quiet activity the child can do alone. For example, encourage the child to look at a book, or draw. This usually helps the child to calm down. It is not “time out” but “time in” a situation that helps the child get control of overwhelming feelings. Punishment involves causing harm or pain. It is not an effective way to teach desired behavior. Use logical consequences. For example, if the situation involves an object, remove the object from the situation. Allow the child to return to the group when the child feels able to participate as expected. Briefly praise the child’s success in calming down.

What does the child do well? Give the child an opportunity to succeed using what you know are the child’s strengths. Give the child focused praise for doing something well. Help the child learn to express feelings in acceptable ways.

(continued on page 2)

Fruit Group Quiz

1. Which of these nutrients can you get from eating whole fruit, but is not usually in juice?
   a. Vitamins
   b. Minerals
   c. Fiber
   d. Sugar

2. Which of these fruits is a source of vitamin C?
   a. Pineapples
   b. Strawberries
   c. Oranges
   d. All of them

(continued on page 2)
Be aware of the possibility that a child who is misbehaving may be abused. All child caregivers are mandated reporters of suspected child abuse. Teachers/caregivers who learn about children being hit by angry caregivers have a legal obligation to report the situation as suspected child abuse. Reporting will start a process to protect the child and help the person who is hitting to use more effective discipline.

ECELS offers three options to meet the current state requirements for child abuse training. One is a new video-based, interactive self-learning module about child abuse and neglect. A second way is to arrange with ECELS to provide an onsite workshop that covers this information. A third option is a two-part webinar about this topic. ECELS and PACCA are presenting the live webinar on May 5 and 12, 2016. Check the ECELS website webinar listings in mid-April to register. Look for all three training opportunities on the ECELS website, www.ecels-healthychildcarepa.org. Select the Professional Development tab, then the self-learning module, workshop or webinar sections.

Another useful tool is a 4 part DVD set with 10 lessons about managing children with challenging behavior. These lessons feature interviews with national experts, attractive graphics and video taken in early care and education programs. Each lesson has multiple short segments to use together or separately at a staff meeting or in a workshop. To review a sample or to purchase the DVD set, go to EXCHANGE at www.childcareexchange.com.

3. Fruits are a source of which of the following?
   a. Folate
   b. Vitamin D
   c. Calcium
   d. Protein

4. Eating a diet rich in fruits and vegetables as part of overall healthy diet may protect against certain types of cancer.
   a. True
   b. False

5. Many Americans don’t get enough of the nutrient potassium. Which of the following is a good fruit source of this mineral that is known to help regulate blood pressure?
   a. Dried apricots
   b. Bananas
   c. Orange Juice
   d. All of the above

See Correct Answers on page 4

Infants’ Bottles – Warming Them Safely
To prevent burns, follow the PA State Regulations about warming formula/milk. The regulations state bottled formula may not be heated in a microwave oven PA Regulation §3270.166 (7). Hot water temperature in areas accessible to children may not exceed 110°F. PA Regulation §3270.69(b). Microwave heating creates hot spots in liquids and foods which can cause severe injury. Temperatures over 110°F. can be reached in crock pots and bottle warmers. Do not use these devices to warm infants’ bottles.

Infants’ bottles do not have to be warmed. Feeding bottles that are cold from the refrigerator is safe and healthy. Talk with parents about how feeding cold bottles is OK. If warming is desired, put the bottle in a bowl of warm tap water for no more than 5 minutes.

The PA Department of Human Services prepared and distributed a Fact Sheet about how to warm infant bottles safely. This Fact Sheet is accessible on the ECELS website. Go to www.ecels-healthychildcarepa.org. Select the Publications tab, then Fact Sheets.
Media and Children: Parenting Tips

Children are “growing up digital.” They need to learn to use only safe and healthy digital media. Parents and other caregivers should teach children these skills. The Council on Communications and Media of the American Academy of Pediatrics (AAP) offers a list of tips to help parents and other caregivers guide children. The AAP gives permission to use all or some of the tips in print, acknowledging the AAP as the source.

- **Treat media as you would any other environment in the child’s life.** Set limits. Children need them. Know who are your children's friends, both online and off. Know what platforms, software, and apps your children are using. Know where they are going on the web. Watch closely when they are online.

- **Set limits on use of media and encourage playtime.** Unstructured offline play stimulates creativity. Give priority to unplugged playtime every day. Join the children in play without media often.

- **Families who play together, learn together.** In media activities, family participation encourages social interactions, bonding, and learning. If children play a video game, caregiving adults should play the game with them. Use the activity to teach and model good sportsmanship.

- **Be a good role model.** Teach and model kindness and good manners during online activities. Limit your own media use. Make yourself available and connected with your children. Interact, hug and play with them instead of staring at a screen.

- **Know the value of face-to-face communication.** Very young children learn best through two-way communication. Engaging in back-and-forth "talk time" is critical for language development. Conversations are best face-to-face. When face-to-face interactions are not possible, use electronic devices only for two-way conversation. A video chat with a traveling parent or far-away grandparent combines a visual image with sound in an interaction. Research has shown that it’s that "back-and-forth conversation" that improves language skills, not a one-way interaction with a screen.

- **Create tech-free zones.** Keep mealtimes, family time and social gatherings tech-free. Recharge devices overnight—outside the child's bedroom. Prevent use of these devices when children should be sleeping. Encourage more family time, healthy eating habits, and better sleep with these measures.

- **Avoid using technology as an emotional pacifier.** Media can keep children calm and quiet, but it’s not a good way to learn to calm down. Children need to learn to recognize and handle strong emotions. Teach techniques to calm down such as slow and deep breathing. Engage them in talking about how to solve problems. Suggest healthy physical activity as a strategy for channeling emotions and creating activities to manage boredom.

- **Apps for kids – do your homework.** More than 80,000 apps are labeled as educational. Most lack research that shows they do what they claim. Products pitched as "interactive" should require more than "pushing and swiping." Look to organizations like Common Sense Media (www.commonsensemedia.org) for reviews about age-appropriate apps, games and programs. Use their evaluations as a guide.

- **Supervise children closely to prevent them from posting private information online.** Children need to learn to behave appropriately in both the real and the online world. It takes until children are teens to be able to understand that a platform’s privacy settings do not make things actually "private." Images, thoughts, and behaviors shared online will instantly become a permanent part of their digital footprint.

- **Children make mistakes using media.** Some indiscretions, such as sexting, bullying, or posting self-harm images are a serious problem. Parents should observe children's behaviors. If concerned about what might be occurring, seek professional help, starting with the child’s pediatrician.

Obesity Prevention with **5 – 2 – 1 – 0**

Early care and education providers are becoming more aware of their role in helping families prevent childhood obesity. Share these easy steps with families in your program:

**5 or more fruits and vegetables daily.** Farmer’s markets reopen in the spring. Spring produce is a great way to add new fruits and vegetables to meals and snacks. The more colorful your selections the better. Gently encourage children to try fruits and vegetables that are appropriate for their age. Offer praise when they do. Model good eating habits. Food should not be used as a reward or punishment.

**2 hours or less of recreational screen time daily.** Children younger than 2 years should not have any screen time. Children older than 2 years should have screen time limited to those programs which are developmentally appropriate. Be sure there is no violence, sexually explicit material, stereotyped material, or advertising. Make a family rule: no screen time during meals and snacks.

**1 hour or more of physical activity daily.** At all ages, encourage daily physical activity. Activities do not have to involve organized sports or structured games. Walking or biking to the park, jumping rope, and shooting hoops can involve the whole family. Spring temperatures make it comfortable to take a walk every day. Children love a walk in the rain!

**0 sugary drinks.** Offer more water. Make water easily available to children. Serve milk with the appropriate fat content for a child’s age. Breast milk is the best milk until at least 12 months of age. Use whole or 2% milk until 24 months of age, and 1% milk after that. Limit juice. Offer none or at most one 4 ounce serving daily.

Use the 5 - 2 - 1 - 0 formula to help families make changes to adopt a healthier lifestyle. March is National Nutrition Month with materials for all age groups and education settings, including child care. Go to [http://www.letsgo.org/toolkits/](http://www.letsgo.org/toolkits/). Look for Child Care information. The Toolkit is full of information and fun ideas!

Contributed by Nancy Alleman, BSN, RN, CRNP, CSN, Lead T/TA Coordinator and Cheryl Frank, RN, ECELS T/TA Coordinator

---

**Answers to Fruit Group Quiz from page 1**

1. c
2. d
3. a
4. a (True)
5. d
Preventive Child Health Care Schedule Update

In 2016, the American Academy of Pediatrics (AAP) adopted a new preventive health service schedule. All regulated early care and learning programs in Pennsylvania must make sure that enrolled children have had health screenings according to the AAP schedule. This PA Department of Human Services (DHS) regulation applies to centers, group homes and family child care homes. The Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program uses the current AAP schedule also. The EPSDT schedule applies to Early Head Start and Head Start programs.

Any documentation that the child has received the required services is acceptable. The state offers the Child Health Report form (CD51) that child care providers can give to families to collect required information about screenings, vaccines and health concerns for enrolled children. Although any document with the necessary information is acceptable, many child care programs use the CD51. This form has a box to check that the AAP recommendations have been met. Often, health professionals have office staff complete these forms. It is best if the report gives the dates and types of required services that were done to verify that the screenings were done at the age-appropriate time.

The new AAP schedule requires routine vision screenings for early detection and treatment of potentially permanent and crippling vision problems. Vision screening is required for newborns up to 12 months of age by inspection of the eye and red reflex. Visual acuity screening should use age-appropriate symbols for cooperative 3 year olds and at annual well child visits thereafter. Children with abnormal screening results should see a pediatric ophthalmologist or optometrist who specializes in providing care for children.

Environmental Health Problems & Solutions in Child Care

The website of the United States Environmental Protection Agency (EPA) has reliable information about many environmental issues. Use this website to find resources to promote and maintain environmental health.

Indoor Air Quality refers to the air quality within and around buildings and structures. It determines the health and comfort of people in buildings. During cold weather, indoor air quality can be a problem. Windows and fresh air intakes are used less in winter than in warmer months. As warmer weather arrives, if there are windows that open and the outdoor air quality is good, let fresh air in. Some buildings have windows that don’t open. These buildings need to put fresh outdoor air into the building via their air circulation systems.

The EPA points out that child care facilities have many sources of indoor air pollution. The air in child care facilities is usually two to five times more polluted than outdoor air. Common sources of indoor air pollution include building materials and furnishing, combustion sources such as oil, gas, kerosene, coal, wood, and tobacco products. Older facilities may have deteriorated asbestos-containing insulation. Any facility may have one or more of these problems:
- wet or damp carpet
- cabinetry or furniture made of certain pressed wood products
- Products for household cleaning, maintenance, or personal care, hobbies
- Mold or dust in central heating, cooling and humidification devices
- Radon from the earth below cracks in the foundation
- Pesticides

Use the ECELS Indoor Air Quality Self-Learning Module on the ECELS website and the links on page 6 about solving environmental problems.

Learn what to do to reduce environmental hazards in and around education facilities.

(continued on page 6)
Child Care Health Consultant
Susan Good, RN, BSN, SFW, CCHC

Child Care Health Consultant (CCHC) Susan Good has a long, winding career path. Her education and experience includes nursing, business and social services. Recently, she completed the Strength Based Family Worker (SFW) program at Temple University. She has worked as an emergency and neonatal nurse, and as a hospital administrator. Sue has also owned/directed a small rural child care center.

Sue enjoys her work as a child care health consultant. She has agreements with the Northwest Regional Key and the Southwest Regional Key to provide CCHC services as well as contracts with private programs to provide CCHC services for them. One of her current activities involves helping ECELS implement the grant-funded Infant/Toddler Quality Improvement Project. She is a member of the Keystone Stars Revision TA - Continuous Quality Improvement Committee. In addition, she gives presentations at gatherings of early care and educational providers.

Mostly Sue likes to partner with child care providers to share joyful stories about the children. She is always ready to share and learn with early educators. She helps them provide a strong health and safety foundation to nurture children.

On a personal note, Sue lives on a farm with her husband surrounded by nearby extended family. She has a variety of hobbies. One of her favorites is quilting. She likes a quote from Fredrick Douglas, “It is easier to build strong children, than to repair broken men.”

(continued from page 5: Environmental Health Problems & Solutions in Child Care

Asthma http://www.epa.gov/childcare/information-child-care-providers-about-asthma

Chemical Hazards http://www.epa.gov/childcare/information-child-care-providers-about-chemical-hazards

In this Issue:
- Spanking, Challenging Behavior and Child Abuse
- Fruit Group Quiz
- Infant’s Bottles—Warming Them Safely
- Media and Children: Parenting Tips
- Obesity Prevention with 5 – 2 – 1 – 0
- Preventive Child Health Care Schedule Update
- Environmental Health Problems & Solutions in Child Care
- Child Care Health Consultant Susan Good, RN, BSN, SFW, CCHC

Drinking Water http://www.epa.gov/childcare/information-child-care-providers-about-drinking-water

Environmental Tobacco Smoke http://www.epa.gov/childcare/information-child-care-providers-about-environmental-tobacco-smoke

Green Cleaning http://www.epa.gov/childcare/information-child-care-providers-about-green-cleaning

Indoor Air Quality http://www.epa.gov/childcare/information-child-care-providers-about-indoor-air-quality

Lead http://www.epa.gov/lead/forms/lead-hotline-national-lead-information-center

Mercury http://www.epa.gov/childcare/information-child-care-providers-about-mercury

Mold http://www.epa.gov/childcare/information-child-care-providers-about-mold

Pesticides/Integrated Pest Management (IPM) http://www.epa.gov/childcare/information-child-care-providers-about-pesticidesintegrated-pest-management

Editor: Susan S. Aronson, MD, FAAP. Contact ECELS at: 484-446-3003 or 800-24-ECELS; ecels@paaap.org; PA AAP, Rose Tree Corporate Center, Bldg II, Suite 3007,1400 N. Providence Road, Media, PA 19063.