



California Childcare Health Program (CCHP)

E-News for

Child Care Health Consultants

June 2009

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Greetings

Now that the threat of the H1N1 (Swine) flu pandemic is less serious than initially thought, we have an opportunity to re-think our preparedness for a true pandemic or other emergency situation. In a sense, the H1N1 threat was a chance to see how well the systems and materials we have in place will work when a true pandemic or emergency occurs. Emergency preparedness is hard to address when the ongoing, day-to-day needs in ECE programs are so pressing. But, the threats of fires, earthquakes and pandemics are real and ECE programs have a special responsibility to prepare for these possibilities because young children are particularly vulnerable to the physical and emotional effects of these events. Families will inevitably look to ECE programs for guidance and assistance in the event of an emergency and will also depend on ECE programs to care for their children competently in the event of an emergency. We encourage you to look at the NACCRA publication, *Is Child Care Ready? A Disaster Planning Guide for Child Care Resource & Referral Agencies*. This document can be used to train child care providers on how to prepare for and recover from disasters. NACCRA's web page, *Children and Disasters*, www.naccrra.org/disaster also has many excellent resources for planning for disasters. CCHP also has a Health and Safety Note, [Emergency/Disaster Preparedness for the Child Care Setting \(PDF; 139KB; 2pp\)](#) and another, [Preparing for Pandemic Flu in Child Care Programs \(PDF; 141KB; 2pp\)](#). See the resource list below for more information on H1N1. In addition to being relieved that H1N1 is "just" another version of the flu, take time to work on planning for the more serious pandemics, disasters and emergencies that may lie in the future. It will be time well-spent.

Announcements

New and Updated Spanish Language Health & Safety Materials are Now

Available From the CCHP Website.

The Importance of the Family Meal [La importancia de comer en familia \(PDF; 87KB; 1p\)](#)

Croup in the Child Care Setting [Tos Ferina en el Establecimiento de Cuidado Infantil \(PDF; 129KB; 1p\)](#)

Difficulty in Processing and Organizing Sensory Information [Dificultad para procesar y organizar la información sensorial \(Disfunción de integración sensorial\) \(PDF; 134KB; 2pp\)](#)

Integrated Pest Management of Rodents in ECE Settings [Desratización integrada en los establecimientos de cuidado de niños \(PDF; 137KB; 2pp\)](#)

MRSA Infections in Child Care Programs [Infecciones por SARM en los programas de servicios de cuidado de niños \(PDF; 152KB; 2pp\)](#)

Responding to Life Threatening Allergic Reactions [Cómo responder ante reacciones alérgicas mortales en el establecimiento de cuidado de niños \(PDF; 153KB; 2pp\)](#)

U.S. Consumer Product Safety Commission Recalls Eddie Bauer Soothe & Sway Play Yards

www.cpsc.gov/cpscpub/prerel/prhtml09/09219.html

Resources

Resources on H1N1 Flu

The CDC website for new information regarding H1N1 (Swine) influenza www.cdc.gov/h1n1flu

American Academy of Pediatrics fact sheet on responding to a seasonal flu outbreak in child care: ["Strategies and Resources for Child Care Providers and Out-of-Home Caregivers of Children."](#)

Red Cross Flu Checklist www.redcross.org/www-files/Documents/pdf/Preparedness/SeasonalFluChecklist.pdf

Child Care and Preschool Pandemic Influenza Planning Checklist from the U.S. Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) available here:

www.pandemicflu.gov/plan/pdf/child_care.pdf

The Community Care Licensing Division's Child Care Update for April 2009 is now available at www.cclcd.ca.gov/res/pdf/CCUpdate0409.pdf.

Topic Index

- Licensing management information
- Child care advocate change
- Licensing requirements
- Unusual incident/injury reporting
- Landlord tenant laws
- Criminal record transfers
- General health and safety information
- Poison-proof your home and child care facility!

Fire extinguisher recall
Renuzit crystal elements warning
Extra! Extra! Read all about it!
Furlough Fridays update
National earthquake preparedness month
2-1-1 call centers
Licensed child care statistics
Summary

The Tragedy of Child Care in America by E. Zigler, K. Marsland, H. Lord, Yale University Press, 2009. In this new book, Zigler and his co-authors examine why the United States has failed to establish a comprehensive high-quality child care program. Edward Zigler has been intimately involved in this issue since the 1970s, and here he presents a firsthand history of the policy making and politics surrounding this important debate. Good-quality child care supports cognitive, social, and emotional development, school readiness, and academic achievement. This book examines the history of child care policy since 1969, including the inside story of America's one great attempt to create a comprehensive system of child care, its failure, and the lack of subsequent progress. Identifying specific issues that persist today, Zigler and his coauthors conclude with an agenda designed to lead us successfully toward quality care for America's children.

CSEFEL Infant Toddler Training Modules now available in Spanish

The [Center on the Social and Emotional Foundations for Early Learning \(CSEFEL\)](#) has introduced a new [Spanish version](#) of the popular Promoting Social and Emotional Competence: Infant Toddler Training modules. These modules were designed based on input gathered during focus groups with program administrators, T/TA providers, early educators, and family members about the types and content of training that would be most useful in addressing the social-emotional needs of young children. Both the English and Spanish versions can be downloaded for FREE.

URL for English version:

[www.vanderbilt.edu/csefel/inftodd.html?
utm_source=TACSEI+%26+CSEFEL+Updates&utm_campaign=1724c11355-
TACSEI+and+CSEFEL+Updates_4.2009&utm_medium=email](http://www.vanderbilt.edu/csefel/inftodd.html?utm_source=TACSEI+%26+CSEFEL+Updates&utm_campaign=1724c11355-TACSEI+and+CSEFEL+Updates_4.2009&utm_medium=email)

URL for Spanish version:

[www.vanderbilt.edu/csefel/modulos_inftodd.html?
utm_source=TACSEI+%26+CSEFEL+Updates&utm_campaign=1724c11355-
TACSEI+and+CSEFEL+Updates_4.2009&utm_medium=email](http://www.vanderbilt.edu/csefel/modulos_inftodd.html?utm_source=TACSEI+%26+CSEFEL+Updates&utm_campaign=1724c11355-TACSEI+and+CSEFEL+Updates_4.2009&utm_medium=email)

Autism in California Increases Twelfefold

California saw a twelfefold increase during the past two decades in the number of autistic people who are receiving services through regional centers, a new state study reveals.

[By Sandy Kleffman, Contra Costa Times](#)

Posted: 05/06/2009 04:21:28 PM PDT

Updated: 05/07/2009 08:50:04 AM PDT

California saw a twelvefold increase during the past two decades in the number of autistic people who are receiving services through regional centers, a new state study reveals.

The dramatic rise in autism has broad implications for California families, taxpayers and social service agencies.

"This is a shocking recognition of the challenges we face, today and into the future," said Rick Rollens, the father of an autistic child and a co-founder of the Medical Investigation of Neurological Disorders Institute at UC Davis.

From 1987 to 2007, the number of children and adults with autism served by regional centers rose from 2,701 to 34,656, notes a study released this week by the state Department of Developmental Services.

That is a nearly 1,200 percent increase. By contrast, the state's general population grew by 27 percent during that time frame.

Other disabilities saw much smaller growth rates. Regional center clients with mental retardation increased by 95 percent, cerebral palsy by 73 percent, and epilepsy by 66 percent.

People who have autism now outnumber those with cerebral palsy in the state, and they will soon surpass those with epilepsy.

Autism is a severe developmental disorder marked by communication difficulties, an adherence to routines and a lack of interest in socializing with others.

No one knows what causes the disorder, but many experts now believe one or more environmental factors trigger autism in genetically susceptible children.

The latest findings highlight the urgency in discovering a cause, Rollens said. He added that it is ironic that the report is being released shortly before the regional center system faces a \$100 million budget cut beginning in July.

This is the third major autism study produced by the state. The numbers understate the amount of autism in California, said Julia Mullen, deputy director of the community services and support division of the state Department of Developmental Services.

The statistics include only people who are receiving services through regional centers, which represents about 75 to 80 percent of the autistic population, the study estimates.

The numbers also include only those with classic autism. For the most part, people with other autistic spectrum disorders, including Asperger's syndrome and Rett's disorder, are excluded from the statistics.

In a finding with important ramifications for the future, the study notes that within the next five years, more than 4,000 teenagers who have autism will reach adulthood. They will be added to the 6,000 adults already in the regional center system.

By 2018, the study estimates, the number of adults with autism will exceed 19,000. It is crucial, Rollens said, that the state develops the infrastructure to serve these families, despite the tight financial times.

Mullen said her agency has developed guidelines on diagnosing autism and effective interventions. It also has placed autism specialists in each of the 21 regional centers to work with the community on approaches and programs, she said.

The study reveals that the ratio of males to females who have autism continues to increase. Today, nearly five boys have the disorder for every one girl.

The percentage of people who have both autism and mental retardation has dropped significantly, a trend that may provide clues for those trying to solve the autism puzzle.

Rollens noted that the state does not have experience in dealing with thousands of adults who have autism, but will need to prepare for what is often a lifelong need for care. "The impact of what we see in these numbers is sobering," he said.

New Educational Toolkit for Educators on Autism

Autism Speaks, in partnership with the Ad Council, and the Centers for Disease Control and Prevention launched an educational tool kit, *Talking to Parents About Autism*, designed to promote early intervention and encourage educators to speak to a child's parents if they suspect a developmental delay. This is the first program to provide teachers with tools to prepare to begin this critical dialogue. The new kit includes a *Talking to Parents About Autism* training DVD that features information and advice about how educators can best broach the topic of a potential developmental delay. Also included in the tool kit is an *Early Childhood Milestone Map*, which can be printed and distributed to parents so that they can more easily track their child's progress against the typical, age-specific developmental milestones. Research has shown that early detection and intervention can make a significant difference in the life of a child with autism. Educators, who interact with and observe children on a daily basis, are in the ideal position to know if a child's development seems delayed. The entire kit, available in both English and Spanish, is available at

www.autismspeaks.org/whatisit/talking_to_parents_action_kit.php

IAC Express

Immunization News from the Immunization Action Coalition

www.immunize.org/express/issue799.asp

CDC-TV Segment on Childhood Immunizations

The Centers for Disease Control and Prevention (CDC) has put together a

short video to help answer questions that parents may have about childhood immunizations. "Get the Picture: Childhood Immunizations" is approximately six minutes long and features a group of mothers discussing vaccines with an expert from the CDC. The Web site includes a full transcript, plus instructions for downloading or sharing the video via Facebook, Google and other sites. To access the video, go to www.cdc.gov/CDCTV/GetThePicture/index.html.

Consortium Rejects FDA Claim of BPA's Safety: Scientists Say 2 Studies Used By U.S. Agency Overlooked Dangers

By Meg Kissinger And Susanne Rust, J.S. Online, Posted: Apr. 11, 2009

An international consortium of industry, academic and government scientists has rejected as incomplete and unreliable the U.S. Food and Drug Administration's case that a chemical found in food containers and other household products is safe.

www.jsonline.com/watchdog/watchdogreports/42858807.html

New Resource for Parents: Web Video on RSV

St. Louis Children's Hospital (SLCH) has released a new two-minute informational video to share important information about respiratory syncytial virus (RSV) with parents. RSV poses especially significant health risks for babies born prematurely or with other health issues. In addition to identifying signs and symptoms of RSV, the video includes prevention tips for preventing the spread of the virus. It profiles an infant patient hospitalized with RSV and her mother, along with commentary from physicians working with these families. To view the video and its accompanying web feature, click [here](#). You can share this information with parents by forwarding the link to them via email, or by directing them to www.stlouischildrens.org and typing "RSV" into the search field.

A Community Guide to Environmental Health, 2009, by Jeff Conant and Pam Fadem, Hesperian Books This highly illustrated guide contains activities to stimulate critical thinking and discussion, inspirational stories, and instructions for purifying water, protecting children from pesticides, making non-toxic cleaning products, building a healthy home, and more. The 23 chapters cover topics including preventing and reducing harm from toxic pollution; forestry, restoring land, and planting trees; protecting community water and watersheds; food security and sustainable farming; environmental health at home; solid waste and health care waste; and how to reduce harm from mining, oil, and energy production. With dozens of activities to stimulate critical thinking and discussion and hundreds of drawings to make the messages clear, [A Community Guide to Environmental Health](#) will be useful for people just beginning to think about environmental health and people with many years experience in the field.

Helping Children Who Are Deaf: Family and Community Support for Children Who Do Not Hear Well by S. Neimann, D. Greenstein and D.

David, Hesperian Books [Helping Children Who Are Deaf](#) supports parents and other caregivers in building the communication skills of babies and young children to develop their thinking, learn to communicate, solve problems, and explore and interact with the world. Includes activities on how to foster

language learning through both sign and oral approaches, and explains ways to adapt activities and exercises for both a child's specific abilities and needs, and a family's unique circumstances. The book also explores how deafness affects a child's ability to learn language, as well as develop mentally and socially. Topics include how to assess hearing loss, education for hearing-impaired children, causes of deafness, how to work on the social skills of a deaf child, support for parents and caregivers, and how communities can work together to help deaf children.

From the National Institute on Early Education: Connecting Neurons, Concepts and People: Brain Development and its Implications

This brief examines the science of brain development and its implications for young children. In summary: the brain is most malleable in the early childhood years when its processes are much more fluid and more susceptible to environmental influences and stimulation. Early childhood settings with interactive, responsive and engaging adults and peers contribute to healthy brain development and preventing developmental difficulties is easier when identified in younger children. Access a fact sheet on the brief here:

<http://nieer.org/resources/factsheets/21.pdf>

Research

Increases in the number of concurrent child care arrangements found to be related to increased behavior problems in children at ages 2 and 3

This study examined the association between changes in the number of concurrent nonparental child care arrangements and changes in children's behavioral outcomes at ages 2 and 3. The study was based on longitudinal data from the National Institute for Child Health and Human Development Study of Early Child Care and Youth Development. Previous research has indicated that greater numbers of child care arrangements has negative impacts on children's social adjustment. However, much of the previous research has not distinguished between the impact of long-term child care instability and multiple concurrent arrangements. This study found that increases in the number of separate child-care arrangements a child regularly experiences during a single day or week were related to increases in children's behavior problems and decreases in prosocial behaviors. Younger children and girls were more vulnerable to the effects of multiple arrangements. These findings underscore the importance of the number of, and transitions among, child-care arrangements to children's behavioral development. Taryn, W. M. (2009). Multiple Child-Care Arrangements and Young Children's Behavioral Outcomes. *Child Development*, 80(1), 59-76

From the National Institute of Mental Health Science Update

[Autism Skews Developing Brain with Synchronous Motion and Sound](http://www.nimh.nih.gov/science-news/2009/autism-skews-developing-brain-with-synchronous-motion-and-sound.shtml), March 31, 2009 Individuals with autism spectrum disorders (ASD) tend to stare at people's mouths rather than their eyes. Now, an NIH-funded study in 2-year-olds with the social deficit disorder suggests why they might find mouths so attractive: lip-syncing — the exact match of lip motion and speech sound. www.nimh.nih.gov/science-news/2009/autism-skews-developing-brain-with-synchronous-motion-and-sound.shtml

From Medscape Nurses: Pacifier Use May Not Adversely Affect Breast-Feeding Duration or Exclusivity

Pacifier use may not adversely affect breast-feeding duration or exclusivity, according to the results of a systematic review reported in the April issue of the *Archives of Pediatrics & Adolescent Medicine*.

"Physicians who counsel families about pacifier use must now weigh the potential protective effect against SIDS [sudden infant death syndrome] against the potential deleterious effect on breastfeeding," write Nina R. O'Connor, MD, from University of Virginia School of Medicine in Charlottesville (at the time of the study), and colleagues. "To assist in this decision balance, a systematic review of the literature regarding the impact of pacifier use on breastfeeding was undertaken in an attempt to summarize the current evidence."

The investigators searched MEDLINE, CINAHL, the Cochrane Library, EMBASE, POPLINE, and bibliographies of identified articles for English-language records from January 1950 through August 2006 containing the Medical Subject Heading terms *pacifiers* and *breast-feeding*. Of 1098 reports identified, and after exclusion of duplicate and irrelevant studies, 29 studies met inclusion criteria for the review, including 4 randomized controlled trials (RCTs), 20 cohort studies, and 5 cross-sectional studies.

Two independent reviewers abstracted data from these studies and graded them for quality, with disagreements settled through consensus opinion reached using a third investigator. The exposure of interest was pacifier use, and the primary study endpoints were breast-feeding duration or exclusivity.

The 4 RCTs showed no difference in breast-feeding outcomes associated with different pacifier interventions, i.e., pacifier use during tube feeds, pacifier use at any time after delivery, maternal education emphasizing avoidance of pacifiers, and a UNICEF (United Nations Children's Fund)/World Health Organization Baby Friendly Hospital environment. Pacifier use was associated with reduced duration of breast-feeding in most observational studies.

Limitations of this review include the possibility that pacifier use may be a marker for breast-feeding problems, inclusion of English-language reports only, and that none of the studies looked at pacifier use only at nap time or bedtime. "The highest level of evidence does not support an adverse relationship between pacifier use and breastfeeding duration or exclusivity," the study authors write. "The association between shortened duration of breastfeeding and pacifier use in observational studies likely reflects a number of other complex factors, such as breastfeeding difficulties or intent to wean. Ongoing quantitative and qualitative research is needed to better understand the relationship between pacifier use and breastfeeding."

Arch Pediatr Adolesc Med. 2009;163:378-382.

Study Confirms SIDS Death Link to Smoking

Australian researchers have found evidence that exposure to cigarette smoke induces abnormalities in babies' brains, putting them at increased risk of sudden infant death syndrome. The study found an increase in cell death in the

region of the brain that plays an important role in the control of breathing and heart function in babies who died of SIDS, compared to those who died of other causes. Further, the increase in cell death was higher not only in SIDS victims, but also in all infants who had a history of tobacco smoke exposure in utero and in the postnatal period. Passive smoking has long been identified as a risk factor for SIDS, but the biological mechanisms associated with SIDS were unknown until now.

Machaalani, R., Say, M., & Waters, K. A. (2009). Serotonergic receptor 1A in the sudden infant death syndrome brainstem medulla and associations with clinical risk factors. *Acta Neuropathol*, 117(3), 257-265.

Child Obesity Is Linked to Chemicals in Plastic

[Jennifer Lee](#), The New York Times

[Exposure to chemicals used in plastics may be linked with childhood obesity, according to results from a [long-term health study on girls who live in East Harlem and surrounding communities](#) that were presented to community leaders on Thursday by researchers at [Mount Sinai Medical Center](#).

The chemicals in question are called [phthalates](#), which are used to make plastics pliable and in personal care products. Phthalates, which are absorbed into the body, are a type of endocrine disruptor — chemicals that affect glands and hormones that regulate many bodily functions. They have [raised concerns as possible carcinogens for more than a decade](#), but attention over their role in obesity is relatively recent.

The research linking endocrine disruptors with obesity has been growing recently. A number of animal studies have shown [that exposing mice to some endocrine disruptors causes them to be more obese](#). Chemicals that have raised concern include [Bisphenol A \(which is used in plastics\) and perfluorooctanoic acid, which is often used to create nonstick surfaces](#).

However, the East Harlem study, which includes data published in the journal [Epidemiology](#), presents some of the first evidence linking obesity and endocrine disruptors in humans.

The researchers measured exposure to phthalates by looking at the children's urine. "The heaviest girls have the highest levels of phthalates metabolites in their urine," said Dr. [Philip J. Landrigan](#), a professor of pediatrics at Mount Sinai, one of the lead researchers on the study. "It goes up as the children get heavier, but it's most evident in the heaviest kids."

This builds upon a larger Mount Sinai research effort called ["Growing Up Healthy in East Harlem."](#) which has looked at various health factors in East Harlem children over the last 10 years, including pesticides, diet and even proximity to bodegas.

About 40 percent of the children in East Harlem are considered either overweight or obese. "When we say children, I'm talking about kindergarten children, we are talking about little kids," Dr. Landrigan said. "This is a

problem that begins early in life.”

The Growing Up Healthy study involves more than 300 children in East Harlem, and an additional 200 or so children in surrounding community. The phthalate study follows a separate group of about 400 girls in the same communities, who range in age from 9 to 11.

One thing researchers have found is that the levels of phthalates measured in children in both studies are significantly higher than the average levels that the Centers for Disease Control and Prevention have measured for children across the entire United States.

The findings may presage a new approach to thinking about obesity — drawing environmental factors into a central part of the equation. “Most people think childhood obesity is an imbalance between how much they eat and how much they play,” Dr. Landrigan said.

But he thinks the impact of endocrine disruptors on obesity could be more significant than many people believe. “Most people think it’s marginal,” he said, paling in comparison with diet and exercise. But he likened it with the impact of lead on a child’s I.Q. “Lead never makes more than 3 or 4 percent difference in margin, but 3 to 5 I.Q. points is a big deal,” he said.

Of course, at this stage, researchers cannot say if the exposure actually causes obesity, simply that it seems to be linked. “Right now it’s a correlation; we don’t know if it’s cause and effect or an accidental finding,” Dr. Landrigan said. “The \$64,000 question is, what is causal pathway? Does it go through the thyroid gland? Does it change fat metabolism?”

The [National Children’s Study](#), which will follow 100,000 children from across the country from birth to age 21, will look more broadly at endocrine disruptors and other issues.

“Some of the clues that come out of East Harlem will actually be pursued in the larger one,” Dr. Landrigan said.

Meanwhile, Dr. Landrigan advised people to reduce their exposure to phthalates as a precautionary measure. “You can’t avoid them completely, but you can certainly reduce their exposure,” he said.

It’s somewhat difficult to do, since many things do not contain labels identifying phthalates, and in the case of perfumes [they can simply be labeled as “fragrance”](#).

Phthalates are found in [certain personal care products](#) (like nail polish and cosmetics), though recent regulation has encouraged companies to reduce or eliminate them.

They are also found in common everyday objects, including vinyl siding, toys and pacifiers. A number of environmental Web sites, including [The Daily](#)

[Green](#), have advised certain strategies, including learning to recognize the abbreviations for certain common phthalates and to prefer certain kinds of recyclable plastics over others.]

<http://cityroom.blogs.nytimes.com/2009/04/17/child-obesity-is-linked-to-chemicals-in-plastics/>

Understanding disruptive behaviors in preschool children

Disruptive behavior problems in young children are the number one reason for referral to mental health agencies. Up to one third of preschool-age children have serious disruptive behavior problems. However, owing to difficulties differentiating clinically significant disruptive behaviors from typical development, a significant proportion of young children with disruptive behavior problems go unidentified and untreated. Research supports the existence of disruptive behavior disorders in young children, and early identification and treatment are critical to interrupt the trajectory of early problems to more significant and impairing difficulties. The purposes of this article were to identify and discuss disruptive behavior problems in preschool children and to introduce readers to current definitions of disruptive behavior problems and emotion regulation. A review of risk factors and underlying emotion and behavior regulation difficulties implicated in the development of disruptive behavior problems is provided. Furthermore, clinical implications for nurses in the identification of disruptive behavior problems in preschool children for pediatric nurses are discussed.

This study builds upon previous research showing that interventions for preventing chronic behavior problems in children are effective if they occur early in life, ideally before a child enters school. Intervention at the preschool age may be advantageous because behavioral control emerges during this developmental period and offers the opportunity to modify regulatory skills. The most effective treatment modalities for young children with disruptive behavior disorder address problems as they occur. Strategies are structured, goal oriented, and developmentally appropriate, and they recognize that the child's problems occur within a family and social context.

Breitenstein, S. M., Hill, C., & Gross, D. (2009). Understanding disruptive behavior problems in preschool children. *J Pediatr Nurs*, 24(1), 3-12.

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