

May  
2012



## What is Infant Mental Health?

“Early childhood mental health is, first of all, about establishing a secure relationship between a child and his or her parents. It is also about emotional regulation, which starts very early. It may start as sensory regulation, meaning regulation to touch, sights and sounds. Some children are over or under reactive to sensory stimulation. Concurrent with emotional regulation is the ability to regulate behavior and to symbolize, for example, to use language, which gives a child a way to mediate between his or her impulse life

and behavior. The ability to relate to people outside of the immediate attachment system is another dimension of early childhood mental health. We have to learn to socialize, to relate to adults and peers. It’s not just the ability to become attached, it’s the ability to explore and move toward autonomy, self-sufficiency, and individuation. Coping is also a critical part of mental health, for example, developing capacities for managing frustration. Again, this is related to the ability to regulate.”

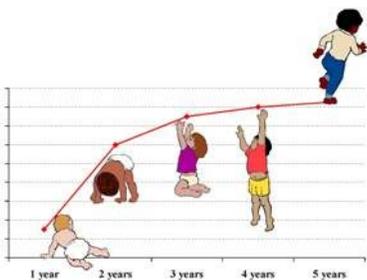
—Gilbert M. Foley, EdD, Clinical Director, NYCCD; Editor, Mental

Health in Early Intervention.

*In honor of Children’s Mental Health Awareness Day, May 9th, you can help ensure the social and emotional developmental needs of infants and toddlers in your community are being met. Identify at least one policymaker in your state and send them a copy of the new Zero to Three resource, “Making It Happen: Overcoming Barriers to Providing Infant-Early Childhood Mental Health” which you can find at this web address <http://tinyurl.com/pubpolicy-earlymh>*

## Free Interdisciplinary Developmental Screenings for Ages 5 & Under

**For Parents whose children are not in formal child care, please note:** the next Community Developmental Screening is scheduled for Wednesday, June 13th at Daughtrey Elementary from 3:00 PM to 5:00 PM. All the experts agree. Don’t wait until your child is in kindergarten for a developmental screening. Earlier is better. Waiting until a child is in school may be waiting too long. Obstacles to your child’s full physical, emotional and cognitive growth are much easier to resolve before they get in the way of school readiness and continued learning. Screenings are designed to determine a child’s strengths and evaluate developmental challenges, focusing on hearing, vision, speech, developmental wellness, social and emotional health, and gross and fine motor skills.



Whole Child Manatee is currently taking reservations for free interdisciplinary developmental screenings for children age 5 and under. Professionals from local community agencies participate in the screenings as organized by Whole Child. **Call 941-753-0958, ext. 201 for an appointment. Habla español? Por citas llame 941-807-1307.** After the screening, parents will be given a full report of their child’s developmentally appropriate progress. Information to support your role as a parent will also be available. Downloadable, printable flyer in Spanish and English at [www.wholechildmanatee.com](http://www.wholechildmanatee.com) under the News & Events Tab/Community Events.



## Do-a-Profile Day at Local Business

In the fall of 2011, the Community Development Department of Manatee County Government's Neighborhood Services recognized a need to reach out to small and micro-businesses (less than five employees) in the 14<sup>th</sup> Street W. Community Redevelopment Area (CRA), now referred to as Midtown Manatee, with information about small business grant opportunities and additional support services available in the county. Most financial experts agree that in these times, it is micro and small businesses that help to move recovery forward.

Having worked previously with the County CRAs doing FREE Tax Manatee, Marja Scheeres of Whole Child Manatee began outreach services to Midtown Manatee on a part-time basis, working closely with Karen Stewart, Director of Economic Development, and Ivan Groom, CRA Coordinator, with Manatee County Government. Whole Child's participation was made possible through the Community Development Block Grant.

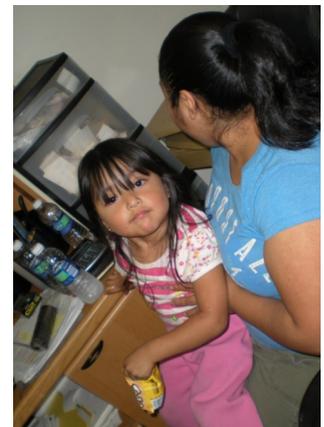
Very quickly the connection between business stability and human services became clear. There was the new small business owner whose daughter, with an infant, needed help sorting out her status with DCF; and the established business owner Julio Masias of Tortilleria La Rancherita, the wholesale tortilla maker and Latin specialty food deli, whose predominantly female staff of eight were all struggling to organize their child care and domestic needs. Whole Child Advisor, Maria Zavala was soon brought into the scene and was able to reach out to a whole new population of parents who could benefit from the links to Whole Child Manatee partners and their services. Mr. Masias was very pleased to support a "Profile Day" at the Tortilleria and cleared some space for Maria, the laptop and his employees; the very definition of a "family friendly business".

We would be remiss not to thank the gracious hosts—owner and staff—of La Tortilleria for providing us with a delicious cup of robust Latin coffee. That really helps get the work done!

*[Vern] Buchanan said small businesses generate 70 percent of jobs in Florida ... "The more successful they are, the more employees they hire".*

—Bradenton Herald

April 24, 2012



Waiting with Mom to do a Whole Child Profile



Julio Masias "opens the door" to Whole Child Manatee



Have laptop, will travel. Maria Zavala assists staff of Tortilleria to fill out a profile.

## Whole Child Training for Head Start



On March 8<sup>th</sup>, Whole Child Advisors Kim Ross and Ellen Hepner led a Whole Child Training for Diane McKinney, Asst. Director of Family & Health Services at Head Start/Early Head Start and 13 of the Head Start Family Advocates. The training was designed to familiarize Advocates with the Whole Child website and search engine as a means of staying abreast of current providers in the community. The Whole Child search engine offers provider partners of Whole Child access to the over 300 resources available to assist families with children through the filter of 49 different service categories. Whole Child Partners can use the search engine for families with children of any age. A review of the Whole Child Profile and Plan were also demonstrated.

### Events & Announcements

**Free Car Seat Safety Check** - by a Certified Child Passenger Safety Technician. Sponsored by Manatee Memorial Hospital & The Mark Wandall Foundation, **Call 941-745-6925, MOMM's Place**, for dates and to schedule an appointment.

**Learn the Signs. Act Early. The Importance of Developmental Screening:** The latest webcast from the University at Albany Public Health Department which produces monthly webcasts subsequently archived and accessible at [www.phlive.org](http://www.phlive.org). Scroll down the page and click the "Past Broadcasts" tab.

**Saturday, May 19, 2012: Blake Medical Center Health + Safety HULLABALOO! From 9 am—12pm** at the Parking Lot of Blake Medical Center, 2020 59<sup>th</sup> St. W., Bradenton. Over 30 booths of Health & Safety Information; Physicians On-Site to Answer Questions; Over 25 Raffle Prizes; Kids Bicycle Rodeo and Firefighter Challenge; Restaurant Sample; Food & Drink; FREE Screenings. Call **1-888-359-3552** to RSVP. First 500 get a FREE T-SHIRT! Event is free and open to the public.

**Wednesday, June 6th, 8:30 AM: Parent Education Coalition Meeting** at the Early Learning Coalition, 3526 9th St. W., Bradenton. For more information call Francis Padilla at **941-757-2900**.

**SAVE THE DATE! Florida Assoc. for Infant Mental Health 2012 Conference, July 12, 2012** Embassy Suites Orlando, International Drive Convention Center. More information at <http://faimh.org/Conf2012Agenda.cfm>

Always more at [www.wholechildmanatee.com](http://www.wholechildmanatee.com)  
News & Events tab!

### Dentists' Tips for Healthy Baby Teeth

(More on page 4)

- In general, brush the teeth of children 2 or younger with a soft brush and a bit of fluoride toothpaste twice a day. At 2, start to use a pea-size dollop.
- Reduce snacking. Eating any starchy or sugary food causes pH level in the mouth to drop sharply, leaving teeth awash in an acid bath – murder on enamel – for 20 minutes until saliva normalizes the pH. The frequency of exposure to acid is more important than the sugar content of food.
- Do not share utensils with a child or "clean" a pacifier in your mouth, to give to your infant. Research has shown that parents or caregivers with active tooth decay can pass cavity-causing bacteria via saliva.
- Brush preschoolers' teeth for them. Kids are not in a position to effectively brush their teeth until they are aged 7 or 9.

## Preschoolers in Surgery for a Mouthful of Cavities

Revised from: New York Times article under the same title published on Mar 6, 2012 , by Catherine Saint Louis

The Centers for Disease Control and Prevention noted an increase, the first in 40 years, in the number of preschoolers with cavities in a study five years ago. But dentists nationwide say they are seeing more preschoolers at all income levels with 6 to 10 cavities or more. The level of decay, they added, is so severe that they often recommend using general anesthesia because young children are unlikely to sit through such extensive procedures while they are awake.

There is no central clearing-house for data on the number of young children undergoing general anesthesia to treat multiple cavities, but interviews with 20 dentists and others in the field of dental surgery suggest that the problem is widespread.

“We have had a huge increase in kids going to the operating room,” said Dr. Jonathan Shenkin, a pediatric dentist in Augusta, Me., and a spokesman for the American Dental Association. “We’re treating more kids more aggressively earlier.” But such operations are largely preventable, he said. “I have parents tell me all the time, ‘No one told us when to go to the dentist, when we should start using fluoride toothpaste’ — all this basic information to combat the No. 1 chronic disease in children.”

Dentists offer a number of reasons so many preschoolers suffer from such extensive dental decay. Though they are not necessarily new, they have combined to create a growing problem: endless snacking and juice or other sweet drinks at bedtime, parents who choose bottled water rather than fluoridated tap water for their children, and a lack of awareness that infants should, according to pediatric experts, visit a dentist by age 1 to be assessed for future cavity risk, even though they may have only a few teeth.

And because some toddlers dislike tooth-brushing, some parents do not enforce it. “Let’s say a child is 1 ½, and the child screams when they get their teeth cleaned,” said Dr. Jed Best, a pediatric dentist in Manhattan. “Some parents say, ‘I don’t want my little darling to be traumatized.’ The meta-

phor I give them is, ‘I’d much rather have a kid cry with a soft toothbrush than when I have to drill a cavity.’ ”

Dental decay often starts with a dull ache that may be mistaken for teething. That is why parents do not realize their child’s teeth are infected until they break or the pain becomes so acute that the child cannot sleep, said Dr. Joel Berg, director of the Center for Pediatric Dentistry, a joint venture since 2010 between the University of Washington and Seattle Children’s Hospital, which built a surgical wing because of the demand for oral surgery for preschoolers.

With a cooperative child, a cavity — or even many — can be treated in a dentist’s office with an injection of local anesthesia and an episode of “The Backyardigans” to distract patients. But dentists routinely recommend general anesthesia for preschoolers with extensive problems, particularly if they will not even let X-rays be taken. The cost to parents for dental restoration under general anesthesia for a child ranges from \$2,000 to \$5,000

or more, depending on insurance coverage and the amount of work, several dentists said.

Dr. Megann Smiley, a dentist-anesthesiologist at Nationwide Children’s Hospital in Columbus, Ohio, is used to hearing parents question the need for general anesthesia to fix their children’s infected teeth. “It seems like putting a match out with a fire hydrant,” Dr. Smiley said. “But if any of us tried to get 12 teeth treated, we wouldn’t think that’s small.”

Of course, lack of money or insurance can be an issue, but several dentists in interviews nationwide attributed extensive cavities in part to lax parenting, *at all income levels*.

Brushing teeth twice a day used to be non-negotiable, she said, but not anymore. “Some parents say: ‘He doesn’t want his teeth brushed. We’ll wait until he’s more emotionally mature.’ It’s baffling,” she added.



Dentists recommend taking an infant for a cavity risk assessment before their first birthday, even if no teeth are showing.