Why Should ECE Programs Use Integrated Pest Management?

Pesticides are chemicals that are used to control common household pests like ants, spiders, cockroaches and even bacteria and viruses. Pesticides can be bought in the grocery or hardware store and applied in small areas by individuals. They can also be applied to whole buildings by licensed pest control companies. California’s Healthy Schools Act requires that parents and staff be notified, and records kept, of any pesticide applications in child care centers (see Health Connections, May-June 2008 for information on the Healthy Schools Act).

It is important to keep ECE environments free of pests that may cause infectious diseases and allergic reactions. In fact, the California Child Care Licensing regulations, and the national quality standards recommends in Caring for Our Children, require that ECE programs keep their environments free of pests. To maintain a pest-free environment, most ECE programs use pesticides, but there is an increasing concern about the possible effects of pesticides on young children. These effects can occur right away; for instance, when a child breathes pesticide sprays or eats or mouths something that is contaminated with pesticides that have recently been used in an ECE environment. But the effects from exposure to pesticides and other chemicals can sometimes also occur years later. There is increasing concern about the effects of chemicals, including some pesticides, on the young child's developing brain and nervous system. Also, asthma is now more common and, while the reasons for this are unclear (and there may be many causes), there is concern about the role that exposure to chemicals in the environment plays in the development of asthma. When it comes to the health effects of chemicals on children, especially, it is important to use “The Precautionary Principle”; that is, we should take precautions to

UC IPM Online at www.ipm.ucdavis.edu/QT/
**Connect to Community Services**

**Q** What is the new 211 phone number I’ve been hearing about?

**A** 2-1-1 is an easy to remember telephone number that, where available, connects people with important community services, volunteer opportunities and resources during a disaster. Most large cities in California have implemented this system to the extent that 84% of the California population has access to the service as of February 2008. Some of the information on essential services you can get from 2-1-1 are: where to find unemployment assistance, senior services, services for people with disabilities, services to families with children including child care, mental health resources and more. Every community has different levels of service so it’s worth a call to find out what your local 2-1-1 service can offer. Some may operate 24/7 and will have bilingual services. You might want to ask if they have posters or brochures you can post in your child care program for the benefit of parents and staff. During a disaster it is hoped that the 2-1-1 number will act as a single point clearinghouse for community resources during disaster recovery which will relieve 911 call volume.

The 211 California Partnership is a collaborative effort between the California Alliance of information and Referral Systems (CAIRS) and the United Way of California.

There are also other useful N11 service numbers available in California:

- **2-1-1**: community services
- **3-1-1**: government services, non-emergency
- **4-1-1**: directory assistance
- **5-1-1**: traffic/transportation information, such as what bus to take, up-to-date traffic reports or police non-emergency
- **6-1-1**: telephone company customer service and repair
- **7-1-1**: TDD relay for deaf
- **8-1-1**: underground utility location
- **9-1-1**: emergency services

By Judy Calder, RN, MS
Temper Tantrums

What is a temper tantrum?
An emotional outburst when a child kicks, cries, throws things and/or throws herself onto the floor is called a temper tantrum. These events are usually a strong response to frustration and are sometimes called a “melt down” or “pitching a fit.” Tantrums are common at around age two because toddlers are developing their own wants and ideas.

Normal toddler behavior
Toddlers are easily frustrated and often not able to express their wants and feelings in words. They have not yet learned to manage their emotions. They test the rules to see how adults will react. They often respond with “no” or “I do it” or “mine.” Often, toddlers don’t want to share. They are active, playful and curious. Toddlers like predictable routines and like to help.

How to respond to a temper tantrum
Occasional temper tantrums are perfectly normal behavior for toddlers. A two year old having a tantrum is not being “naughty,” she simply does not have the verbal skills and emotional coping skills to handle her feelings. Responding properly can prevent future tantrums.

• Remain calm and let the tantrum run its course.
• Use simple words to name the emotion like “I see you are angry” or “I know you wanted that doll.”
• Prevent physical harm, do not let the child hurt himself or others or destroy things.
• Avoid a power struggle. Instead, help the child learn better ways to cope.
• Respond in a matter of fact way, do not show anger or disgust.
• Do not try to reason, bribe or punish.

Teach cooperation and healthy coping skills
Provide a warm and friendly environment in your program that helps toddlers learn coping skills and social skills. Use simple words and make sure you are not expecting a toddler to behave like an older child. Follow predictable routines and respond in a consistent way. Teach by example and model good communication and healthy coping skills. Provide for basic needs since sometimes children have temper tantrums when they are hungry, tired or sick. Remember to notice good behavior with encouraging words, a smile, a nod or a hug.

Work with parents
Sometimes parents give into the demands of their child during a tantrum or punish their child for having a tantrum. These responses will not help the child develop healthy coping skills. Provide information for parents about normal toddler development and discuss what you can do to work together to provide a clear message for the child. Develop an action plan and arrange to meet again to see how the plan is working.

When to get help
Seek advice from a health professional or mental health consultant for a child who has not outgrown tantrums by age 4. A developmental screening can determine if a child is developmentally or language delayed. Preschool children who are regularly experiencing strong emotional outbursts and have not learned other coping skills may need professional help.

References and Resources:
Department of Health and Human Services, 2008, Promoting Healthy Families in Your Community, Dealing with Temper Tantrums
So This Is Normal Too? 1995, Deborah Hewitt, Redleaf Press

by Bobbie Rose RN
Food safety: How to Prevent Food Borne Illnesses

Food borne illnesses can occur if harmful substances enter the body when people eat or drink. These illnesses can be caused by bacteria, viruses or parasites. Approximately one in four Americans are made ill by food borne illnesses each year. Young children, elderly people and those with weakened immune systems are more vulnerable to the effects of these illnesses. Since germs can spread anywhere between the farmer’s fields and your eating table, it is important to take measures to reduce the risk of serving foods that might cause illness.

Shopping for Food
Separate meat, poultry, seafood and eggs from produce and ready to eat foods in your shopping cart. Choose items that are frozen or refrigerated last and check the “sell by” dates on the packaging. Don’t buy torn or leaking packages. Do not use or buy home canned food from outside sources or foods from dented, rusted, bulging, or leaking cans.

Storing Food
Set your refrigerator to 40 degrees Fahrenheit and your freezer to 0 degrees to prevent bacteria from growing. Thaw food in the refrigerator. Keep raw meat, poultry and seafood separate from produce and ready to eat foods. Refrigerate all cut and peeled produce. Discard food that has an off color, off odor or has reached the expiration date.

Cleaning Food
Always wash your hands with soap and water before preparing or eating food. Use separate cutting boards for meat and for fruits and vegetables. Clean and sanitize cutting boards after use. Scrub all fruits and vegetables with water (even if you plan to peel them), to remove any pesticide residue or dirt that might have bacteria. Although organic foods are grown without pesticides, they can still be a source of bacteria. To avoid carrying bacteria from the rind to the inside of the fruit, wash melons before cutting. Discard the outer leaves of vegetables such as lettuce or cabbage before washing. Bagged lettuce that is washed before it is bagged should be washed again before you serve it.

Cooking Food
Some contaminated food will look and smell normal. Fortunately, proper cooking kills bacteria. Meats and poultry need to be fully cooked before serving. Use a meat thermometer to make sure meats have reached the recommended temperature. (See Child Care Licensing Self Assessment Guide for Safe Food Handling for a cooking temperature chart.)

Transporting Food
Use a cooler (to keep cold foods cold) or a thermal bag (to keep hot foods hot) when transporting food.

Serving Food
- Do not serve children raw or undercooked eggs. Raw eggs may be in some foods such as homemade salad dressings, mayonnaise and sauces, homemade ice cream, and raw cookie dough.
- Children should not drink raw milk, other unpasturized dairy products or unpasturized juices.
- Serve hot food at a temperature of 140 degrees. Perishable food should not be left out for more than two hours or one hour on hot days (over 90 degrees.)

Resources and References:
Fun and educational food safety videos from UC Davis: http://foodsafe.ucdavis.edu/html/video.html
Fixing Food Safety: Protecting America’s Food Supply from Farm to Fork, April 2008, Trust for America’s Health www.healthyamericans.org
by Bobbie Rose RN
Ideas for Greening Your Home

There is a direct connection between climate change and the health of our communities, families and children. The American Public Health Association (APHA), during National Public Health Week 2008, encouraged individuals, families and communities to change their daily behavior in five important ways:

1. Be Prepared
2. Travel Differently
3. Eat Differently
4. Green Your Work
5. Green Your Home

National Public Health Week has ended, but our work to fight climate change is only just beginning. “Green your Home” was one of the recommended behaviors in the Healthy Climate Pledge. If you are ready to get started on greening your home, here are some ideas:

- **Reduce, reuse and recycle**

If there is a recycling program in your community, try recycling your newspapers, beverage containers, paper products and other goods. Use products in containers that can be recycled and items that can be repaired and reused. In addition, support recycling markets by buying products that are made from recycled materials. Reducing, reusing and recycling in your home helps conserve energy and reduces pollution and greenhouse gases from resource extraction, manufacturing and disposal.

- **Heat and cool smartly**

Simple steps such as cleaning air filters regularly and having your heating and cooling equipment tuned annually by a licensed contractor can increase comfort at home, and at the same time reduce energy use and global warming pollution. When it is time to replace your old equipment, choose a higher efficiency model and make sure it is properly sized and installed.

- **Seal and insulate your home**

Not sure where to begin? A home energy auditor can help you find air leaks and areas with poor insulation and can evaluate the overall energy efficiency of your home. By taking these steps, you can eliminate drafts, keep your home more comfortable year round, save energy that would otherwise be wasted, and reduce greenhouse gas emissions.

- **Use water efficiently**

Municipal water systems require a lot of energy to purify and distribute water to households. Saving water, especially hot water, can lower greenhouse gas emissions. Look for products with EPA’s WaterSense label. These products save water and perform as well or better than their less efficient counterparts perform. Be smart when irrigating your lawn or landscape. Water when needed and during the coolest part of the day (early morning is best). Turn the water off while shaving or brushing teeth.

- **Use green power**

Green power is environmentally friendly electricity that is generated from renewable energy sources such as wind and the sun. There are two ways to use green power: you can buy green power or you can modify your house to generate your own green power. Buying green power is easy. It offers a number of environmental and economic benefits over conventional electricity and helps to increase clean energy supply.

Installing solar panels and researching incentives for renewable energy in your state are examples of creating a greener home.

Encourage your children, family, friends, neighbors and co-workers to do their part by making small changes in their lives.

Source: APHA’s 2008 National Public Health Week at www.nphw.org

---

**Wet Sponge Toss**

Here is a water activity for a hot day that conserves water. Put a large sponge in a large bowl of water. Place another large bowl a few steps away. Ask a child to toss the wet sponge into the empty bowl (this may take several tries.) After the sponge lands in the empty bowl, have the child squeeze out the water into the new bowl. Repeat until all of the water from the first bowl has been transferred to the second bowl. Refill and replace the water with clean water as needed. Use the remaining dirty water to water plants.
Salmonella

What Is It?
Salmonella is a type of bacteria that is a common cause of diarrheal illness in the United States. These bacteria are often found in the digestive tract of a variety of animals as well as humans. Recently, there has been an overall increase in foodborne Salmonella infections in the United States.

What Are the Symptoms?
Persons with salmonella infections often experience fever, stomach cramps, nausea and vomiting in addition to diarrhea. Symptoms may remain for two weeks or more but are usually gone within a week. Salmonella illnesses can be very serious for very young children, older adults, or people with weakened immune systems.

Who Gets It and How?
Salmonella is present in the feces of ill and recently recovered persons, and infections may be spread from person to person. However, outbreaks in child care settings are rare and most persons are believed to have acquired their infections from contaminated food. Some foods, such as chicken, come from infected chickens while others, such as tomatoes and some vegetables, are contaminated during processing. Food handlers may also contaminate food if they are infected and do not practice good handwashing techniques after using the bathroom and before they handle food. Although it has been known that salmonella may be present in cracked eggs or unrefrigerated eggs, only recently has salmonella been found in uncooked whole eggs. Contaminated food does not usually look and smell bad. Salmonella bacteria are killed by cooking food thoroughly. In addition to foodborne sources, pets, especially animals such as turtles, lizards and birds, often carry salmonella. Salmonella was recently found in dog food and the CDC reports that it may be an underrecognized source of human infection, especially in young children, so children, especially infants, should not be allowed to handle dry pet food.

When Should Children and Staff with this Illness Be Excluded?
Each case of salmonella must be considered separately. A health care provider should be consulted. The decision will be based on whether the carrier is a child or staff member, on the type of strain of salmonella, and on the age of the child and risk of communicability. The decision to do a laboratory check for the carrier status of healthy child care attendees depends on the strain of salmonella being carried. It is common policy to have three negative (normal) stool cultures before someone is clear of the infection and is no longer a carrier.

Where Should I Report It?
- Salmonella is a reportable disease in California. This means that ECE providers are required to report cases of salmonella to their local health department and to Licensing.
- Notify all parents/guardians and staff if there is a case of salmonella in your program. Keep the identity of the infected child(ren) confidential. It is important that parents monitor their children for any symptoms.

How Can I Limit the Spread of Salmonella?
ECE providers need to be aware of good hygiene and food handling practices to prevent foodborne illness from occurring within their facility. Additionally:
- Make sure that children and staff wash their hands after handling animals and cleaning their cages or pens. Turtles, lizards and other reptiles should not be kept as pets in ECE programs.
- Limit the serving of snacks and treats prepared outside the facility and served for special occasions to those from commercial sources. Home-prepared snacks may not only be prepared under less than optimal circumstances and may be transported or stored under conditions that will allow bacteria to grow.
- Do not serve children raw or undercooked eggs. Raw eggs may be in foods such as homemade salad dressings, mayonnaise and sauces, homemade ice cream, or raw cookie dough.
- Poultry and meat should be stored in a refrigerator and well-cooked, not pink in the middle.
- Children should not eat or drink raw or unpasteurized fruit juice or dairy products, including raw milk.
- Make sure that lunches brought from home are refrigerated when necessary. These include meals containing raw vegetables as well as those with meats. Dairy products and liquid formula should also be kept refrigerated in order to limit the growth of bacteria, including salmonella.

Resources
Salmonela

¿Qué es?
El grupo de bacterias de la salmonela es una causa común de las enfermedades diarreicas que padecen las personas en los Estados Unidos. Estas bacterias se encuentran a menudo en el aparato digestivo de las personas y de una gran variedad de animales. Últimamente, en los Estados Unidos ha habido un aumento general de infecciones por salmonela proveniente de alimentos.

¿Cuáles son los síntomas?
Además de diarrea, las personas con infecciones por la salmonela a menudo tienen otros síntomas como fiebre, calambres estomacales, náuseas y vómitos. Los síntomas pueden persistir durante dos semanas o más, aunque normalmente desaparecen después de una semana. Las enfermedades por salmonela pueden ser muy graves para los niños pequeños, adultos de avanzada edad o personas con un sistema inmunológico débil.

¿Quién se contagia y cómo?
La salmonela está presente en los excrementos de las personas infectadas o de las que recientemente se han recuperado de la infección. Esta infección se transmite de persona a persona. Sin embargo, los brotes en los centros de cuidado infantil son raros y se cree que la mayoría de los casos se producen al consumir alimentos contaminados. Algunos alimentos, como el pollo, provienen de fuentes infectadas de forma natural, mientras que otros, como los tomates y algunos vegetales, se contaminan cuando se procesan. Las personas que preparan los alimentos también pueden contaminarlos si están infectadas y no tienen una buena costumbre de lavarse las manos después de ir al baño. Si bien se ha sabido que la salmonela podría estar presente en huevos rotos, con la cáscara dañada o huevos no refrigerados, hace poco se ha encontrado salmonela en huevos enteros, sanos y crudos. Por lo general, los alimentos contaminados no presentan mal aspecto o mal olor. Las bacterias de la salmonela se destruyen al cocinar los alimentos completamente. Además de transmitirse por alimentos, algunas mascotas como las tortugas, las lagartijas y las aves también pueden ser portadores de la salmonela. Hace poco se ha encontrado salmonela en alimentos para perros y el Centro de Control de Enfermedades (CDC, por su sigla en inglés) advierte que esto puede ser una fuente de transmisión para las personas que aún no han sido reconocida. Esto puede afectar especialmente a los niños pequeños, y por ello, no se debe permitir a los más pequeños tocar la comida seca de las mascotas.

¿Cuándo se debe excluir a los niños o miembros del personal que tengan esa enfermedad?
Cada caso de infección por salmonela se debe considerar por separado. Se debe consultar con un profesional de la salud. La decisión de exclusión dependerá de quién sea el portador (si es un niño o un miembro del personal), del tipo de salmonela y de la edad del niño y el riesgo de contagio. La decisión de mandar a hacer un análisis de laboratorio para averiguar si los niños que no muestran síntomas son portadores, dependerá del tipo de salmonela que se diagnostique. Lo usual es obtener tres cultivos de excrementos con resultados negativos (condición normal) antes de poder garantizar que alguien está libre de infecciones y que no es portador de la bacteria.

¿A quién se debe informar?
• En California es obligatorio informar los casos de salmonela. Esto significa que los proveedores de servicios de cuidado infantil deben informar los casos de salmonela a su departamento local de la salud y a la agencia que otorga licencias para establecimientos de cuidado infantil.
• Informe a todos los padres o tutores de los niños y al personal si hay un caso de salmonela en su establecimiento. Mantenga la confidencialidad del niño o de los niños infectados de forma confidencial. Es importante que los padres observen a sus hijos y vean si presentan síntomas.

¿Cómo se puede limitar el contagio?
Es necesario que los proveedores de servicios de cuidado infantil usen buenas prácticas de higiene y de manejo de alimentos para evitar la transmisión de enfermedades provenientes de alimentos dentro del establecimiento de cuidado de niños. Además:
• Asegúrese de que los niños y los miembros del personal se laven las manos después de tocar las mascotas o de limpiar sus jaulas. Los centros de cuidado infantil no deberían tener tortugas, lagartijas u otros reptiles.
• Limite la cantidad de meriendas o comidas ligeras que se preparan fuera de su establecimiento y se consumen en ocasiones especiales y consuma alimentos que provienen de comercios; las meriendas preparadas en casa podrían ser preparadas en condiciones no óptimas y luego transportadas o almacenadas de formas que fomenten el desarrollo de la bacteria.
• No de a los niños huevos crudos o que no estén bien cocidos. Los huevos crudos pueden encontrarse en comidas tales como aderezos caseros de ensaladas, mayonesas y salsas, helado casero y masa de galleta cruda.
• Guarde en el refrigerador las carnes de ave y de res, las cuales deben estar bien cocidas y no rosadas en el interior.
• Los niños no deben consumir productos lácteos no pasteurizados o crudos; esto incluye la leche cruda.
• Asegúrese de refrigerar, cuando sea necesario, los almuerzos que se preparen en casa, esto se refiere tanto a las comidas con carne como a las que sólo contienen vegetales crudos. Se deben refrigerar los productos lácteos y la fórmula líquida para evitar el desarrollo de bacterias, incluyendo la salmonela.
Children with Emotional Issues in the ECE Setting

One out of five American children and adolescents may have a behavioral, emotional or mental health problem. Emotional Disturbance is one of the disabilities defined in the Individuals with Disabilities Education Act (IDEA). Every child’s mental and emotional health is important. These disorders may be painful and severe. However, they can be recognized and treated. Early intervention is important to maximize the child’s potential.

Causes of Emotional Disturbance in children:
The causes of emotional disturbance in children, like many other mental health disorders, are often unknown. However, various factors such as genetics, brain disorders, diet, stress, and family functioning have been suggested as possible causes. It is important to know that research has not shown any of these factors individually to be the direct cause of behavior or emotional problems.

The signs and symptoms of Emotional Disturbance, as defined by IDEA are as follows:
(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors.
(B) An inability to build or maintain relationships with peers and teachers.
(C) Inappropriate types of behavior or feelings under normal circumstances.
(D) A general pervasive mood of unhappiness or depression.
(E) A tendency to develop physical symptoms or fears associated with personal or school problems. [Code of Federal Regulations, Title 34, Section 300.7(c)(4)(i)] (NICHCY)

Who can help with identification?
Parents, family members, child care providers, and pediatricians all have opportunities to observe and identify infants and toddlers and begin referral process to the necessary intervention to reduce the effects of unusual psychosocial development in these children. This can only be done with careful observation of young children in a variety of settings while they interact with the children and adults around them. Mental health and behavior interventions focus on helping children change unhealthy patterns of behavior and learn new coping skills. This is possible by organizing ECE curriculum or programs to decrease the likelihood of challenging behavior and helping children to develop self-regulatory skills.

Tips for child care providers
• Stay calm
• Learn advocacy skills to help the family
• Work collaboratively with the family and other service providers and work effectively as a team member
• Utilize the child’s Individual Educational Plan (IEP) if the child is receiving mental health services
• Maintain confidentiality and appropriate professional boundaries
• Understand young children’s different abilities and disabilities
• Monitor safety at all times, avoid chaotic or unpredictable situations.

Meeting the needs of children with Emotional Disturbance:
Under the Individuals with Disabilities Education Act (IDEA), children with emotional disturbance behaviors are eligible for special education and related services. If you have a child with signs and symptoms of Emotional Disturbance, please contact CCHP at (800) 333-3212 or one of the following resources.

Resource and References:
National Mental Health Information Center
http://mentalhealth.samhsa.gov/publications/allpubs/CA-0006/default.asp#1
Sevier County Special Education, www.slc.sevier.org/edandbd.htm

by Tahereh Garakani, MA Ed
Adopting Greener Environmental Practices

Welcome to the new Child Care Health Connections Growing Up Green column! “Growing up green” is the catchphrase of the Department of Pesticide Regulation’s (DPR’s) program to encourage less pesticide use in Early Care and Education (ECE) facilities. During the coming year we are partnering with the California Department of Pesticide Regulation to provide articles in every newsletter that focus on ways you can adopt “greener” environmental practices that will protect the children in your care as well as you and your staff from exposure to toxic chemicals.

What is a pest?
A pest is any living organism that interferes with or threatens human, animal or plant health, property or the environment. A pest in one environment may be beneficial in another.

What are pesticides?
Pesticides are substance used to control, prevent, destroy, repel, attract or mitigate any pest.

In the coming months we will offer advice and resources on how to practice safer pest management in your program settings with a focus on pests that are common to child care settings; for instance, ants, roaches, and rodents (rats and mice).

What is Integrated Pest Management (IPM)?
IPM is an approach to prevent pest infestations and reduce pesticide use through identification, prevention, and monitoring of pests. It identifies when to take action if pests do become a problem, using a combination of pest management techniques that have the least possible risk of exposure of young children and ECE staff. IPM methods combine information on:

- The life cycles of pests:
  - How long does it take for an insect to grow to adulthood and lay eggs?
  - Does a female lay eggs just once or numerous times?

- The ways in which pests interact with the environment
  - What foods do they eat?
  - Where do they like to hide
  - What are their sources for water?

- How pests find their way into the environment?
  - Do they burrow or find their way into existing cracks and holes?

- Simple prevention practices such as
  - sanitation
  - creating better physical barriers so pests don’t have access to the environment

When pests become a problem in the environment, IPM strategies use the least-toxic alternatives for getting rid of them.

Resources:
Department of Pesticide Regulation School IPM website: www.schoolipm.info
UC Davis Statewide Integrated Pest Management Program: http://www.ipm.ucdavis.edu/

by Vickie Leonard, RN, PhD
Soy formula is developed with soy protein and without lactose as a substitute for breastfeeding and cows’ milk formula. Despite the fact that soy formula has limited and specific indications, it is used to feed an estimated 25% of infants in United States.

Background
Soy formula has been used in infant feeding for almost 100 years. It was first recommended for the treatment of summer diarrhea. In the 1970s, use of soy-based formulas became common especially for infants who could not tolerate milk protein or lactose. Lactose, also referred to as milk sugar, is the natural sugar in milk. When children and adults cannot digest lactose, they may experience diarrhea, vomiting, gas and cramps.

Human Milk for Human Infants
Human milk is the ideal source of nutrition for infants. As an exclusive food, it is the best food that meets the entire nutritional needs of infants from birth until 6 months of age. Breastfeeding protects infants from many acute and chronic diseases and has advantages for the mother, as well. There are very few medical reasons why a mother should not breastfeed. If infants receive formula during the day when they attend child care, it is also beneficial to give the infant their mother’s expressed and stored breast milk. Iron-fortified infant formula is the best source of nutrition if human milk is not available.

The American Academy of Pediatrics’ Policy on Soy Formula
The American Academy of Pediatrics (AAP) encourages and supports breastfeeding. The AAP has recently updated its review of soy protein-based formulas. Published in the May 2008 issue of Pediatrics, the updated review addresses the advantages and disadvantages of phytoestrogens in soy formulas. Phytoestrogens, sometimes called “dietary estrogens”, are natural compounds, similar to human hormones, and may cause hormonal imbalances.

Summary of Recommendations for Use in Infant Feeding
1. Although soy formulas are popular and may be used for full-term infants, there are few specific circumstances in which they are recommended to be used in place of cow milk-based formula.

2. For infants with documented cow milk protein allergy, extensively hydrolyzed protein formula or synthetic amino acids should be considered, because 10% to 14% of these infants will also have a soy protein allergy. Hydrolyzed protein is protein that has been broken down into its component amino acids.

3. Most previously well infants with acute gastroenteritis (infection or irritation of the digestive tract) can be managed after rehydration with continued use of human milk or cow milk-based formulas. Soy formulas may be indicated if the diarrhea causes temporary lactose intolerance.

4. Soy formula has no advantage over cow milk formula as a supplement for the breastfed infant, unless the infant has a medical condition that requires them to use soy-based formula.

5. Soy formulas were not developed for or recommended for premature infants.

6. The routine use of soy formula in the prevention or management of colic in infants—a condition marked by recurrent episodes of prolonged and uncontrollable crying and irritability in an otherwise healthy infant – has not been shown to be effective in research studies.

Resources and References
Pediatrics 2008; 121; 1062-1068, Use of Soy Protein-Based Formulas in Infant Feeding.


by Rahman Zamani, MD, MPH
prevent the possible harmful effects of exposure to certain substances even before the cause and effect relationships are fully established scientifically because the risks are substantial.

A recent EPA report highlights some important research findings on the effects on children of exposure to chemicals, including pesticides. The report tells us that early childhood is a very vulnerable period for exposure to environmental factors. For instance:

- Infants and toddlers who mouth surfaces contaminated with pesticides and other chemicals receive much higher doses of those chemicals relative to their body weight.
- Infants develop the ability to metabolize pesticides differently based on their genes. Many babies do not develop the ability to metabolize some pesticides during the first two years of life, putting them at greater risk of health effects from exposure to pesticides.

Integrated Pest Management (IPM) is an effective way to reduce children’s exposure to both pesticide and allergen triggers. In coming issues of the newsletter, we will describe how IPM works for pests commonly found in child care environments.

Resources:
Department of Pesticide Regulation School IPM website: www.schoolipm.info
UC Davis Statewide Integrated Pest Management Program: www.ipm.ucdavis.edu/

by Vickie Leonard, RN, PhD

---

**July is the UV Safety Month**

The following resources are available from the CCHP website at www.ucsfchildcarehealth.org:

- Protect Young Children from Harmful UV Rays
  www.ucsfchildcarehealth.org/pdfs/newsletters/2003/CCHPJul_Aug03.pdf
- Summer Safety
  www.ucsfchildcarehealth.org/pdfs/healthandsafety/SummerSafetyEN092506_adr.pdf
- Smart Fun in the Sun
  http://ucsfchildcarehealth.org/pdfs/healthandsafety/smartfunsunen060604_adr.pdf

**August is the National Immunization Awareness Month**

The following resources are available from the CCHP website at www.ucsfchildcarehealth.org:

- Vaccine Safety
  http://ucsfchildcarehealth.org/pdfs/factsheets/VacSafety_0308.pdf
- Preventing and Managing Illness in ECE Programs
  www.ucsfchildcarehealth.org/html/pandr/trainingcurrmain.htm
- Vaccines Aren’t Just for Children
  www.ucsfchildcarehealth.org/pdfs/factsheets/Vaccinesen050404.pdf
- Help with Blue Immunization Cards
  www.ucsfchildcarehealth.org/pdfs/newsletters/2006/Nov_Dec_06.pdf

Remember that Healthline nurses and an ECE inclusion/Infant Toddler specialist are available Monday through Friday to answer your questions about health and safety in childcare. Give us a toll-free call at (800) 333-3212.
Community Care Licensing Division's Child Care Update for May 2008
The Community Care Licensing Division's Child Care Update for May 2008 is now available online at http://ccl.dss.caahwnet.gov/res/pdf/CCUpdate0508.pdf

Keeping Kids Safe: Your Home Child Care Emergency Plan. Minnesota has just published an emergency planning booklet, Keeping Kids Safe: Your Home Care Emergency Plan, for family child care providers and family, friend and neighbor caregivers. It will be translated into Spanish, Hmong, Somali and Arabic. Available at http://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5299-ENG

Designed For Disease: The Link Trends in Infancy/Early Childhood and Middle Childhood Well-Being 1994 to 2006. A special report from the Foundation for Child Development looks at how children ages 0-10 are faring in the U.S. There is good news: mortality rates for children ages 1 to 4 decreased, lead poisoning rates decreased and preschool vaccination rates increased. Authors credit advocates, parents and government policy. Online at www.fcd-us.org/usr_doc/EarlyChildhoodWell-BeingReport.pdf

New Resources from the National Scientific Council on the Developing Child (NSCDC) at Harvard University.
The NSCDC has released several new summaries of recent studies relevant to ECE including:
- How Early Child Care Affects Later Development
- How Gene-Environment Interaction Affects Children’s Anxious and Fearful Behavior
- The Timing and Quality of Early Experiences Combine to Shape Brain Architecture. This report summarizes the most recent scientific advances in understanding the importance of sensitive periods on brain development, and the implications of those findings for policy. A pre-publication copy is available online at http://www.developingchild.net/pubs/wp/Timing_Quality_Early_Experiences.pdf

Between Local Food Environments And Obesity And Diabetes. A new study released by The California Center for Public Health Advocacy, PolicyLink, and the UCLA Center for Health Policy Research, examines the relationship between food availability and the likelihood of being obese or having diabetes. Online at www.publichealthadvocacy.org/DesignedForDisease.html

Children’s Environmental Health Disparities fact sheets. EPA has four new fact sheets on children’s environmental health disparities. These new fact sheets address disparities in secondhand smoke exposure and asthma among African American and Hispanic American children Online at http://yosemite.epa.gov/ochp/ochpweb.nsf/contents/publications2.htm#2

Designing Quality Rating Systems Inclusive of Infants and Toddlers. This publication from the National Infant & Toddler Child Care Initiative offers suggestions for the intentional inclusion of quality indicators for infants and toddlers within state and tribal child care Quality Rating Systems. Online at http://nccic.org/itcc/publications/qrsdesignelements.htm