

Public health for children

Public health provides for the protection of the general public through the detection, control, and eradication of diseases which are transmitted to people.

IMMUNIZATIONS -- Provided to protect children from diphtheria, Haemophilus influenzae type b meningitis, measles, mumps, rubella, tetanus, varicella (chicken pox) and whooping cough (pertussis). Florida law now currently requires children entering a public or private school to be immunized against diphtheria, Haemophilus influenzae type b (prekindergarten only), hepatitis B virus (kindergarten, seventh and eight grade), measles, mumps, pertussis, rubella and tetanus. In addition, children attending a child care facility are required to be immunized against diphtheria, Haemophilus influenzae type b, measles, mumps, rubella and tetanus. Immunization against varicella (chicken pox) is recommended for children following their first birthday unless they have had the disease.

Vaccine preventable disease

<http://www.immunization-sd.org/parents/eng/diseases.html#tetanus>

Tetanus

Tetanus is a disease caused by a harmful protein called a toxin. This toxin attacks the muscles and causes them to painfully constrict. If the toxin affects the muscles of the throat, breathing can be so difficult that the child will suffocate. Tetanus is different from other vaccine preventable diseases because it is not a disease that you catch from someone else. The bacteria live in the soil and usually enter the body following puncture of the skin. Items likely to be contaminated with the tetanus bacteria include nails or pieces of glass that were lying on the ground. Also, gardening is an activity that exposes people to tetanus. Once under the skin, the bacteria make a toxin that causes muscle spasms. If these spasms occur in the throat, they can interfere with breathing, causing suffocation. In addition, the toxin can also damage the heart. It's part of children's nature to play and be adventurous and as they can often injure themselves, it's important to immunize them against tetanus. Hand washing and bathing do little once the bacteria actually get under the skin.

Public health protects the health of the population by monitoring and regulating activities which may contribute to the occurrence or transmission of disease.

FOOD INSPECTION -- Programs ensure that certain food service establishments operate in a safe and sanitary manner to minimize the occurrence of foodborne illnesses. This includes inspection of facilities where food is processed, prepared or served.

WATER SUPPLIES -- Public health regulates private and certain public water supplies and provides advice on well location and maintenance.

WASTE DISPOSAL -- Programs ensure that septic tanks and other on-site sewage disposal systems are properly planned, installed and operated to prevent the spread of disease.

OTHER INSPECTIONS -- Counties inspect nursing homes, day care centers, schools, mobile home and recreational vehicle parks, swimming pools and bathing places, and other public and private group care facilities to ensure that the facilities are safe and sanitary. Staff also investigate and resolve complaints about sanitary nuisances.

ANIMAL BITES -- Public health staff investigate animal bite reports.

Road safety

Don't Forget The Tips To Stay Healthy!

The following tips can help you and your family stay healthy, not just during flu season, but all year long:

- Wash your hands with plenty of soap and water for at least 15 seconds,
- Cover your cough by using your arm - **NOT** your hands to block a cough or sneeze,
- Get plenty of rest & drink plenty of water,
- Eat at least 5 servings of fruits and vegetables per day,
- Stay home if you are sick,
- Avoid touching your eyes, nose and mouth!

http://www.wpro.who.int/public/policy/budget/programme/31_nut.html

Proposed program budget 2000-2001 NUTRITION

Regional situation

There is both under- and overnutrition in the Region, affecting all age groups.

The population groups most vulnerable to undernutrition are women and young children. Undernutrition in the form of protein-energy malnutrition remains high in parts of some countries and affects mainly preschool children. Undernutrition can be seen in the prevalence of low-birth-weight babies born to underweight mothers. This has an impact on morbidity and mortality from infectious diseases and on the full mental and physical development of children.

Micronutrient deficiency control is progressing, especially the control of iodine deficiency disorders, with the expansion of salt iodization programmes. The control of vitamin A deficiency disorders relies on the supplementation programmes in a few countries where it is a problem. The control of iron deficiency anaemia remains a complex nutritional problem affecting up to half of all pregnant women in the Region.

There is evidence that malnutrition in early life can affect the health and quality of life in later years. In adolescent years, dietary and lifestyle patterns shape future health. Childhood and adolescent obesity is a concern in some countries and areas as it can lead to noncommunicable diseases in later years. The current changes in lifestyle and diet have already contributed to higher adult morbidity and mortality rates from cardiovascular and cerebrovascular causes and a higher incidence of non-insulin-dependent diabetes.

The formulation of national nutrition policies and plans of action in most countries has led to an integrated approach to nutrition problems. Specific attention is given to the elimination of iodine, iron and vitamin A deficiencies as public health problems, and to the promotion of optimal infant and child feeding practices.

FOOD SAFETY GUIDELINES

http://www.keepkidshealthy.com/nutrition/food_safety.html

To protect your child from germs that cause food poisoning, it is important to practice the following food safety techniques, which include not giving your child undercooked or poorly refrigerated poultry, meat, fish or eggs; washing your hands, utensils and kitchen surfaces after handling uncooked poultry and meat; thoroughly washing fruits and vegetables; not giving your child unpasteurized dairy products or fruit juices; avoiding

fish and shellfish from noncommercial sources; not serving hamburgers rare; promptly refrigerating leftovers and not leaving foods at room temperature for more than a few hours; defrosting foods in the refrigerator; and keeping your refrigerator set to at least 40 degrees Fahrenheit and your freezer to 0 degrees.

To help prevent your family from getting sick from eating contaminated foods, follow these guidelines when buying and preparing their meals:

- Keep your **refrigerator** at or below 41 degrees F and your **freezer** at 0 degrees.
- When shopping for foods, quickly return home and **refrigerate** perishable foods and place bags that contain meats, poultry, fish and eggs separately from other foods to avoid contamination.
- Do not buy or use foods without intact **packaging**.
- Do not buy or use **cans** that have been dented or that are bulging.
- Consider using a **plastic cutting board** to prepare foods, since bacteria can become trapped in the grooves of wooden cutting boards.
- **Wash your hands** for twenty seconds with soap and warm water before preparing foods, before you begin to prepare a new food and again before you serve the food.
- Avoid **cross-contamination** of foods by washing utensils, cutting boards, and all kitchen surfaces that come in contact with raw meats and poultry before preparing a new food with them. Also be careful to use a separate plate for cooked foods then the one you used when the food was still raw.
- **Rinse fruits and vegetables** before serving or eating.
- **Thaw** and **marinate** foods in the refrigerator, instead of leaving them out at room temperature.
- **Wash dishcloths** in hot water after using them to clean up after raw meats and poultry.
- Keep **pets** away from all areas where you prepare foods.
- Thoroughly cook foods to kill germs and consider using a **meat thermometer** to ensure proper cooking temperatures. **Red meats** should be cooked to an interior temperature of 160 degrees F and make sure the inside is brown or gray to make sure it is fully cooked. Hamburgers especially should not be served rare. **Poultry** should be cooked to an interior temperature of 180 degrees F and until the juices run clear.
- **Refrigerate leftovers** and do not leave foods out at room temperature for more than two hours.
- Throw away partially eaten foods and beverages.
- Thoroughly **reheat leftovers** before eating.
- Do not eat raw **eggs**.
- Do not drink **unpasteurized** milk or fruit juices (especially apple cider that is not pasteurized or heat treated).
- Do not use foods or beverages that taste, look or smell unusual.
- If you are unsure if a food is still good, be safe and throw it out.

Teaching Children About Food Safety

<http://hgic.clemson.edu/factsheets/HGIC3607.htm>

Consider these ideas when planning daily activities:

- Use stickers to teach where foods are stored. Use large ones of different colors on the refrigerator, freezer and cupboard. Put smaller ones of the same color on all foods to show where they belong. If you do not want to use the actual food, use clean empty food containers, or pictures cut from magazines. Or, let the children cut or tear out food pictures from a magazine, and then attach the right stickers.
- Relate storybook monsters who like to eat up things, like the giant in "Jack and the Beanstalk" and the monsters in "Where the Wild Things Are," to the tiny "monsters" – germs and bacteria, that are always ready to attack foods and make them unsafe. Growing things, like — fruits, vegetables, and animals — are naturally protected against bacteria until they are harvested for food. Then it is a race to see who gets to enjoy the food.
- You will know the food spoilers won if you see mold on bread or cheese, mushy spots on fruits and vegetable, or a bad smell on other foods. Knowing when the food poisoners win is hard because they do not always change the way food looks or smells. Remind children to keep cold food cold, to keep food clean, and to cook food thoroughly.
- Play the "Feed My Friend" variation of "Pin the Tail on the Donkey." On a life-size outline of a child, mark off areas like the sample in Figure 1. Use a paper cutout of a spoon instead of a tail, and try to pin it on the mouth. If the children can read, put the comments on each area. Otherwise, you comment on why My Friend cannot eat if the spoon touches the rabbit, the ball, the dirty clothes, etc.

ACTIVITY PAGE

Find the six food safety mistakes

Answers: 1. Mayonnaise is in the cupboard with the lid off. 2. Backpack is on the counter. 3. Cat is on the counter. 4. Milk is not in the refrigerator. 5. Sandwich is on the floor. 6. Hot dogs are in the cupboard.

Injury Prevention <http://www.emedicine.com/ped/topic3046.htm>
Prevention of burns

Keep doors and windows locked for the safety of both you and the children.

Know where "dangerous" items are located such as medicines, bleaches, household cleaners and electrical appliances. Keep them out of children's reach if parents have not locked them away in a secure place.

Home fire safety and burn prevention

Fires and burns combined are the third most common cause of unintentional childhood injury death, behind motor vehicle collisions and falls. In Illinois, for example, between 1989 and 1998, burn injury from fires was the leading cause of death for children younger than 5 years. Each year in the United States, approximately 1000 children aged 15 years and younger die in residential fires. Children younger than 5 years are twice as likely to die in a residential fire than the rest of the population. Smoke detectors should be installed near each sleeping area and on each floor of the home, including in the basement. These detectors should be in working order and regularly checked for proper functioning. Families should develop a home escape plan in the event of a fire. Children should be taught to feel a door for warmth; stay close to the ground if smoke is present; and to stop, drop, and roll if their clothing begins to burn. More information in English and Spanish is available at the US Fire Administration Web site at www.usfaparents.gov.

Burns should be treated by cooling as soon as possible with cool running water and by applying a clean dressing. Burn severity is described in terms of degrees. If there is any question of a moderate- or high-degree burn, medical attention should be sought.

The risk of scalding burns can be lowered by instructing the parent to set the hot water heater in the home to 120°F (49°C) or lower. Before 1980, manufacturers routinely set water-heater temperatures at 140°F (60°C) or higher. At this temperature, a full-thickness burn in an adult would occur in about 2-5 seconds; in children, only about ½ second to 2 seconds is required for a similar burn.

Ingestion prevention and choking

Children learning to crawl or walk should be protected from all dangerous chemicals and substances found in the home. These should be put out of reach from children, and the use of child protective devices to prevent opening of cabinets should be encouraged.

All babies and toddlers should avoid small objects and foods because of the threat of choking. Batteries, buttons, jewelry (especially necklaces and hoop earrings), coins, certain holiday decorations, and small toys should be eliminated from the small child's environment. The most dangerous foods include peanuts, popcorn, hot dogs and sausages, whole grapes, raisins, bites of apple and meat, carrots, and candy.

Water safety

Infants and children need to be watched at all times when around any water. Instances of toddlers drowning in containers of water as small as a bucket have been reported. Because they are top-heavy, children who put their heads into a bucket may be unable to right themselves and can easily drown in the water or other liquid the bucket contains.

Leaving a child unattended while he or she is bathing is a particularly common, yet extremely dangerous, occurrence. Eight percent of all childhood drownings occur in bathtubs.

For both a fun activity and to increase awareness of water safety, swimming lessons are generally encouraged for children older than 4 years. Swimming programs with proper supervision are encouraged for infants and toddlers, but they have not been shown to decrease the risk of drowning. Of recreational activities, swimming carries the highest risk for children. Ideally, public swimming pools should have a lifeguard in attendance. Private swimming pools should be fenced so that unsupervised children—especially those aged 18-30 months, who are most vulnerable—cannot gain entrance. The fence should be 4 feet tall or higher. The distance between the bottom of the fence and the ground should be fewer than 4 inches. The gate of the pool fence should be self-latching and self-closing.

Child developmental screening and growth monitoring<http://www.capegateway.gov.za/eng/yourgovernment/gsc/305/services/11495/6409#growth>

Mothers/caregivers are advised to bring their newborn/s to primary health care clinics for regular check-ups. Health care staff will monitor the child's 1:development 2:growth

Developmental screening is done as a routine during clinic visits for immunisation. Screening for developmental disability occurs three times when the child is:

- between 0-6 weeks
- 9 months
- 18 months old.

The child is physically examined and observed. The screening test helps to monitor physical and psycho-social development. The tests evaluate whether the child is growing appropriately for their age and checks on developmental milestones such as sitting, standing, crawling, walking, talking and handling objects. The child's vision and hearing ability is also checked.

If there is a problem, the child is referred to a specialist clinic or a rehabilitation professional e.g. occupational therapist where available depending on the problem and the needs of the child.

The screening test findings are recorded on a clinic card and a growth chart, both of which are kept by the clinic. The child's weight is also recorded on the Road to Health Chart (RTHC), which is given to the mother when her child is born, and it is kept by her. The RTHC card is an ongoing record of the child's progress and mothers must take them to all follow-up visits to the clinic.

Growth Monitoring forms the basis of comprehensive child health care. It includes the regular measurement of weight (and sometimes length) of the child. Weighing starts at birth and continues until the child is five years old. Ideally the child weight must be taken once a month until the age of two years and then three times a month until the child is five years old. The clinic sister enters the baby's weight on the Road to Health Card. The weight is also checked against the growth chart to see if the weight falls within the acceptable range for the child's age. If the child is underweight, food supplements are available at clinics or the child is referred to secondary or tertiary level hospitals.