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ABSTRACT

Presentations concerning a variety of special programs operating within the framework of a large comprehensive child care program were discussed. A description is given of how a specialist from a certain discipline functions in the many varied programs aimed at prevention. The specialty is nutrition. Each presentation discussed has opportunities for delivery of nutrition services aimed at helping the child and his family develop to their fullest potential. On the Crisis Team, the nutritionist who is also trained in family therapy techniques is able to help parents understand and cope with special feeding problems. In the Hospital Child Life Program a nutritionist can be an asset to the staff trying to work with the child on a special diet. In the training of child development consultants, the nutritionist has a role as educator and consultant. The Vista Larga Therapeutic School Project has extensive nutrition services built into its program. It is pointed out that while severe nutritional problems exist in this country, the much more common nutritional problems are much less severe. The nutrition evaluation process consists of parent interviews, feeding history, analysis of dietary intake, feeding skill evaluation, and occasionally biochemical analysis for 17 different body nutrients. Preventative plans and recommendations cover such areas as nutrition and dental health, weight control, food and meal patterning in relation to behavioral characteristics, and techniques for developing proper eating habits. A community nutrition workshop aimed at feeding problems of children is planned. (CK)

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NEW PREVENTION PERSPECTIVES IN
NUTRITION SERVICES FOR CHILDREN

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You have just heard presentations concerning a variety of special programs operating within the framework of a large comprehensive child care program. I would like to take this time to describe to you how a specialist from a certain discipline functions in the many varied programs aimed at prevention.

My specialty is nutrition and since it is known that human development and nutrition are closely linked, it seems natural to include this aspect in programs that are dealing with the physiological, psychological and sociological development of children. However, for many reasons, this has not always been the case in many child care programs.

Each program that has been discussed today has opportunities for delivery of nutrition services aimed at helping the child and his family develop to their fullest potential.

For example: On the Crisis Team, the nutritionist who is also trained in family therapy techniques is able to help parents understand and cope with special feeding problems. She is also able to warmly listen and understand and give guidance because she has worked with many similar children.

In the Hospital Child Life Program a nutritionist can be an asset to the staff trying to work with the child on a special diet. Or she can be a link between the hospital and home assuring that special feeding problems are resolved and that the family is truly aware of the importance of proper feeding in preventing recurrent illness. It is also possible for the nutritionist to assist families with special problems such as inadequate food resources or poor sanitation. We have found many hospitalized children in families who have grossly insufficient funds for food.

In the training of child development consultants, the nutritionist has a role as educator and consultant. The entrée to families for the CDC can be through talking about food and eating, which is non-threatening and comfortable to talk about. This can lead into all areas of child development and child rearing practices. It is essential that child development consultants in their training receive instructions in the food and feeding problems that families face. An understanding of the relationship of food to child growth and development is also essential. The cultural patterns of the families served must be widely known and truly accepted by the CDC working in the homes.

The Vista Larga Therapeutic School Project has extensive nutrition services built into its program. These include food and feeding history, nutritional biochemical screening, family counseling around eating problems, and special diet therapy, related to the nutrition evaluation findings.

The goal of nutrition services in the Vista Larga Therapeutic School Project is to eliminate poor nutrition as a factor in the behavior of the child.

While severe nutritional problems exist in this country, the much more common nutritional problems are much less severe. However, mildly inadequate or borderline intake of specific nutrients do frequently occur. This can affect the functioning of the central nervous system and therefore the behavior and learning ability of the child. Prolonged inadequate calorie or nutrient intake results in weakness, fatigue, depression of motor activities, reduced ability to concentrate, and reduced ability to deal with one's environment. These adverse effects can be reversed by continued use of nutritionally adequate diets.

Through our special activities with the children attending this school, we

endeavor to identify and correct any nutrition problems.

An example of the usefulness of looking at a child's nutrition is the case of a child under consideration for this Project for disturbed children who was found to have severe vitamin deficiencies (particularly folic acid), protein and calorie deficits, and anemia-all causative factors for his high irritability levels and abnormal behavior.

There are other facets of preventative nutrition services which can be provided in a comprehensive child care center such as Programs for Children. One of these is nutritional screening and evaluation. While the children who come to our center for evaluation and treatment have a multiplicity of problems, by recognizing those that also have possible nutrition complication, you can focus on something that is relatively easily correctable, and thus can prevent poor nutrition from becoming a causative factor for the child's other problems. On the other hand, behavior and emotional problems are often exhibited as deviant eating behaviors. By looking at what is cause and what is effect, you can more clearly pinpoint a child's problem.

The nutrition evaluation process, as previously discussed, consists of parent interviews, feeding history, analysis of daily dietary intake, feeding skill evaluation, and occasionally biochemical analysis for 17 different body nutrients. From this a nutrition diagnosis and recommendations, both preventative and therapeutic, are made. Through nutritional evaluation, important insights into the child's culture, the family structure, interaction among members, economic arrangements as well as knowledge of the child's diet, eating skills and level of development may be discovered. These can lead to a more individually designed

plan for care.

The preventative plans and recommendations cover such areas as nutrition and dental health, weight control, food and meal patterning in relation to behavioral characteristics, techniques for developing proper eating habits in children and tips on stretching the family's food dollar to cover adequate quantities of nutritious food. In all instances, attention is given to the family's cultural background and previous food experience.

Another facet of preventative nutrition services at Programs for Children is the provision of nutritionally adequate food to all the students in day classes. This is done in a family style setting which encourages the development of proper eating habits. As a preventative measure against future physical, emotional, and social adjustment problems, all overweight students are on a weight control program.

Another program which includes a great deal of preventative nutrition impact is our services to retarded children. These children are frequently at the mercy of the "food provider" who may or may not be totally enamored by the task. Since muscle development and overall body health and development depends on, among other things, proper food, it become vital to encourage and assist the child's caretaker to provide the best food possible. Additionally, most retarded children can develop the body skills necessary to eat in a normal way and it is helpful to aid families in developing these skills in their child. A retarded child who can feed himself regular foods and eat in a normal manner is much more acceptable socially and thus has more opportunities to relate better to his world and is much less of a burden to his family.

Another service we have just begun is group therapy for mothers of children with feeding problems. Frequently these problems have arisen because of a disturbed mother-child relationship. If the problem has become so severe that the child is failing to thrive and maternal deprivation is exhibited, the mother is guided into individual therapy. Additionally, the mothers' group serves as an educational opportunity to learn about normal development, proper child rearing practices and ways the mothers themselves can stimulate intellectual and developmental growth in their children. The group is conducted by the nutritionist, public health nurses trained in infant stimulation, and a psychiatrist. While its primary emphasis is not on diet, the "hoped for" outcome is improved mother-child relationships, better feeding practices and improved child growth.

On the larger scale, there is outreach into the community through service and training to other programs serving children. Pertinent information about children and families jointly served is shared so that appropriate planning and utmost service can be given.

In the future, a community nutrition workshop aimed at feeding problems of children is planned. Hopefully, this will explain some of the normal developmental feeding steps and childhood needs to mothers who are concerned and perhaps prevent small problems from developing into big ones.

Thus, there are many opportunities for nutrition to play a role in preventative services for children. One only needs to be cognizant of the opportunity and willing to undertake the task. The nutritionist who does so is rewarded with the knowledge that every attempt has been made to improve the child's health and well being and to strengthen the structure of the family she deals with.

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