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ABSTRACT

This package consists of a facilitator's guide and three booklets that were developed to provide basic preventive health information for adults caring for young children and presents a story line with characters who become more self-confident in coping with children's health issues as they build their knowledge about preventive health. The stories, which are written at about a fourth-grade reading level, were reviewed by health and literacy educators and adult learners and pilot tested with adult participants in Even Start family literacy programs in Pennsylvania. The three stories, which revolve around a grandmother who is raising her granddaughter and two neighbors who are also raising children, deal with the following topics: communicating with children and helping them develop good communication skills; the concept of preventive health; and the importance of dental health and regular dentist visits. The facilitator's guide accompanying the three stories contains the following: explanations of several instructional techniques for building learners' literacy and thinking skills while imparting essential health information; suggestions for adapting the materials for different audiences, including adult beginning readers and nonnative speakers of English; discussion questions, transparency masters, and reproducible literacy activities; 50 recommended resources; and a glossary. (MN)

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Rosalie's Neighborhood

A Health Literacy Series for Parents with Young Children


National Health & Education Consortium
an initiative of the Institute for Educational Leadership

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Rosalie's Neighborhood: FACILITATOR'S GUIDE



NATIONAL HEALTH & EDUCATION CONSORTIUM
an initiative of the Institute for Educational Leadership

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Rosalie's Neighborhood

FACILITATOR'S GUIDE



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Table of Contents

To the Facilitator	1
About the <i>Rosalie's Neighborhood Series</i>	1
About this Guide	1
Preparing for Sessions.....	1
Section 1: Instructional Techniques	3
Before Using the Booklets	4
Build Background Knowledge.....	4
Develop Vocabulary	5
Using the Booklets	5
Introduce the Materials	5
Guided Reading	6
Process Writing.....	6
Section 2: Adapting the Materials for Different Audiences	9
Working with Beginning Readers.....	10
Working with More Advanced Readers	10
Working with Adults Learning English as a Second Language.....	10
Section 3: Instructional Materials	11
Book 1: <i>What is Preventive Health?</i>	12
Build Background Knowledge	12
Develop Vocabulary	12
Overheads.....	19, 25
Literacy Activities	21, 23, 27-33
Book 2: <i>Why Do I Have to See the Dentist?</i>	34
Build Background Knowledge	34
Develop Vocabulary	34
Overheads.....	39-47
Literacy Activities	49-53
Book 3: <i>Let's Talk</i>	54
Build Background Knowledge	54
Develop Vocabulary	54
Overheads.....	59-65
Literacy Activities	67-70
Section 4: Resources	71
Recommended Children's Books	72
Facilitator Resources.....	72
Supplemental Curriculum Materials	73
Organizations	73
Electronic Resources.....	74
Section 5: Glossary	75



To the Facilitator



About the *Rosalie's Neighborhood Series*

Rosalie's Neighborhood is a parent awareness literacy series providing essential health care information for parents or primary caregivers of young children, ages birth to 6. The series includes three short books (written at about a fourth grade reading level), to help parents better understand the importance of providing preventive health and dental care for young children and of communicating with their children in ways that foster age-appropriate language development. The series can be used by teachers, tutors, health care providers, counselors, or anyone working with adults with limited literacy who may need guidance to fully comprehend and use vital health-related information. The materials were written to increase parents' knowledge and skills in seeking comprehensive health care for their children — and in understanding its importance — as they develop literacy and problem-solving skills.

The health information is presented in the narrative style through a series of conversations among friends. In the first story, Rosalie, an understanding grandmother, offers support and information about preventive health to Ginny and Felicia, two young mothers in the neighborhood. In the second story, the three friends share information they have learned about appropriate dental health for their children. The third story focuses on issues related to language development and communicating with children. As Rosalie's neighbors and friends learn together about health-related matters, so do the users of the materials.

About this Guide

This guide accompanies the three books in the series, *Rosalie's Neighborhood: What is Preventive Health?*, *Why Do I Have to See the Dentist?*, and *Let's Talk*. **Section 1** of this guide explains several instructional techniques to help you build learners' literacy and thinking skills while you impart essential health information. The techniques help learners more deeply process and comprehend the information given in each book. **Section 2** provides some ideas and information for adapting the materials for different audiences, such as working with adult beginning readers or non-native speakers of English. **Section 3** includes suggestions for developing background knowledge prior to reading each book; discussion questions to be asked before, during, and after reading each chapter; masters of transparencies to introduce or expand information in the books; and reproducible literacy activities. **Section 4** provides additional resources to extend the benefits of the series, such as suggested readings for children and parents or caregivers, resource organizations, and other curriculum materials to supplement the series. **Section 5** contains a glossary, which can be copied and used for reference by students.

Preparing for Sessions

These materials were designed to be used in a one-on-one tutoring situation or in a group setting with a skilled facilitator. Your role is to ensure that learners enjoy, learn from, and act on the information. This guide will help you be more effective in that role.

First, thoroughly read the books in the *Rosalie's Neighborhood* series. Think about the background of your learner or learners, including their prior knowledge, experiences, and attitudes toward health and health care issues.

Think about your personal knowledge, experiences, and attitudes toward health and health care issues. Consider how to build on this background to expand your and learners' knowledge about these ideas and issues.

Second, become familiar with the instructional techniques and information described in Sections 1 and 2 of this guide. These strategies will help you build learners' reading and problem-solving skills as they learn about preventive health. You may want to learn more about these techniques and to practice them if they are not familiar to you. Information about these approaches as well as training and other assistance are often available through local literacy councils, adult basic education programs, public libraries, colleges and universities, and state departments of adult education and/or state literacy resource centers. Additional resources can be located by searching the Internet for sites that focus on adult basic and literacy education.

Third, read instructional materials provided for the book and choose or make adaptations to

the materials based on your knowledge of the needs and backgrounds of your learner(s). Consider the amount of time you have to cover the materials. Alternate activities so that learners do not become bored or frustrated with any one kind of activity, such as alternating reading and listening activities with class discussion, role plays, and instructional activities. Consider how you can provide a supportive environment that allows everyone to be successful with the materials.

Finally, use the information in Section 4 to supplement your sessions. Check out the suggested children's books from the local library and have them available for learners to look through and borrow. Schedule a visit to the library, and ask the librarian to meet with learners to discuss the library's resources and to help them locate health-related materials for themselves and their children. Identify people in the community to speak about the health-related concepts you are teaching; visit places in the community with your learner(s), such as a clinic, hospital, or dentist's office.

Section



Instructional Techniques

BEFORE USING THE BOOKLETS

Note: The strategies presented here are by no means comprehensive; use them as a guide to get you started but seek additional training to refine your skill in using various instructional methods.

Build Background Knowledge

Everyone has unique experiences, attitudes, and background knowledge about health care, but adults with limited literacy, education, and experience may lack adequate or appropriate information about preventive health care, preventive and emergency dental care for babies and young children or communicating in ways that foster age-appropriate language development. Building background knowledge before using the materials helps learners better understand and use the materials later on.

1. Concept Building

Concept building extends and organizes learners' background knowledge of important terms and ideas. It draws on their prior experiences and helps them link new information with what they already know. It also helps to clarify any misconceptions they may have.

Think about experiences learners may have that are related to the concept you wish to discuss. Although Section 3 of this guide includes sample questions for each book, you might develop additional open-ended questions to tap into these experiences. For example, concept building about preventive health might include questions such as: "Have you ever taken your children to the doctor when they weren't sick? Why is it a good idea?" Use prompts that create strong mental images. For example: "Suppose you ignore a suspicious-looking mark on your child's arm. The mark changes color and grows larger. What do you think will happen if you ignore it? Why is it better for a doctor or nurse to see it right away?"

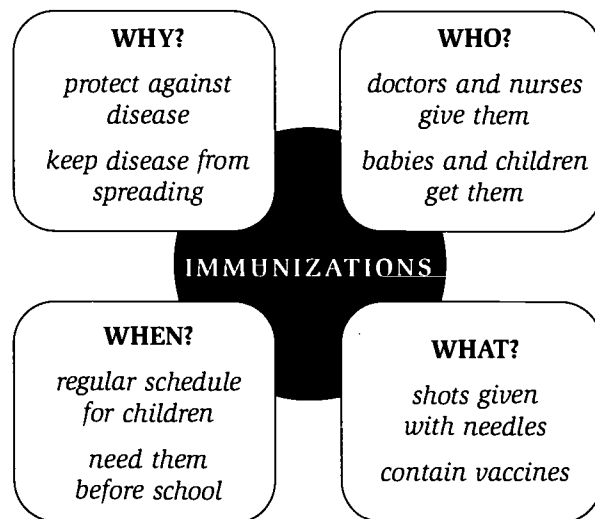
As learners discuss the concept and their experiences, their comments may reveal misconceptions or cultural beliefs and practices that you can address through additional questions. End the discussion by having learners describe the concept in their own words. Record their descriptions, so you and they can review them as you proceed through the books. Explain that the stories they will read and hear will provide more detailed information about the concepts and additional opportunities to discuss them.

2. Mapping

Mapping means making a visual representation of the concepts or terms you are discussing. Begin by having learners brainstorm ideas, experiences, and terms related to the concept. Record their responses on a flip chart, large piece of paper, or chalkboard. Look for and discuss ways to group the terms. Then organize the terms in a visual representation or graphic illustration. For example, you might ask, "What do you think of when you hear 'immunizations'?" Responses to that question may generate the following responses:

shots, crying, needles, babies get them, vaccines, medicine, doctor, measles, polio, protect against diseases, get them for school

Encourage the learners to group similar words or ideas concerning immunizations. Their efforts might be shown visually in the following way:



Develop Vocabulary

The purpose of the *Rosalie's Neighborhood* series is to improve learners' knowledge of health-related concepts and vocabulary. Some health-related words in the books may be unfamiliar or seem difficult to participants and it is strongly advised that the vocabulary be reviewed and practiced before reading the text. This section suggests ways to introduce new words in ways that will help learners develop strategies for becoming more independent readers.

1. Word Families

Help learners see that many of the words they will see and hear may be related or have common word parts. Demonstrate how different word parts or endings may change the part of speech or change the meaning of the word. Help them think of familiar words they already know with similar word parts. For example, you might introduce the word part "aud" when you are preparing to read the book *Let's Talk*. Words in the book that are based on the word part "aud" include auditory and audiologist. Learners may be familiar with other words, such as auditorium and audiotape, which are based on the same word part — and that have meanings related to "hearing".

2. Vocabulary Transparencies and Handouts

Make transparencies from the masters located in Section 3 to introduce and discuss some of the technical terms learners will see and hear in the materials. Make copies of the transparencies to use as handouts or references for learners to keep and take home.

3. The Glossary

Since the glossary contains only health-related terms and phrases, you may need to teach additional vocabulary from the books. The glossaries in Section 5 may be reproduced for students and can be used for more than a reference tool. For example, have students look

through the glossary and find all the words that are about diseases or the words that are about health care workers. Have students work in pairs to develop activities for each other. For example, they can:

- write sentences leaving out one of the vocabulary words and then exchange sentences;
- make word cards with the word on the front and definition on the back and then quiz each other; or
- write sentences using the wrong word and then have their partner correct their "mistake".

USING THE BOOKS

Introduce the Materials

Preview the selected book with learners; discuss the title and look at the illustrations. Introduce the main characters in the story using the transparency (master in Section 3) that lists their names. Mention that the book is a series of conversations in which these characters discuss and solve problems concerning their children and health-related issues. Point out text features that will aid their understanding, such as underlined terms, chapter titles, and illustrations.

Discuss their purpose for reading, such as whether they will read the whole book or just a part of it to locate a specific bit of information. Illustrate how purpose for reading determines reading style. For example, reading narrative text requires the reader to read carefully to understand the information that the characters share. Make a chart of what learners want to find out from the reading. Record their responses on a flip chart or large paper labeled, "What we want to learn about (preventive health, dental care, language development)."

Guided Reading

Guided reading helps learners see that reading is an active process of making sense of text. Through discussion before, during, and after reading, teachers and learners work together to understand the new materials and see how new skills and knowledge can be used in learners' lives.

Read and discuss one chapter at a time. Use the discussion questions suggested for each book — or, your own or student-generated questions — before, during, and after each chapter. After discussion, have learners put into their own words what they learned. Make copies of the relevant transparencies to use as handouts to review important concepts. Use additional or supplemental materials you may need, such as phone books and pamphlets or brochures. Reproduce the literacy activities for each book for additional review and skill-building practice.

Facilitators must be skilled in the art of effective questioning. One technique is to question learners to help them *clarify* their thinking processes. This is sometimes called Socratic questioning. Learners may be asked to:

- explain or support an idea or belief;
- analyze how their perceptions or values affect their beliefs;
- identify their information sources and to evaluate those sources;
- weigh the pros and cons of different points of view to better understand and defend their position.

For example, suppose a student says, “I don’t want to spend my time at the clinic when my child isn’t even sick.” This is a teachable moment when the teacher might ask the learner to support his views with examples. Then, the discussion could focus on other points of view and how they might be supported. Another variation is to question learn-

ers to help them *expand* their thinking processes. Learners may be asked to hypothesize, predict, look for similarities or differences, or to imagine and brainstorm answers to questions such as, “What might happen if ...” For example, the previous discussion might be extended by asking, “Suppose your child has a suspicious bump on his leg that you don’t notice. What might happen if you don’t take him to the clinic?”

Process Writing

NOTE: Section 3 of the guide provides sample writing ideas for each book.

Process writing puts the focus on writing as a way to communicate meaning as learners simultaneously develop their reading, writing, thinking, speaking, and listening skills. It is an especially important activity to use with these materials since keeping a health log is a fundamental preventive health concept. Process writing activities are also beneficial for more

advanced readers or for learners who need practice developing their writing skills. The process writing steps are:

1. *Prewriting:* Talk with learners about their purpose for writing, their ideas, and the style of writing best suited for their purpose.
2. *Drafting:* Learners think about their ideas and how to organize them. They concentrate on getting their thoughts on paper or the computer. Spelling and grammar are not the focus.
3. *Sharing:* Learners read and discuss their writing with others who make suggestions or ask questions to help writers clarify and expand their writing. For example, you might say, “I’m not sure what you mean here. Can you tell me what you mean?” Or, you might guide them to consider important information they left out.

4. *Revising*: Learners make additions and changes, based on feedback from the previous step. The focus is still on meaning in this step.
5. *Editing*: Learners eliminate mechanical and grammatical errors. They should do as much editing as possible on their own, including using a grammar and spell checker on the computer.
6. *Publishing*: Learners share their work with a wider audience. They may read their writing to each other and discuss its potential audience and the context in which it may be read.

Section



Adapting the Materials for Different Audiences

TIPS FOR ADAPTING THE MATERIALS FOR DIFFERENT AUDIENCES

Note: The ideas and tips presented here are by no means comprehensive; use them as a guide to get you started but seek additional training to refine your teaching skills for working with various audiences.

Working with Beginning Readers

Read the book aloud. Have learners read along if they are able.

- Role play situations depicted in the materials.
- Review the information often. Have learners put information into their own words.
- Keep the learning environment free of distractions.
- Allow learners to take materials home for practice, only after you have discussed them in class.
- Provide immediate feedback.
- Break lessons into small segments. Allow extra time.

Working with More Advanced Readers

- Encourage learners to develop higher level thinking skills, such as information acquisition skills — doing research on a topic, gathering and analyzing additional information (perhaps from local clinics or doctors), and reporting on their findings.
- Incorporate additional materials, such as those from local clinics or hospitals, that may be more difficult to read and denser with content.

- Incorporate more writing exercises and group presentations. For example, have learners prepare a presentation for parents at a day care center or write a newsletter telling other parents about the vital health-related information they learned.
- Discuss ways in which learners can act as mentors for other young mothers or care-givers.

Working with Adults Learning English as a Second Language (ESL)

Acknowledge the cultural aspects of how health and health care are perceived and note that family dynamics vary widely among communities. Instructors should also be aware that some immigrant families are wary of official agencies and may not be comfortable applying for assistance.

Before using the text review the vocabulary, concepts and do a reinforcement activity.

Use pictures and real-life materials as often as possible.

- Discuss idioms or other cultural beliefs in the story.
- Role play situations in which the information will be used and stress language skills, especially speaking. For example, role play a telephone call to make an appointment at the clinic.

Section



Instructional Materials



BOOK 1

What is Preventive Health?

BUILD BACKGROUND KNOWLEDGE

Concept Building

Concepts in What is Preventive Health?:

- preventive health and well-child visits
- immunizations
- keeping health records
- asking questions to ensure children's health
- create awareness of cultural perceptions of health

Sample discussion questions for engaging prior knowledge and experience:

- Define what health means to you?
- What is the importance of health to you and your family?
- What keeps you healthy?
- Have you ever prevented an accident from happening? How did you know that the accident might happen? What did you do to prevent it?
- Have you ever taken your children to the doctor when they weren't sick? Why?
- Suppose you see a suspicious-looking mark on your child's arm. The mark changes color and grows larger. Would you take your child to the doctor? Why or why not?
- How do you keep track of important information? How do you organize it?

DEVELOP VOCABULARY

Word Families

Word families in What is Preventive Health?

- aggressive, aggression
- communicate, communication, communicating
- dental, dentist
- detect, early detection, detective
- digest, digested, digestion, indigestion
- eligible, eligibility
- immune, immunize, immunization, immunity
- pharmacy, pharmacist
- prevent, prevention, preventive

Writing Prompts for Process Writing

- Make up a story about how preventive health saved a young child's life.
- Describe in writing how you will use a health care log.
- Write a letter to a friend describing what you learned about well-child visits.

DISCUSSION QUESTIONS

These are sample questions, please adapt them to meet the needs of your students.

Chapter



Introductions

Before Reading/Listening

- Whom do you think we will meet in this first chapter? (Use OH#4 to introduce the characters).

After Reading/Listening

- Where does Rosalie work and what is her job?
- Who will be visiting at 2 o'clock and why?
- Do you go to neighbors and friends for advice and information? Who else do you go to and why? Why do you think Rosalie's neighbors go to her for advice and information?

Chapter



Who Can I Talk To?

Before Reading/Listening

- Does it help to talk to other people when you have problems or concerns? How?
- Think about what you read in Chapter 1. What do you think the title of this chapter means?

After Reading/Listening

- What did Rosalie do to get ready for the visit? What were her reasons? Where did she keep her information? How does this help?
- What brochures and other information does your health clinic have available on children's health? (Encourage learners to bring to class information about children's health that they might have gotten from a health clinic. These can generate additional discussion and instructional activities.)
- Why did Rosalie warn Felicia and Ginny about her advice? What else did Rosalie suggest?
- What do you think Rosalie meant when she said, "Our conversations are a starting place"?
- What are some ways you can take charge of your child's health?

Chapter



What is a Well-Child Visit?

Before Reading/Listening

- Have you ever gone to the doctor when you weren't sick? Why?
- Have you ever taken your children to the doctor or clinic when they weren't sick? Why?
- What do you think you will learn about in this chapter?

After Reading/Listening

- At first, what does Felicia think about well-child visits? Why does she think this way? What changes her mind?
- What is early detection? Why is it important? Have you or anyone you know ever benefited from early detection?

- Why do you think some people do not feel comfortable asking questions of the doctor or nurse?
- Why is it important to ask questions of the doctor?

Chapter



How Do I Pay for Visits?

Before Reading/Listening

- What does the picture on page 16 have to do with the chapter title? What are some ways to pay for a doctor visit?
- What are some concerns people have about paying for health care?
- What are some different ways people get health care?
- What do you think you will learn about in this chapter?

After Reading/Listening

- What is Medicaid? Who is eligible for it? Who or where do you call to find out if you are eligible? Where would you get this phone number?
- (Discuss acronyms. Have learners write out the acronym EPSDT and discuss its meaning.) Do you think it sounds like a good program? Why? Who would you call?
- Have you heard about changes in programs like Medicaid? What do you think will happen to these programs? What would you like to see happen to these programs?
- (**Book 1, Activity 1** contains a sample health log on which to record the local telephone numbers for health and related services. Have learners use phone books to find these numbers and record them in the log.)

Chapter



What Happens at a Well-Child Visit?

Before Reading/Listening

- How is a well-child visit different from an emergency?
- Did you ever go to the doctor when you weren't sick? Why? How is this the same as a well-child visit?
- What do you think you will learn about in this chapter?
- Looking at the picture on page 21, what are some of the things that might happen at a well-child visit?

After Reading/Listening

- How many well-child visits should a baby have in the first year? (If possible, provide brochures from local clinics that include this information and encourage learners to organize the information in a folder or notebook.)
- What does the doctor or nurse look for at a well-child visit?
- What does screening mean? Why is it important? What might happen if we didn't do screenings for diseases like tuberculosis?
- Rosalie talked about screening for lead poisoning. For what kind of housing is it especially important to screen for lead poisoning?

Chapter

6

Rosalie Keeps a Health Log**Before Reading/Listening**

- Do you keep written records of anything? If so, what do you record and why?
- What do you think a health log is? Why do you think a health log is important?

After Reading/Listening

- How is a health log better than trying to remember the information in your head?
- What kinds of information does Rosalie keep in the health log?
- (**Activity 1** includes a sample health log. Review the sample, answering learners' questions as necessary.)
- What are some ways you can have fun keeping a health log?
- Rosalie mentioned that her health log helped the doctor notice that Alisha was lactose intolerant. How did it help? What does lactose intolerant mean?
- What does Rosalie say about how doctors should treat their patients? What would you do if the doctor didn't want to listen to your concerns or answer your questions?
- (At the end of the chapter, return to **Activity 1**. Have learners complete the blank health log for each child. You may want to have extra copies available for learners with more than one child.)

Chapter

7

What is Lead Poisoning?**Before Reading/Listening**

- Where do you think lead poisoning comes from? Look on page 29 for some clues.
- Do you know anyone who has had lead poisoning? What happened to him or her?
- If you don't know anyone, do you know if your home is free from lead? How do you know?

After Reading/Listening

- How can a child get lead poisoning?
- What type of paint is safe?
- If you think you have lead pipes in your house, what should you do each morning? Why?
- Why does the landlord have to tell tenants about hazards in their apartments? Has your landlord (if you have one) told you about any hazards?
- What might the doctor ask to find out if your children are at risk for lead poisoning?

Chapter

8

A Health Log Helps
the Doctor

Before Reading/Listening

- How could a health log help the doctor? How can it help you?

After Reading/Listening

- Rosalie suggests that Ginny look for a reason for Donny's stuttering. What kinds of things do you think Ginny might look for?
- Ginny was worried about Maggie not knowing her ABCs. At what age do you think children should know their ABCs? Who or where would you call to find information on child development? (Developmental milestones are discussed in the third book of the series, *Let's Talk*. Parents may agree to explore this topic later, or they may want to discuss it now. If possible, have information available if parents wish to pursue the topic immediately.)
- Children often show aggression. When should you be concerned? Why do you think Jorge is having trouble?

Chapter

9

Immunizations

Before Reading/Listening

- Use **OH#2** to introduce vocabulary.
- Distribute **Activity #2** and **Handout**. Review descriptions of diseases and complete activity.
- We've learned that immunizations are shots

to protect us from different diseases. Do you remember being immunized when you were young? What do you remember about the experience?

- What do you remember about your children's immunizations? States have different requirements for immunizing children. How can you find out which shots your children will need to enter school? (You may extend learning by encouraging learners to obtain this information and share it with the group.)

After Reading/Listening

- Why are immunizations important?
- If you are immunized one time, will that protect you from disease?
- What is an outbreak? Do you remember hearing about any outbreaks?
- How does Rosalie keep track of Alisha's immunizations?
- Complete #1-2 of **Activity #3**. Review sample record and discuss.
- How can you prepare your child for a visit to the doctor's office or clinic?
- If your child has a reaction to a shot, what can you do to make her more comfortable?
- (Complete **Activity #3**. You may want to have extra copies available for learners with more than one child. Wallet-sized immunization cards are included with these instructional materials.)

Chapter

10

Felicia Takes Charge

Before Reading/Listening

- Look at the title of this chapter. What does "take charge" mean to you?

- What are some ways you take charge in your life? How do you feel when you take charge of a situation?

After Reading/Listening

- How did Felicia take charge? What specific things did she do before she went to the clinic?
- What questions did Felicia ask the doctor?
- Why did Felicia think the doctor was a good one?
- When should Felicia expect to hear the results of the test for lead poisoning? What should she do if the clinic doesn't call her?
- Why did the doctor think Luis should visit the dentist?
- Why does the doctor want Felicia to write about Jorge in her health log?
- What have your experiences been when you've taken your children to the doctor's office? Why were they good/positive? Why were they bad/negative? How could you change these experiences to be positive?

Concluding Questions

- We've learned a lot of new and important information in this book. Name three important things you learned (Be sure everyone names what they learned and that all important concepts are mentioned).
- How will you use this information?
- Who will you talk with or share the health information you've learned?
- What can you do today (or in the next week) to practice preventive health care for your children?

Characters in *Rosalie's Neighborhood*

Rosalie Stevens

Alisha (granddaughter, age 5)

Robert (husband)

Shawna (daughter)

Felicia Gonzalez

Luis (son, age 5)

Jorge (son, age 6)

Ginny McMillan

Maggie (daughter, age 5)

Donny (son, age 4)

Bill (boyfriend)

What is Preventive Health?

Activity #1

Keeping a Health Log

Directions: Look at this sample health log. Fill in the blank one on the next page with as much information as you know. Think about where you can get the information you don't know; then fill in the missing information.

SAMPLE HEALTH LOG

Child's Name Carmen Santos

Birth Date 1/22/96

Important Names and Phone Numbers

Doctor Dr. Robinson 816-555-1212

Clinic Rosedale Clinic 816-555-3456

Dentist Dr. Lopez 816-555-0095

Pharmacy Madison Drugs 816-555-4434

Ambulance Alpha Ambulance 816-555-9234

Friend Mary Frank 816-555-3777

Health Care Visit

Date 5/22/96 to the Rosedale Clinic

Reason for Visit DTP, Hib, OPV shots

Child's Behavior

Date 8/15/96

Behavior cried all morning

Questions for Doctor

Why does Carmen cry all morning sometimes?

I feel like I want to cry too when she does that.

What can I do so I don't get upset?

What is Preventive Health?

Activity #1

HEALTH LOG

Child's Name _____

Birth Date _____

Important Names and Phone Numbers

Doctor _____

Clinic _____

Dentist _____

Pharmacy _____

Ambulance _____

Friend _____

Health Care Visit

Date _____

Reason for Visit _____

Child's Behavior

Date _____

Behavior _____

Questions for Doctor

10 Childhood Diseases

1. measles
2. mumps
3. rubella
4. diphtheria
5. tetanus
6. pertussis
7. polio
8. varicella zoster virus
9. haemophilus influenzae type B
10. hepatitis B

*What is Preventive Health?***Activity #2**

Directions: Read the descriptions of the 10 childhood diseases with your instructor. Answer the following questions.

1. Rubella is also called _____.

2. How can you get Tetanus?

3. What are the two types of vaccines for polio? How are they given?

4. Varicella Zoster Virus is another name for _____.

5. HiB is especially dangerous to children between the ages of _____ and _____.

6. This disease can be spread from a mother to her baby. What is it?

7. What three diseases are prevented by the DTP vaccine?

8. What three diseases are prevented by the MMR vaccine?

*What is Preventive Health?***Activity #2****Descriptions of 10 Childhood Diseases**

- 1. MEASLES** are easy to catch!! Measles causes rash, cough and fever. You can get measles just by talking with a person who has them. They can lead to diarrhea, ear infections, pneumonia, and brain damage, and sometimes death. Measles is prevented with MMR vaccine.

- 2. MUMPS** causes high fever, headache, and swelling of the cheeks or jaw. Mumps are spread by coughing and sneezing. They can lead to hearing loss; painful, swollen testicles; or an infection of the brain and spinal cord called meningitis. Mumps is prevented with MMR vaccine.

- 3. RUBELLA** is also called 3-day, or German measles. Rubella causes rash, mild fever, swollen glands or arthritis. If a pregnant woman gets Rubella, her baby may be born deformed or have other problems. Some of these are deafness, blindness, heart disease and brain damage. Rubella is prevented with MMR vaccine.

- 4. DIPHTHERIA** causes a thick coating in the nose, throat and airway. It can lead to breathing problems, heart failure, paralysis or death. It is prevented with DTP vaccine.

- 5. TETANUS** is spread through a cut or wound on the skin. You may also get tetanus from an animal bite or a bee sting. Tetanus causes serious, painful muscle spasms. It can lead to locking of the jaw so you can not open your mouth or swallow, and death. Tetanus is prevented with DTP vaccine.

- 6. PERTUSSIS** is sometimes called whooping cough because of the sound of the coughing it causes. The coughing and choking can last for several weeks. Pertussis spreads very easily through coughing and sneezing. It can lead to pneumonia, seizures, brain damage or death. Pertussis is prevented with DTP vaccine.

*What is Preventive Health?***Activity #2****Descriptions of 10 Childhood Diseases**

7. POLIO is a dangerous disease. It was very common in the United States during the 1950s. Polio causes fever, sore throat, nausea, headache, diarrhea, stomach ache and stiffness in the neck, back and legs. It can lead to breathing difficulty, paralysis or death. Paralysis means the person can't feel or move parts of the body. Polio is prevented with two kinds of vaccines. The vaccines are called **ORAL POLIO VACCINE**, or **OPV**, and **INACTIVATED POLIO VACCINE**, or **IPV**. Four doses of polio vaccines are given, two orally and two by injection. Oral means by mouth. Injection means given as a shot.

8. VARICELLA ZOSTER VIRUS is another name for chicken pox. Chicken pox causes fever and blisters on the skin. It makes the person very itchy and uncomfortable. Sometimes people with chicken pox also get infections of the skin and lungs. Varicella zoster or chicken pox is prevented with Varicella vaccine.

9. HAEMOPHILUS INFLUENZAE TYPE B, which is also called Hib, can cause an infection of the brain and spinal cord (meningitis), pneumonia and other infections. It can be very dangerous for young children. Hib can lead to permanent brain damage or death. Children between the ages of 6 months and 1 year of age are most at risk. Hib is prevented with the Hib vaccine.

10. HEPATITIS B causes a yellowish tint to the skin and membranes. Some people may get very sick from it. It can damage their liver or lead to cancer. Hepatitis B is spreading fast in the United States. 300,000 cases are reported each year! It is spread by having sex with an infected person. It can also be spread from the mother to her baby during childbirth. Hepatitis B is prevented with HepB vaccine.

*What is Preventive Health?***Activity #3****Reading and Filling Out an Immunization Record**

1. Draw a line from the name of the shot to the disease it prevents.
Some of them prevent more than one disease.

OPV**measles****varicella zoster virus****DTP****polio****rubella****VZV****hepatitis B****MMR****mumps****haemophilus influenzae type b****Hib****pertussis****tetanus****HB****diphtheria**

What is Preventive Health?

Activity #3

- Look at this sample immunization record. Do you have a record of your children's immunizations? If not, where could you get that information?

Immunization Record

Child's name _____

Birth date _____ Female Male

Allergies _____

Parents or Guardians _____

Telephone _____

Vaccine	Age vaccine should be given	Date	Name of clinic	Next appointment
OPV	1st dose: 2 months			
Oral Polio Vaccine	2nd dose: 4 months			
	3rd dose: 12 to 18 months			
	4th dose: 4 to 6 years			
MMR	1st dose: 12 to 15 months			
Measles, Mumps, & Rubella	2nd dose: 4 to 6 years or 11 to 12 years			
VZV	1st dose: 12 to 18 months			
Varicella	(11-12 years, if 12-18 months missed)			

Vaccine	Age vaccine should be given	Date	Name of clinic	Next appointment
HB	1st dose: birth to 2 months			
Hepatitis B	2nd dose: 1 to 4 months			
	3rd dose: 6 to 18 months			
DTP	1st dose: 2 months			
Diphtheria, Tetanus, & Pertussis	2nd dose: 4 months			
	3rd dose: 6 months			
	4th dose: 15 to 18 months			
	5th dose: 4 to 6 years			
HIB	1st dose: 2 months			
Haemophilus influenzae Type B	2nd dose: 4 months			
	3rd dose: 6 months			
	4th dose: 12 to 15 months			

What is Preventive Health?

Activity #3

3. Use the sample above as a guide and complete an immunization record for Carmen Santos. Information about Carmen is on the sample health log in Activity 1. Here is some additional information that you can use to complete the immunization record:

Carmen's mother, Anita Santos, took her baby to the clinic for her 4 month well-child visit. The nurse gave her an appointment for two months from that day.

Fill in the immunization record to show when Anita took Carmen to the clinic, the name of the clinic, which shots the baby had, and the date of their next appointment.

4. Complete an immunization card for each of your children.

Immunization Record

Child's name _____

Birth date _____ Female Male

Allergies _____

Parents or Guardians _____

Telephone _____

Vaccine	Age vaccine should be given	Date	Name of clinic	Next appointment
OPV	1st dose: 2 months			
Oral Polio Vaccine	2nd dose: 4 months			
	3rd dose: 12 to 18 months			
	4th dose: 4 to 6 years			
MMR	1st dose: 12 to 15 months			
Measles, Mumps, & Rubella	2nd dose: 4 to 6 years or 11 to 12 years			
VZV	1st dose: 12 to 18 months			
Varicella	(11-12 years, if 12-18 months missed)			

Vaccine	Age vaccine should be given	Date	Name of clinic	Next appointment
HB	1st dose: birth to 2 months			
Hepatitis B	2nd dose: 1 to 4 months			
	3rd dose: 6 to 18 months			
DTP	1st dose: 2 months			
Diphtheria, Tetanus, & Pertussis	2nd dose: 4 months			
	3rd dose: 6 months			
	4th dose: 15 to 18 months			
	5th dose: 4 to 6 years			
HIB	1st dose: 2 months			
Haemophilus influenzae Type B	2nd dose: 4 months			
	3rd dose: 6 months			
	4th dose: 12 to 15 months			



BOOK 2

Why do I have to See the Dentist?

BUILD BACKGROUND KNOWLEDGE

Concept Building

Concepts in Why Do I Have to See the Dentist?

- cultural perceptions of dentistry
- care and treatment of a broken or knocked-out tooth
- differences between primary and permanent teeth
- keeping a dental log
- preventive dental care

Sample discussion questions for engaging prior knowledge and experience:

- What does dental care mean to you?
- Do you see a dentist on a regular schedule? Why or why not?
- Do you think it is important to take young children to the dentist?"

DEVELOP VOCABULARY

Word Families

Word families in Why Do I Have to See the Dentist?

- swell, swelling, swollen
- dentist, dental
- clot, clotting
- antiseptic
- pediatrics, pediatrician, pediatric dentist

DISCUSSION QUESTIONS

These are sample questions, please adapt them to meet the needs of your students.

Chapter



Maggie Loses a Tooth

Before Reading/Listening

- Read the title of the chapter. Has your child ever lost a tooth? Was it knocked out or did it fall out on its own? What did you do?

After Reading/Listening

- How did Maggie lose a tooth? Do you think Ginny had a right to be upset that Maggie lost a tooth? Why or why not?
- What did Ginny do when Maggie lost the tooth?
- At about age six, children begin to lose their primary teeth. Do you think it's important to be concerned about a child losing a primary tooth before age six? Why or why not?

Chapter**Rosalie Checks on Maggie****Before Reading/Listening**

- Have you ever had any dental work done? What kinds of things did you have to do after your appointment?

After Reading/Listening

- What did Ginny do to take care of Maggie after the dentist visit? Why is it important?
- Should Ginny give Maggie aspirin for pain? Why or why not? What are two reasons to use an aspirin substitute, instead of aspirin?
- How does saliva help the tissues in the mouth heal quickly?

Chapter**What Can a Dentist Do for an Injured Tooth?****Before Reading/Listening**

- What does the picture on page 18 show happening?
- How might a tooth get injured? Have you or someone you know ever had an injury to a tooth? What happened?
- Discuss the differences between primary and permanent teeth. Use transparencies and/or handouts from OH #3-4 to guide discussion.

After Reading/Listening

- Rosalie says, "What difference does it make if a baby tooth comes out earlier than it's supposed to?" Do you think Rosalie understands the importance of dental care for young children? Why or why not? What might make her think this way?
- The nurse told Ginny that a dentist should always examine a child if she's injured a tooth, even if it's a baby tooth. Why is it important?
- What is a pediatric dental clinic? What word tells you it's for young children? Discuss the dental services provided by Medicaid and other early intervention services.
- How do primary teeth help permanent teeth? What happens if a primary tooth comes out before it's supposed to?
- What did Ginny mean when she said, "You'll be proud of me, Rosalie. I asked Dr. Lopez a question?"

- How does a space maintainer help the permanent teeth?
- Why is an injury to a permanent tooth more serious than an injury to a primary tooth?
- (Make copies of OH #5-6 to review what to do for broken or missing teeth.)

Chapter

Luis Visits the Dentist

Before Reading/Listening

- (To review concepts about primary and permanent teeth, use Activity #1 and OH #3-4.)
- (To review information concerning the loss of a primary tooth, complete Activity #2.)
- What do you already know about Luis that gives a clue to what this chapter will be about?
- Do you know any children who suck their thumbs? How old are they?
- Do you know any children who had problems because they sucked their thumbs? What kinds of problems did they have?

After Reading/Listening

- What are some reasons babies suck their thumbs or fingers?
- At about what age do most babies stop sucking their thumbs?
- What kinds of problems can thumb-sucking cause?
- The dentist said she may put a device in Luis's mouth. What will it do?
- How can parents help children stop sucking their thumb or fingers?

Chapter

Alisha Has a Toothache

Before Reading/Listening

- Did you or someone you know ever have a toothache? What did it feel like? What caused it?
- Remember that Alisha is age 5. Why might she have a toothache?

After Reading/Listening

- Rosalie was going to put a hot cloth on Alisha's jaw. Was that a good idea? Why or why not? What should she do instead?
- How is Ginny keeping track of dental information? Where did she learn this technique?

Chapter

What is Nursing Bottle Mouth?

Before Reading/Listening

- Read the title. Have you ever heard this term? What does it mean to you?
- If you haven't heard the term, what do you think it means?

After Reading/Listening

- How do children get baby bottle tooth decay?
- When is it OK to put a baby to bed with a bottle?
- What might happen if nursing bottle mouth is not treated?

- At what age did Dr. Lopez say children should start having their teeth cleaned? How should you clean a baby's mouth before they have teeth?

Chapter

What Happens During a Dental Check-up?

Before Reading/Listening

- Tell us about your experiences at the dentist.
- Do you think dental visits are different for children? Why or why not?
- Discuss what to expect at a regular dental visit, using OH #7 to guide the discussion. Learners can read the chapter to see if the characters' experiences at the dental clinic included all of the items on the list.

After Reading/Listening

- Will the dentist take x-rays during every visit? Why or why not? When might they be taken?
- Why is fluoride important? What are some sources?
- At what age should children begin flossing and brushing their teeth themselves?
- Why do you think the three women talk so much about their children's health?
- How were they going to prepare for the next visit?
- (To review this chapter, complete Activity #3 concerning preventive dental care.)

Chapter

How Can I Help Take Care of My Children's Teeth?

Before Reading/Listening

- How do you already help your children take care of their teeth? Are there things you think you should be doing?
- What does the picture on page 48 have to do with taking care of teeth?

After Reading/Listening

- What can you write in a log about your child's dental history?
- How should you take care of a baby's teeth and gums?
- We've read and learned about dental care for children. What are some things you are going to do or change about taking care of your children's dental health?
- (Complete Activity #4 to model a dental health log and encourage learners to start one for their children.)

Concluding Questions

- We've learned a lot of new and important information in this book. Name three important things you learned (be sure everyone names what they learned and that all important concepts are mentioned). How will you use this information?
- Who can you talk with or share the health information you've learned?
- What can you do today (in the next week) to practice preventive dental care for your children?

Primary Teeth

- Children should have 20 by about age 3
- Also called “baby teeth”
- Start to break through the gums around 6 months of age
- Babies should see the dentist at age 1
- Need special care if they are knocked out or broken
- Are important because they:
 1. help young children chew and speak properly
 2. help the permanent teeth come in straight

Permanent Teeth

- Usually have 32
- Begin to break through the gums at about age six
- Should last a lifetime with proper care
- Should be brushed and flossed after eating
- Need special care if they are knocked out or broken
- Can be put back together if they are broken

What to Do When a Permanent Tooth is Knocked Out

- 1. Rinse the tooth in cool water.
Don't scrub it! Don't use soap!**
- 2. If you can, put the tooth back in its place
in the mouth. Hold it there with clean
gauze or wash cloth.**
- 3. If you can't put it back, put it in a clean
container with milk or water.**
- 4. Call the dentist or clinic right away.
Tell them what happened. Take the
tooth with you.**

OH #5

Saving a Broken Tooth

1. Rinse the mouth with water.
2. Put an ice pack over the area to reduce any swelling.
3. Call the dentist or clinic right away. Tell them what happened.
4. Find the piece of tooth that broke off. Rinse it off in cool water. Take it with you to the dentist.

What to Expect at a Regular Dental Visit

- look at teeth and gums
- may take x-rays
- give a fluoride treatment
- clean and polish teeth
- floss between teeth
- ask questions about your child's health
- make an appointment for a check-up in six months

*Why Do I Have to See the Dentist?***Activity #1****Differences Between Primary and Permanent Teeth**

Directions: Look over the handouts that show the differences between primary and permanent teeth. Turn them over and see how much you can remember. Decide whether each phrase below describes primary or permanent teeth, and then circle the right answer.

Usually have 20.

primary teeth

permanent teeth

Usually have 32.

primary teeth

permanent teeth

Sometimes called baby teeth.

primary teeth

permanent teeth

Should last a lifetime.

primary teeth

permanent teeth

Help the permanent teeth come in straight.

primary teeth

permanent teeth

Should be flossed after eating.

primary teeth

permanent teeth

Why Do I Have to See the Dentist?

Activity #2

When a Child Loses a Primary Tooth

Directions: Children should see a dentist when a primary or a permanent tooth is knocked out. In the story, Maggie lost a primary tooth. Read Chapter 2 again. Then answer these questions.

1. Maggie had a baby tooth knocked out. Did the dentist put the tooth back in? Why or why not?

2. What is a space maintainer?

3. List three reasons why primary teeth are important.

4. List three things Ginny did to take care of Maggie after she got home from the dentist. Tell why they were important.

Why Do I Have to See the Dentist?

Activity #3

Preventive Dental Care

Directions: Read Chapter 6 again to find the answers to these questions. Or answer them on your own if you already know the answers.

1. When might the dentist take x-rays of your child’s mouth?

2. List three ways you can be sure your children get fluoride.

3. Why do you think the dentist looks at your child’s gums and mouth?

4. Do you think regular visits to the dentist are important for children? Give two reasons to support your answer.

Why Do I Have to See the Dentist?

Activity #4

Keeping a Dental Log

Directions: Look at this sample dental log. Fill in the blank one on the next page with as much information as you know. Think about where you can get the information you don't know, then fill in the missing information.

Child's Name Carmen Santos

Birth Date 01/22/90

Important Names and Phone Numbers

Doctor Dr. Robinson 816-555-1212

Clinic Rosedale Clinic 816-555-3456

Dentist Dr. Lopez 816-555-0095

Pharmacy Madison Drugs 816-555-4434

Ambulance Alpha Ambulance 816-555-9234

Friend Mary Frank 816-555-3777

Dental Visit

Date 05/15/95 Place Dental clinic at Rosedale Hospital

What Happened Carmen sucks her thumb a lot. The dentist looked at her mouth and teeth. Thumb sucking is affecting her teeth. The dentist may put a device in Carmen's mouth.

Dental History

Date 07/10/90 What Happened 1st tooth came in; fussy

Date 08/15-20/90 What Happened 2 more teeth; used teething ring

Date 04/10/91 What Happened more baby teeth

Date _____ What Happened _____

Questions for Dentist

How will the dentist know when it's time to put in a device? Will her permanent teeth be crooked or straight? Should I be concerned?

Why Do I Have to See the Dentist?

Activity #4

DENTAL LOG

Child's Name _____

Birth Date _____

Important Names and Phone Numbers

Doctor _____

Clinic _____

Dentist _____

Pharmacy _____

Ambulance _____

Friend _____

Dental Visit

Date _____ Place _____

What Happened _____

Date _____ Place _____

What Happened _____

Dental History

Date _____ What Happened _____

Date _____ What Happened _____

Date _____ What Happened _____

Date _____ What Happened _____

Questions for Dentist



BOOK 3

Let's Talk**BUILD BACKGROUND KNOWLEDGE****Concept Building***Concepts in Let's Talk*

- define communication
- communicating with children (“talking with” vs. “talking at”)
- speech problems (stuttering, articulation)
- delayed language
- hearing problems (permanent and temporary)
- ensuring children’s health care (health logs, asking questions of health professionals)

Sample discussion questions for engaging prior knowledge and experience:

- What does communication mean to you and your family?
- What are some ways you communicate with your child?
- Are there times when you aren’t really communicating? When are those times?
- Why do you think communicating with children is important?

DEVELOP VOCABULARY**Word Families***Word families in Let's Talk*

- auditory, audiologist, auditory impairment (other words: auditorium, audiotape)
- articulate, articulation, articulation disorders
- communicate, communicating, communication

DISCUSSION QUESTIONS

These are sample questions, please adapt them to meet the needs of your students.

Chapter**Felicia Learns to Help Jorge****Before Reading/Listening**

- Think about the title of the book. Read the title of this chapter. What do you think the chapter will be about?

After Reading/Listening

- Felicia yelled, “stop” when Jorge grabbed the spoon. Why did she do this? How did it help?

- Felicia kept a log of Jorge's aggressive behavior. What pattern did she notice? How did it help her to notice the pattern?
- How do routines help some children?
- In this chapter, Felicia explains that she has been keeping a record to Jorge's behavior. This is another way to use your health log. Have learners complete Activity #1 which focuses on keeping a health log of children's behaviors and questions to ask the doctor.

*Chapter***2****Do You Listen to Your Children?****Before Reading/Listening**

- In the last chapter, Felicia said there is a difference between "talking at" and "talking with" a child. What do you think she meant by that? What do you think this chapter will be about?

After Reading/Listening

- How does Rosalie listen to children? to adults? Do you listen to children and adults differently? If so, how?
- How will the women make time to talk with and listen to their children? Do you make time to really listen to your children? If not, when would be a good time for you and your child to spend time together?
- When are some good times to ask your child questions? What kinds of questions could you ask?
- Why is it a good idea to pause after you say something to a child?
- (Make copies of OH #8 to review ways to communicate with children.)

*Chapter***3****What Do Your Children Say to You?****Before Reading/Listening**

- What do you think we will learn about in this chapter?

After Reading/Listening

- What are some ways to discipline children that the women talk about? (If the topic seems appropriate for your learners, discuss ways people discipline their children. For example, is it OK to spank children? Why or why not? When might it be appropriate? Where is the line drawn between spanking and abuse?)
- What is the difference between being polite to children and treating them like equals? Why is it not a good idea to treat children as equals?
- What are some ways you are a role model for your children?

*Chapter***4****Milestones for Language Development****Before Reading/Listening**

- Does anyone know what a milestone is? What do you think are some milestones for language development? Let's read this chapter to find out more.

After Reading/Listening

- What is a milestone? How can milestones help you understand your child's language development?
- Suppose one of your children began talking at an early age. Suppose another child does not. Should you be concerned? How do you know when you should be concerned?
- Why is it important not to expect children to do or say things too early?
- If a child has a language disorder, who might he or she be referred to? What kinds of things does a speech-language pathologist do?

*Chapter***5**

How Can I Help My Children Develop Language Skills?

Before Reading/Listening

- Tell us some ways you helped a child learn to talk.
- What do you think it means when we say, "We are our children's first teachers"? Let's read in this chapter to find out more.

After Reading/Listening

- Why are the first four years of a child's life so important?
- Felicia questions her own abilities to be her children's teacher. What do you think she means by that? How is she already a good teacher for her children?
- How do babies communicate? How did the women in the story communicate with their babies? How do you communicate with babies?

- Most children love to spend time in front of the television. What can parents or caregivers do to help develop children's language as they watch TV?
- Rosalie takes Alisha to the library often. How can the library help develop language skills?
- Why is it important to let children draw and talk about their drawings?

*Chapter***6**

Luis Has a Hearing Problem

Before Reading/Listening

- What kinds of hearing problems do children have? Do you know children with any of these problems? What do their parents do to help them?

After Reading/Listening

- What did Felicia notice about Luis's hearing and write in the health log?
- How did the doctor at the clinic use what Felicia wrote in the health log? What did the doctor recommend?
- What is an audiologist? How will the doctor treat Luis's hearing problem? What might he have to do if the problem doesn't clear up?
- Do you know any children who had tubes put in their ears? How did the treatment help them?
- What are some causes of a permanent hearing impairment? Use OH #9 concerning common causes of hearing problems to extend discussion.
- Complete Activity #2: Checklist for Good Hearing and discuss the results.

*Chapter***7****What Can I Do if My Child Has a Speech Problem?****Before Reading/Listening**

- We learned in the last chapter that Ginny has an appointment for Donny to see a specialist. Think about what you know about Donny. What do you think this chapter will be about?
- Do you know anyone who stutters? How can other people help a person who stutters?

After Reading/Listening

- Is it a problem when a three- or four-year old child stutters?
- What kinds of things can Ginny do to help Donny's stuttering?
- What are three common letters that are difficult to say for children who stutter?
- What are some examples of other speech problems? Use OH #10 to extend discussion.
- What have the women learned that will help them raise healthy children? Use OH #11 to extend discussion.
- Complete Activity #3: Checklist for Good Speech and discuss the results.

Concluding Questions

- We've learned a lot of new and important information in this book. Name three important things you learned (be sure everyone names what they learned and that all important concepts are mentioned). How will you use this information?
- Who can you talk with or share the health information you've learned?
- What can you do today (in the next week) to communicate more effectively with your children? Have learners complete Activity #4 concerning communication with children and discuss the results.

Communicating with Children

- Listen closely! Give them your full attention.
- Be polite. Show children that what they have to say is important to you.
- Make time every day to listen to your children.
- Include them in what you're doing. Talk about what you are doing and what you see.
- Ask questions about what they're doing and seeing. Let them ask you questions.
- Read to them and ask questions about it.

Causes of Hearing Problems

TEMPORARY

- ear wax blocks the ear canals
- allergies
- colds
- ear infections
- swimmer's ear

PERMANENT

- birth defects
- too much exposure to loud noises
- head injury
- heredity
- drugs

Common Speech Problems

- Stuttering
- Articulation disorders
 1. changing sounds in words
 2. leaving sounds out of words
- Delayed language disorders
- Voice disorders
 3. voice is too high or too low
 4. voice is too loud or too soft

Working on Speech Problems

- Keep a record in your child's health log.
- Have your child repeat simple words or phrases. Have him name things in the room.
- Ask your child simple yes or no questions. Then ask harder questions, like naming his friends.
- Do the special exercises for short periods of time. Make them fun.
- Make a book with pictures of your child's favorite things. Ask your child to name what she sees in the book.

Let's Talk

Activity #1

Keeping a Health Log of Children's Behavior

Directions: Think about one of your children or a child you know whose behavior has concerned you. Fill in as much information as you can. Think of questions you could ask the doctor or nurse that would help you deal with this behavior.

Child's Name _____

Birth Date _____

Important Names and Phone Numbers

Doctor _____

Clinic _____

Dentist _____

Pharmacy _____

Ambulance _____

Friend _____

Child's Behavior

Date _____

Behavior _____

Date _____

Behavior _____

Date _____

Behavior _____

Questions for Doctor

Let's Talk

Activity #2

Checklist for Good Hearing

Directions: How old is your child? Look at the questions in that section. Answer the questions as best you can. Then fill in the blanks at the bottom of the page.

Age 3-4

Yes No

- Does your child hear you when you call from another room?
Does your child like the TV turned up to a normal level?
Does your child answer simple questions?

Age 4-5

Yes No

- Does your child hear and understand most of what is said?
Does your child hear well? Do other people think so?
Does your child pay attention when you tell a story?
Does your child answer simple questions about the story?

Did you answer No to any of the questions? List some things you learned in the book that can help you improve your child's hearing.

Five horizontal lines for writing answers.

Let's Talk

Activity #3

Checklist for Good Speech

Directions: How old is your child? Look at the questions in that section. Answer the questions as best you can. Then fill in the blanks at the bottom of the page.

Age 3-4

	Yes	No
Does your child talk about what he or she does?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child say most sounds correctly?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child talk easily without repeating words?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child use sentences that have 4 or more words?	<input type="checkbox"/>	<input type="checkbox"/>

Age 4-5

	Yes	No
Does your child have a clear voice?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child tell stories and stick to the topic?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child communicate easily with other children?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child say sounds correctly except for 1 or 2?	<input type="checkbox"/>	<input type="checkbox"/>
Does your child use words correctly in a sentence?	<input type="checkbox"/>	<input type="checkbox"/>

Did you answer no to any of the questions? List some things you learned in the book that can help you improve your child's speech.



Let's Talk
Activity #4

Communicating with Your Child

1. Think about how you and your children already communicate.
List as many ways as you can think of here.

2. Think about what you've learned in *Let's Talk*. List the ways you would like to improve how you communicate with your children.

Section



Resources

RECOMMENDED CHILDREN'S BOOKS

The Berenstain Bears Go to the Doctor
by Stan and Jan Berenstain

The Berenstain Bears Go to the Dentist
by Stan and Jan Berenstain

Germs Make Me Sick
by Melvin Berger

Going to the Dentist
by Anne Civardi

Going to the Doctor
by Anne Civardi

When I See My Dentist
by Susan Kuklin

When I See My Doctor
by Susan Kuklin

I Have a Loose Tooth
by Sally Noel

My Nose, My Toes
by Playskool Books

Baby's Book of the Body
by Roger Priddy

My First Body Book
by Melanie and Chris Rice

The Emergency Room
by Anne and Harlow Rockwell

Going to the Dentist
by Fred Rogers

Healthy Me
by Angela Royston

Eric Needs Stitches
by Richard Rudinski

Nicky Goes to the Doctor
by Richard Scarry

We're Different, We're the Same
(Sesame Street Productions)

No Measles, No Mumps for Me
by Paul Showers

See How I Grow
by Angela Wilkes

FACILITATOR RESOURCES

Health Education for Non-Readers
(Instructional Video)

Health Promotion Council of
Southeastern Pennsylvania
311 South Juniper Street, Suite 308
Philadelphia, PA 19107-5803
(215-546-1276)

Teaching Patients with Low Literacy Skills
by Cecilia Doak, Leonard Doak, & Jane Root

J.B. Lippincott
227 East Washington Square
Philadelphia, PA 19106-3780
(800-777-2295)

*Beyond the Brochure: Alternative Approaches to
Effective Health Communication*

Marcia Griffith
Centers for Disease Control and Prevention
Mail stop K57
Atlanta, GA 30341-3724
(404-488-4708)

*Teaching Health and Wellness in the ABE/ESL
Classroom* by Wista Jeanne Johnson

Health Connections
Lefferts Station, P.O. 30
Brooklyn, NY 11225

*Reading with Children: A Handbook for Literacy
Tutors* (Lester Laminack, Ed.D.)

Literacy Volunteers of America, Inc.
5795 Widewaters Parkway
Syracuse, NY 13214
(315-445-8000)

*Becoming a Nation of Readers: What Parents
Can Do* (Marilyn R. Binkley)

Consumer Information Center, Pueblo, CO
81009

or

DC Heath and Company, Distribution Center
2700 North Richard Avenue
Indianapolis, IN 46219

SUPPLEMENTAL CURRICULUM MATERIALS

Family Literacy Curriculum

Dayton City Schools
Longfellow Center, Room 104
245 Salem Avenue,
Dayton, OH 45406
(513-461-2800)

Immunization Materials (ESL)

Texas Department of Health
Lynn Denton, Director of
Communications/Special Health Initiatives
1100 West 49th Street
Austin, TX 78756-3199
(512-458-7400)

Health Literacy Project Resource Kit(s)–English and Spanish

Health Promotion Council of Southeastern
Pennsylvania
311 South Juniper Street Suite 308
Philadelphia, PA 19107-5803
(215-546-1276)

The Information for Better Living Series (espe- cially Getting Good Health Care; The Safe, Self- Confident Child; About Alcohol and Other Drugs)

New Readers Press
Publishing Division of Laubach Literacy
International
Box 131
Syracuse, NY 13210-0131
800-448-8878

Your Home is a Learning Place

by Pamela Weinberg
Signal Hill Publications
P. O. Box 131
Syracuse, NY 13210-0131
800-448-8878

The Let's Work it Out Series (Topics for Parents and Teacher's Guide: see especially Communication; Discipline; Role Models)

New Readers Press
Publishing Division of Laubach Literacy
International
Box 131
Syracuse, NY 13210-0131
800-448-8878

ORGANIZATIONS

American Academy of Pediatrics
141 Northwest Point Boulevard
Elk Grove Village, IL 60007
(800-433-9016)

American Academy of Pediatric Dentistry
211 East Chicago Avenue
Suite 1036
Chicago, IL 60611
(312-337-2169)

American Library Association
50 East Huron Street
Chicago, IL 60611-2795
(312-944-6780)

American Speech-Language-Hearing Association
10801 Rockville Pike
Rockville, MD 20852
(800-638-TALK)

Health Literacy Project
Health Promotion Council of Southeastern
Pennsylvania
311 South Juniper Street Suite 308
Philadelphia, PA 19107-5803
(215-546-1276)

Institute for the Study of Adult Literacy
Pennsylvania State University
102 Rackley Building
University Park, PA 16802-3202
(814-863-3777)

Massachusetts Health Education Team
Health Education Adult Literacy (HEAL) Project
World Education
44 Farnsworth Street
Boston, MA 02210
(617-482-9485)

National Institute for Literacy
800 Connecticut Avenue, NW
Suite 200
Washington, DC 20006
(202-632-1500)

Read Write Now Program
MCHS Infant Mortality Project
53 Chandler Street
Highland Park, MI 48203
(313-868-8420)

ELECTRONIC RESOURCES

The *Health and Literacy Listserv* is an electronic forum in which to discuss health and literacy issues and share information and resources. To subscribe and then participate in the listserv:

- Send an e-mail message to:
listproc@literacy.nifl.gov
- In the body of the message, type:
**subscribe nifl-health yourfirstname
yourlastname**
Example: **subscribe nifl-health John Doe**
- Do not include any other information in the message.
- Turn off your automatic signature if you have one.
- Send the message.
- You will receive a welcome message telling you that your subscription is completed.
- You may post messages to all subscribers to the list by sending an e-mail message to:
nifl-health@literacy.nifl.gov

For further information contact:

- Marcia Hohn at 508-688-6089 or by e-mail at MDREWHOHN@aol.com
- Sabrina Kurtz at 617-482-9485 or by e-mail at skurtz@jsi.com
- *Dr. Plain Talk* is a website with information on children's health issues. Information on immunization, choosing a child care and baby care are just a few of the topics included. The address for this site is www.drplaintalk.org.

Section



Glossary

ROSALIE'S NEIGHBORHOOD GLOSSARY

aggressive - quick to start a fight

Other people did not like to be around John when his behavior became aggressive.

allergies - things that cause a person to sneeze, cough and have a rash

Carmen's allergies were so bad she felt like she could not breathe.

ambulance - the car or van that takes sick or hurt people to a hospital

Rosa called for an ambulance when her mother fell down the steps.

antibiotics - drugs used to fight infection

The doctor treated Paul's ear infection with antibiotics.

antiseptic - something that kills or stops infection (anti means against, septic means infection)

Alcohol is an antiseptic.

appointment - a time and date to meet with someone

Do not miss your appointment at the clinic.

articulate - to speak clearly

Kelly does not articulate each sound in the word. She is hard to understand.

articulation disorder - a speech problem where a person changes or leaves sounds out of words

Kelly has an articulation disorder.

aspirin substitute - a pain medication given instead of aspirin

Acetaminophen is an aspirin substitute which relieves pain and fever.

audiologist - a doctor who identifies and treats hearing problems

We worked on Russell's hearing problems with the audiologist.

auditory - having to do with hearing

Russell had many auditory problems.

bacteria - tiny living things that can cause diseases; they can only be seen with a microscope

Clean the cut to kill any bacteria that might be in it.

behavior - ways people act

Jake's behavior problems worried his parents.

booster - a "follow-up" shot that is given some time after the first shot

Did you remember to get your booster shot?

braces - wires and bands put on the teeth to make them straight

Susan did not want to smile when she first got her braces.

cavity - a hole (also means a hole in the tooth itself)

Put the tooth back in the cavity. (or) I hope the dentist doesn't find a cavity in my tooth.

chipped - broken off

Even a chipped tooth can be saved.

clinic - a place where people can be seen and treated by health care workers, such as a doctor or nurse

The people who work at the clinic want you and your children to be healthy.

clotting - forming into a thick lump, usually of blood

Aspirin may keep the blood from clotting.

colicky - when a baby cries or fusses, usually because her stomach hurts

I couldn't wait until Adam wasn't colicky anymore.

communicate - to tell or show another person so they will understand

You can solve a lot of your problems when you communicate them to someone else.

communication - telling or showing another person so they will understand
Good communication skills are important for everybody.

consonants - letters and sounds of the alphabet other than the vowels a, e, i, o, and u
Young children may have trouble pronouncing two consonants together.

decay - rot
I do not want my teeth to have any decay so I brush them twice a day.

delayed - late
Carmen asked the doctor why her child's speech was delayed.

delayed language disorder - when a child is slow to develop a vocabulary that is appropriate for his age
Are you concerned that your child may have a delayed language disorder?

dental - having to do with the teeth
Shawna felt much better after her dental work was done.

detect - to notice
Did you detect the sore on Mary's arm in time to treat it?

digest - when the body changes food so that it can use it
Michael could not digest cow's milk.

discipline - ways of correcting children to get them to do the right thing
Lee learned how to discipline her children without hitting them.

discolored - not its normal color
The tooth became discolored because I did not go to the dentist.

disease - a sickness or illness in a person's body
Washing your hands often will help to prevent disease.

disorder - a sickness or a problem
The day care teacher said Luis may have a hearing disorder.

DTP

Diphtheria - a dangerous disease that causes fever, sore throat, and chills

Tetanus - disease that spreads through a cut or an animal bite; also called lockjaw

Pertussis - disease that spreads through coughing and sneezing; also called whooping cough

early intervention services - trying to prevent diseases or problems before they happen
I was happy we were eligible for early intervention services. They saved my baby's life.

eligible - able to get or qualify for something
Maria was happy to find out she was eligible for Medicaid.

EPSDT - stands for Early and Periodic Screening, Diagnosis, and Treatment; a government program that gives free hearing, vision, and dental care for certain children

fetal alcohol syndrome - when a baby has health problems or birth defects because the mother drank alcohol while she was pregnant; sometimes called FAS
Fetal alcohol syndrome caused the child's delayed language disorder.

fever - a body temperature that is higher than normal (normal = 98.6°)
The nurse asked me if my baby had a fever.

flossing - using a special string called floss to clean between the teeth
Flossing your teeth will keep them healthy.

fluoride treatment - a special solution put on the teeth so they will be strong and won't decay
Be sure your child gets a fluoride treatment if you don't have fluoride in your water.

fractured - broken

Her tooth was fractured in two places.

gauze pad - a clean, loosely woven piece of cloth that is used for medical reasons

Use a gauze pad to clean the gums and the area around the broken tooth.

hazards - things that can hurt a person

Toys left on the stairs can be hazards.

HB (Hepatitis B) - disease that can spread from a mother to her baby during childbirth

heal - to get better

I was worried that my cut would not heal.

health log - a written record of important things that happened about a person's health

I kept a health log of questions to ask the doctor.

Hib (Haemophilus influenzae type b) - disease that can harm the brain or heart of young children

ice pack - a package filled with ice that is used to reduce swelling

Nathan's mother put an ice pack on his sore jaw.

imitate - do or say what another person does or says

Children imitate their parents.

immunizations - series of shots that keep people from getting diseases

The school nurse made sure everyone had their immunizations.

impression - when the dentist makes a mold of the shape of the teeth and mouth

The impression will help the dentist make a device that will fit in Carey's mouth.

infected - filled with disease or germs

She did not want her tooth to become infected.

infection - when part of the body is filled with disease or bacteria

The doctor must treat the infection right away.

influenza - a disease with fever, pains in the body, and coughing; also called "flu"

Everyone in the day care center had influenza.

injury - harm or damage done to a person

Does the baby-sitter know what to do if your baby gets an injury?

IPV (Inactivated Polio Vaccine) - vaccine given for polio by injection; polio is a disease that can cause paralysis where a person is not able to feel or move parts of the body

lactose intolerant - not able to digest milk

Many people are lactose intolerant and don't know it.

lead poisoning - when lead from old water pipes or paint chips makes a person very sick

Ask your doctor about lead poisoning if you live in an old building.

Medicaid - government program to help pay for health care

A lot of people get health care from the Medicaid program.

meningitis - a disease when the brain is infected

Call the doctor or clinic right away if you think your baby has meningitis.

Milestone - behaviors that are normal for a certain age

Do you know the language milestones for a three year old child?

MMR

Measles - disease that is easy to catch; it can cause deafness or mental retardation

Mumps - disease that causes high fever and swelling of the cheeks or jaw

Rubella - another name for 3-day measles

nursing bottle mouth - tooth decay that comes from putting a baby to bed with a bottle with something in it other than water
The new mothers learned about nursing bottle mouth. The dentist hoped they remembered never to put their baby to bed with a bottle of milk or juice.

OPV (Oral Polio Vaccine) - vaccine given for polio; a disease that can cause paralysis where a person is not able to feel or move parts of the body

pacifier - something a baby or young child sucks on, usually for comfort
Keisha did not want to give up her pacifier.

pediatrics - the care and treatment of babies and young children
Ruth took her baby to the pediatrics area of the clinic.

permanent teeth - teeth that begin to replace baby teeth around the age of six
Your permanent teeth should last a lifetime if you take care of them.

pharmacy - place where you pick up your medicines
At least one pharmacy is always open in our town.

polio - disease that can make a person unable to feel or move parts of the body
She still walked with a limp because she had polio when she was a young girl.

positive test - when a doctor or nurse tests a patient for a disease and the test says the person probably has it
The doctor knew Kim needed treatment after she saw the positive test results.

prescribe - recommend the use of
The dentist will prescribe a special treatment to prevent tooth decay.

pressure - the force of one thing pressing on another
Apply light pressure when you hold the ice pack on the cheek.

preventive - to stop from happening ahead of time
Your child will be less likely to get sick if you use preventive health care.

primary teeth - sometimes called baby teeth; teeth that come in before the permanent teeth, usually between the ages of a few months and six years
It is wise to take good care of your child's primary teeth.

refer - tell to go see
The doctor will refer Donny to a speech pathologist.

referred - told to go see
When Kim had a chipped tooth, the nurse referred her to a dentist.

remedy - something that heals or makes a person feel better
A good laugh is often the best remedy for sadness.

Reye's Syndrome - an illness that may be caused by giving aspirin to a child who had the flu or chicken pox
The young mother worried about Reye's Syndrome so she gave her baby an aspirin substitute.

rinse - to wash lightly
Your mouth will heal faster if you rinse it with salt water.

role models - people who show other people the right way to do something or behave
Paula thought about all the good role models she had known as a child.

root - the part of the tooth that is protected by the gum
You can see the root of the permanent tooth in the x-ray.

routine - doing things the same way and time
My mother had a routine of reading to us every night.

saliva - liquid produced in the mouth; also called spit
Put saliva on the broken tooth to keep it wet.

salve - cream that is put on sores or wounds to heal them
Put the salve on the cut before you put on the bandage.

screening - testing ahead of time to identify possible problems
Is your doctor screening your baby for lead poisoning?

severe - very bad
We knew Rosa was in severe pain when she began to scream.

space maintainer - something used to fill in the place where a primary tooth came out
The permanent tooth will come in straight because the dentist used a space maintainer.

speech-language pathologist - a specialist who treats speech problems; a speech therapist
The speech-language pathologist will work closely with you and your child.

stabilized - no longer changing or moving; staying in the same place
The dentist stabilized the tooth so it would not move around.

stuttering - speaking with short stops; repeating words or parts of words over and over
People at the clinic gave me ideas to help Tommy's stuttering.

swelling - when a part of the body gets bigger than normal because of injury or disease
The dentist knew Steve had a dental problem because of the swelling in his face.

swollen - bigger than normal
Carol's cheeks were swollen after her tooth was knocked out.

symptoms - signs that something may be wrong
A nurse or doctor can tell you if the symptoms are something to worry about.

teething - the time when babies and young children's teeth are first coming in through the gums
Some babies may cry and fuss when they are teething.

temperature - the amount of heat in the body, 98.6° is the normal body temperature
Did you take the baby's temperature yet?

tissues - cells that make up a part of the body
The tissues in your mouth heal very quickly.

treatment - the things health care people do to make you better
The treatment to cure my disease took five months.

tuberculosis - a disease that harms the lungs
Tuberculosis is becoming a problem in some parts of the country.

vaccine - the medicine inside the needle that goes into a person's body when he gets a shot
That vaccine should be given three different times.

viruses - things that cause diseases, like colds or measles
Washing your hands a lot will keep viruses from spreading.

VZV (Varicella Zoster Virus) - another name for chicken pox

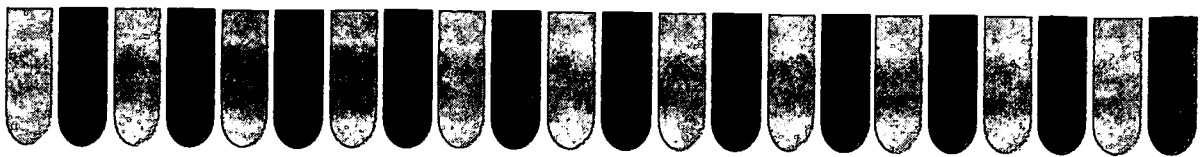
well-child visit - taking your child to see a doctor or nurse to keep the child from getting sick (sometimes called a check-up)
During a well-child visit, the nurse noticed a bump on my son's arm that had to be tested.

x-rays - a kind of light that goes through something solid; used to take pictures of the inside of the body
The dentist took x-rays of Michael's permanent teeth.



NATIONAL HEALTH & EDUCATION CONSORTIUM
an initiative of the Institute for Educational Leadership

1001 Connecticut Avenue, NW, Suite 310
Washington, D.C. 20036
Phone: 202-822-8405 Fax: 202-872-4050



Rosalie's Neighborhood:



What Is Preventive Health ?

NATIONAL HEALTH & EDUCATION CONSORTIUM
an initiative of the Institute for Educational Leadership

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generous grant from

Metropolitan Life Foundation

Rosalie's Neighborhood: What Is Preventive Health?



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1997

Design and Illustrations, Feld Design



Characters:

Rosalie Stevens

Alisha (granddaughter, age 5)

Robert (husband)

Shawna (daughter)

Felicia Gonzalez

Luis (son, age 5)

Jorge (son, age 6)

Ginny McMillan

Maggie (daughter, age 5)

Donny (son, age 4)

Bill (boyfriend)

Chapter

1

Introductions

Rosalie Stevens smiled at the photograph on the kitchen shelf. Her husband, Robert, and their granddaughter, Alisha, smiled back from the picture. Alisha would start kindergarten in a few months. “Children grow as fast as weeds!” she thought. Rosalie fixed herself a cup of coffee. Just then, the telephone rang.

“Hello,” Rosalie said cheerfully.

“Mrs. Stevens?”

“Yes, this is Rosalie Stevens.”

“I’m sorry to call you so early. This is Felicia Gonzalez. I met you at the grocery store last week. Do you remember me?”

“Of course, I remember you! My husband introduced us. Let’s see. You’re from Guatemala. And, you have two little boys, don’t you?”

“Yes, my sons, Jorge and Luis, and I are from Guatemala. You have a good memory!” Felicia replied. “I am calling to see if you can help me.”

“What can I do?” asked Rosalie.

“Your husband said that you’re a nurse. I have questions about health care for my sons, but I don’t know who to ask.”



Rosalie hesitated. “Well, I’m not a nurse. I’m a nurse’s aide at the health **clinic**. So, I’m sure that I don’t have all the answers, Mrs. Gonzalez. But, I’d be happy to answer whatever I can or help you find the answers.”

“Oh, thank you. And, please call me Felicia.”

“All right. And, you can call me Rosalie.”

Rosalie thought about her neighbor, Ginny McMillan. Ginny was coming to her house this afternoon. She wanted to ask Rosalie questions about her children’s health, too. “Felicia, can you come to my house at two o’clock this afternoon?”

“Oh, yes! May I bring Luis? He won’t be any trouble.”

“Of course. How old is he?” asked Rosalie.

“Luis is five. Jorge is six, so he will be in school. He goes to the afternoon kindergarten.”

“Well, that’s just right! My granddaughter, Alisha, is five,” replied Rosalie. “My neighbor, Ginny, will be here. Her daughter, Maggie, is five, too. Her youngest, Donny, is almost four. They can have a good time playing in the back while we have a nice chat.”

“Thank you for inviting me, Rosalie. I’ll see you this afternoon.”

“Don’t mention it. See you soon.”

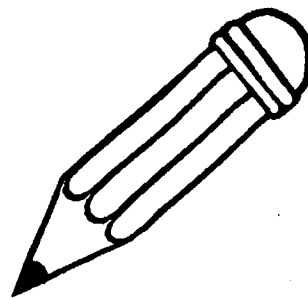
Later that morning, Rosalie saw Ginny sitting on the front steps. Rosalie walked out on her porch and said, “Good morning, Ginny. Will you still be coming over this afternoon?”

“Sure! I still have questions about those shots Maggie needs for school. Plus, I have some other questions about my kids’ health.”

“Well, you aren’t the only one asking questions! I just had a phone call from a woman I met at the grocery store. Her name is Felicia Gonzalez, and she has two young sons. Robert told her I’m a nurse’s aide. She wants to ask me some questions. So, I asked her to come over this afternoon, too. I hope you don’t mind.”

Ginny smiled at her friend, “That would suit me just fine. I’ll see you later!”

Health clinic

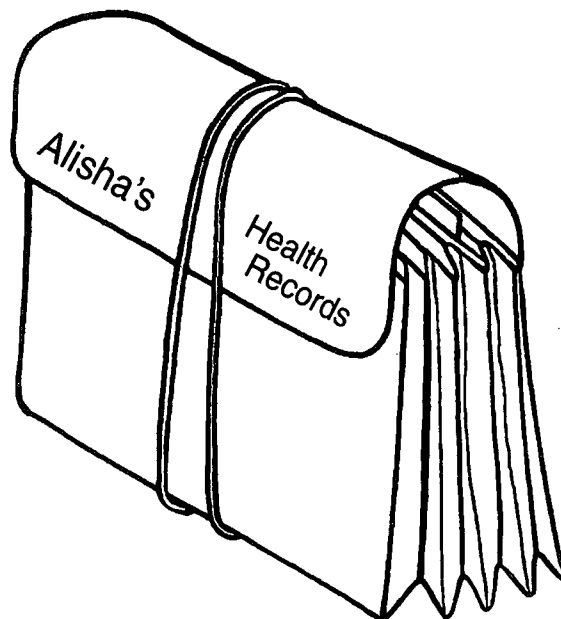


Chapter

2

Who can I talk to?

Rosalie knew that Ginny had questions about Maggie's **immunizations**. She also thought that Ginny and Felicia would have other questions. So, she gathered information she had saved from Alisha's visits to the health clinic. Rosalie kept information about Alisha's health in a special folder. This helped her keep track of important details about Alisha's health.



Ginny arrived with Maggie and Donny at a little before two o'clock. She left her children playing with Alisha.

The door bell rang as Ginny walked into the kitchen. Rosalie yelled, "Hi, Ginny!" as she hurried to answer the front door.

"Hello, Rosalie. It's so nice to see you again."

"Felicia, come in. Ginny's in the kitchen. That's where we always sit. It's easier to keep an eye on the children playing in the back. But, where's Luis?"

"Luis saw Alisha. He remembered her from last week. So, he asked if he could play with her. I hope that's okay."

Rosalie smiled. "I'm sure they're fine."

Rosalie and Felicia walked into the kitchen and joined Ginny. Ginny smiled. "Hi, there! You must be Felicia."

“And, you must be Ginny.” Felicia smiled, too.

“Well, now we’ve been introduced. Let’s sit down.” Rosalie was suddenly serious. “I’m glad that you trust me to answer your questions. You know I love to give advice! But, I don’t know everything. I can just tell you what I’ve learned. You’ll have to save some questions for the doctors at the clinic. You want the best information when it comes to health care.”

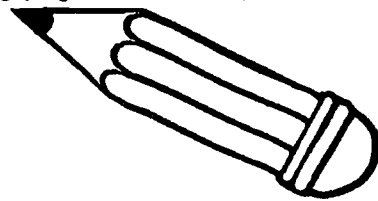
Felicia patted Rosalie’s hand. “My brother helped me when I came to this country. But he has moved away. I have had no one to ask since he left. Now, I have met you, and you are nice enough to help me.”




Ginny added, "Rosalie, you've always been there to help when I have questions."

"I just wanted you to know that our conversation is a starting place. You are the ones who have to take charge of your children's health." Rosalie smiled again. "Now, first question please!"

Immunization





Chapter

3

What is a well-child visit?

“The school nurse told me to take Jorge to the doctor for a **‘well-child’ visit** when he started school last year. I had just taken Jorge to the clinic so he could get his immunizations for school. Why would I have to take him again? This didn’t make sense, so I didn’t do it. Why does a child need a doctor if he is well?

“Your children will be healthier if you prevent health problems before they start. If a child is healthy, you have a well child. Do you see what I mean?”

Ginny said, “So, well-child visits help keep our babies from getting sick.”

“That’s right! It’s what we call **preventive** health care. Well-child visits can help **detect** health problems early. You can do a lot to keep your babies healthy. But, sometimes you need advice from a doctor or nurse. They know what to look for. They also know what to do if something’s not right with your children’s health.”

Felicia looked worried. “What could be ‘not right’?”



“Oh, honey,” said Rosalie, “there are so many things. But, don’t start worrying. You can help your children have a healthy start if you do two basic things. Take your children to their regularly scheduled well-child visits. Then, follow the doctors’ and nurses’ advice.”

Felicia groaned, “I have so many things to learn.”

Rosalie chuckled. “Felicia, I don’t know anything that you and Ginny can’t learn, too. I learned a lot when I was in training as a nurse’s aide. I pay attention on the job, too. But, I also learned by being a mother and a grandmother, and so can you. What’s important is wanting to learn. Take the clinic’s health care advice and use it. Ask questions so you can learn from the well-child visits. Then, help your children stay healthy.”

well-child visit 

Chapter

4

How do I pay for visits?

“Oh, Rosalie, you make it sound so easy!” Ginny sighed. “Now, I wonder if one of those visits could have done something about Donny’s **stuttering**. Bill and I both worry about it. He’s afraid the other kids will tease Donny when he starts school. I worry more about the cost of all the visits to the clinic. After all, money is money. And, we don’t have that much.”

Felicia nodded in agreement, but Rosalie shook her head. “My momma was just like you, Ginny. She didn’t believe in going to the doctor unless she had to. She always said, ‘It costs too much money.’ Well, what if your child is sick?”

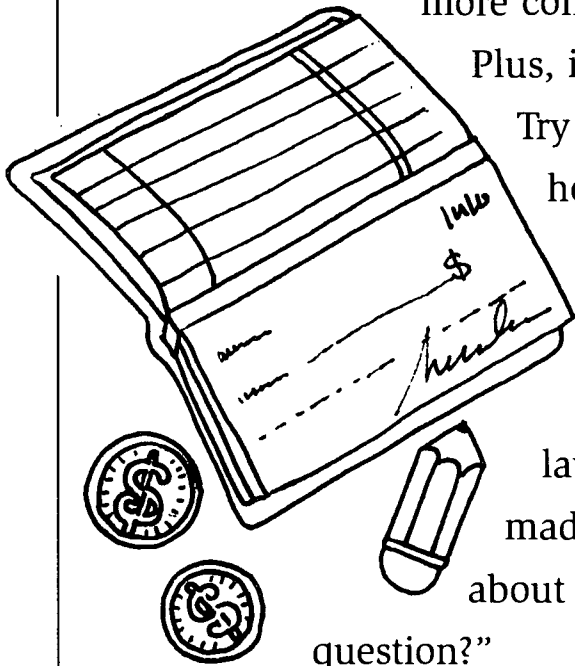
Rosalie continued, “You help your child and save money by finding problems early. The **treatment** is usually longer and more complicated if you wait.

Plus, it can cost much more.

Try to solve your children’s health problems early.

That will save them a lot of trouble later on.”

“Okay, Rosalie,” laughed Ginny. “You’ve made your point! How about answering another question?”



“I was on my soapbox again, wasn’t I?” Rosalie grinned. “Ginny, since you brought up money, let me ask a question. Aren’t you on **Medicaid**? That program really helps when you don’t have much money. Your children’s health care costs are covered. Plus, they would be **eligible** for the **EPSDT** program.

“The what?” asked Ginny.

Rosalie replied, “The EPSDT program. Here, let’s write that down so you can remember it. The letters stand for **Early and Periodic Screening, Diagnosis, and Treatment**. A lot of words, but your children get a lot of help from it — for free. You can have their hearing and vision checked plus dental care. The program covers other services, too.”

“I didn’t know we could get Medicaid, Rosalie. Bill is working, you know,” Ginny said.

“I know he’s working, but he’s only making minimum wages now, honey. Medicaid is for people with low incomes. You might qualify. Call Social Services and find out if you’re eligible. And, ask about the EPSDT program for Maggie and Donny.”

“Okay, Rosalie. That’s a good idea.”

“I have Medicaid, now. I couldn’t afford to take the children to the doctor without it,” Felicia added.

Ginny said, "I've been hearing about changes in welfare. Isn't Medicaid part of that?"

"Somehow it's tied together," Rosalie replied. "The welfare laws are changing. But, I think you can still apply for Medicaid. You'd have to call Social Services and find out."

"How do I find the number for Social Services?" asked Ginny.

"Let me get the phone book. We'll look that up right now," Rosalie replied.

"Good!" Ginny exclaimed. "Sometimes it's hard to figure out where to look in the phone book. This way, we can look together. Then, I'm going to write the number down and call tomorrow."

Social Services 

Chapter

5

What happens at a well-child visit?

“Rosalie, I am wondering about these well-child visits,” Ginny said. “How many should my children have?”

“Let’s see. The clinic gave me some information about that awhile ago. Here it is,” Rosalie said. “Babies should have their first doctor’s visit when they are one to two weeks old. After that, they should see the doctor when they are two, four, six, nine, and twelve months old. That’s six visits the first year.”

“I remember taking Maggie and Donny to the doctor a lot when they were little babies. But, I thought that was just to get shots.”

“They did get shots when they were babies. But, there’s more to it than that,” Rosalie said. “You need to take them even after they are over one year old. This says to take your children for well-child visits when they are 15 months, 18 months, and two years old. After that, take them once a year until they are six. Once they are six years old, you only have to take them for a check-up every two years.”

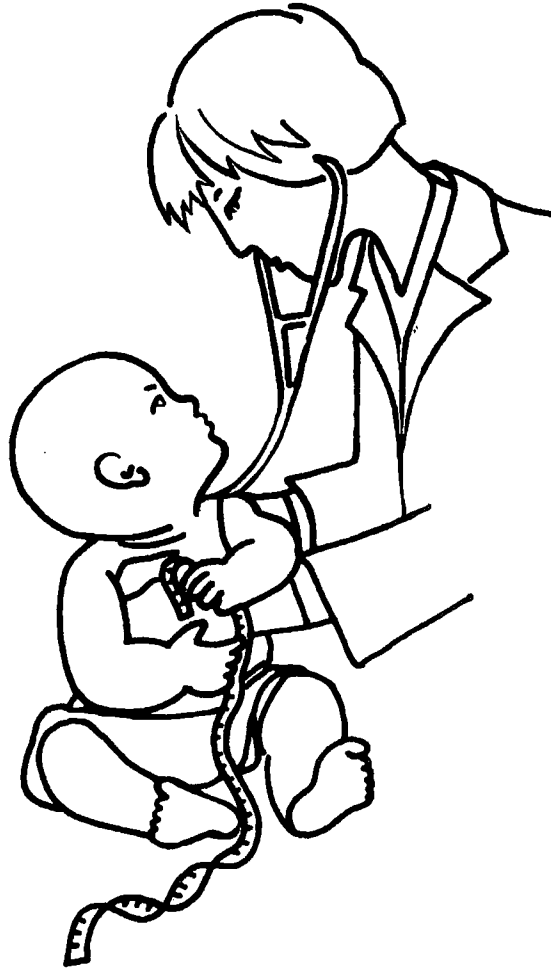
Ginny whistled. “Whew! That’s a lot of doctor’s visits!”

Rosalie said, “It may seem like a lot, but it isn’t! Remember, you are trying to prevent bad health, not wait for it to happen! Besides, the doctor can tell you how much they’ve grown. They weigh and measure the baby. They even measure their head size.”

“Head size?” Ginny and Felicia giggled.

“Yes, indeed. That’s important information, so the doctor can tell if your baby is growing properly. Then, the doctor checks for other things like learning problems and hearing or vision problems. He also does **screening** for **tuberculosis** and **lead poisoning**.

You’d be surprised how many folks living in older houses have children with **positive tests** for lead poisoning! Of course, the clinic also gives children their immunizations.”



“Immunizations?” asked Ginny.

“Most of us call them shots,” replied Rosalie.

“Jorge had these shots when he started kindergarten in September. We went to the clinic, but I don’t remember these other tests. All I remember are the immunizations!”

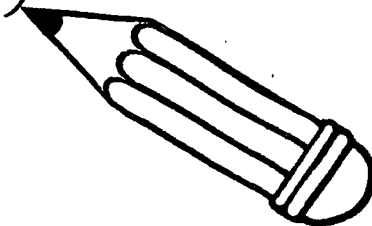
“Maybe you were so concerned about the shots that you didn’t pay attention to the rest of it,” suggested Rosalie.


“You might be right, Rosalie!” Felicia laughed. “Jorge wasn’t too happy about those needles!”

“Maggie has to get those shots soon.”

“Don’t worry,” said Felicia. “She’ll do fine!”

Health screening





Chapter

6

Rosalie keeps a health log

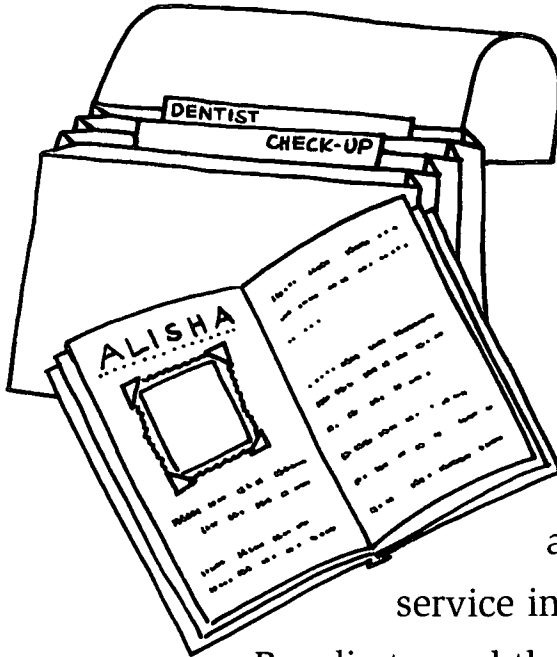
“We’ll come back to immunizations later. Let’s talk more about this well child business first. Okay?”

“Okay, but this is so much to remember,” Ginny complained.

“It isn’t as bad as it seems. Let me tell you how I learned to keep track of my children’s health. Raising five children really kept Robert and me hopping. I needed a simple way to remember when each child had to go to the doctor. I started to keep a health care record on each child. Now, I keep one for Alisha. At the clinic, we call this record a **‘health log’**.”

Felicia asked, “A health log?”

“Right. It’s a record of important information about your baby’s health. Here, I’ll show you.”



Rosalie took Alisha’s health log from her folder. She showed Ginny and Felicia where she wrote phone numbers for the clinic, **pharmacy**, and local **ambulance** service in the notebook.

Rosalie turned the page.

“What a beautiful baby!”

“That’s Alisha’s first picture. That’s Shawna, her mother, holding her. Shawna ran off about two years ago,” Rosalie sighed. “Anyway, this is where I wrote Alisha’s name and birthdate. Here’s her birth weight and length.”

Rosalie continued, “Each time we took Alisha to the doctor, I wrote what the doctor told us. Now, I have a good record of how she grew and what shots she had. I’ve used these other pages to write things I notice about her **behavior**.”

“What do you mean by her behavior?” Ginny asked.

“Well, I noticed how often she seemed **colicky** when she was little. I kept track of things that seemed unusual or a problem. The log really helped when I noticed how often Alisha was sick after drinking milk. We found out she’s **lactose intolerant**. You know, she can’t **digest** milk or milk products. The doctor may not have found that out so fast if I didn’t have my log.”

Ginny looked worried. “Do you have to write everything down?”

Felicia agreed. “What if I don’t know the right words?”

“You don’t have to write everything. Just write enough to help you remember things to ask the doctor. It doesn’t matter if you don’t know the right words. The log is really for you and your children. It’s also fun to write things you want to remember about your babies. I liked to write down the ‘firsts’. You know, things like the first tooth or the first word.”

Ginny smiled. “I remember the first time Donny said Mama! It was so cute!”

Rosalie smiled. “I remember that, too! The log can remind you of those special times. Even more important is that it reminds you to talk to your doctor. Use the log to help you get ready for well-child visits. Tell the doctor about your children’s growth and behavior. Ask about things that might be problems. You see your child every day. The doctor only sees your child once in a while. So, you need to share your questions and concerns.”

“What if the doctor doesn’t want to listen? What if I don’t know the right questions to ask? Sometime it’s hard to know the right words in English,” Felicia said.

“Don’t be afraid to ask questions. You’d be surprised how much easier it is if you keep a log. It’s important to go to a doctor who is willing to discuss your children’s growth and health. The doctors at our clinic are pretty good about that. They also suggest ideas for helping your children.”

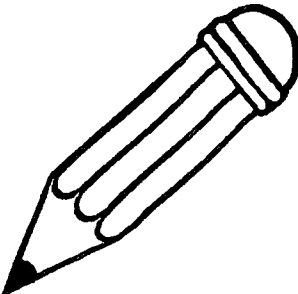
“This is starting to make sense,” said Ginny. “I’m going to start keeping a log with all the important health facts about my children. That will help me keep track of their visits to the clinic.”



Felicia added, "I'm going to write down what Jorge and Luis do that worries me. I'll write my questions in the log, so I don't forget them."

"You can both start logs tonight. Then, schedule a well-child visit," Rosalie concluded. "Now, let's take a break and see what those children are doing."

The three women took a snack to the children and watched them play for a while. Soon, however, their talk returned to health.

Health Log 

Chapter

7

What is lead poisoning?

“Rosalie, you mentioned lead poisoning. What is that?” asked Felicia.

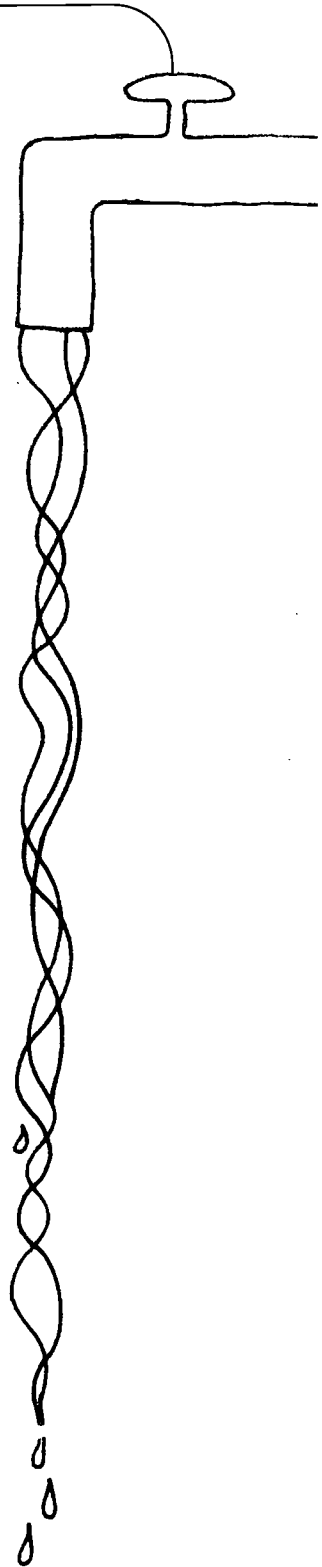
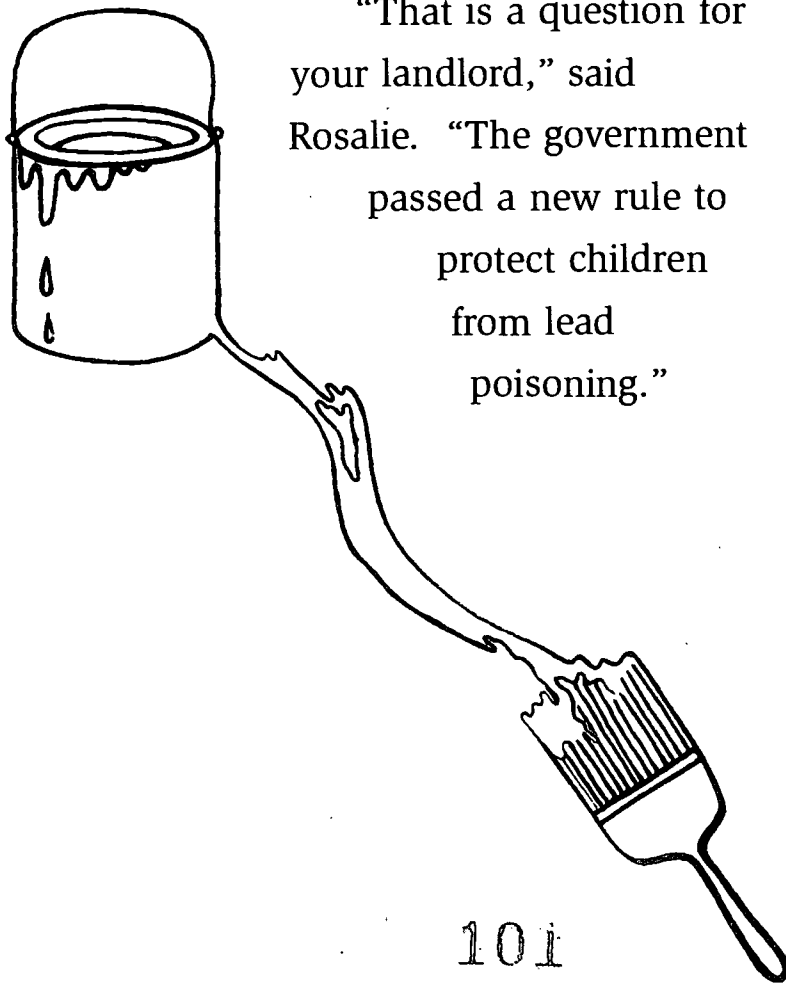
“The houses we live in are old. Most paint had lead in it when these houses were built. Sometimes, the paint flakes off the walls. Children can breathe the dust or put paint flakes in their mouths. The pipes for plumbing had lead in them, too. Children drink water that comes through those pipes. Lead can build up in their bodies. It can cause brain damage or hearing loss.”

“That’s awful!” cried Ginny.

“Ginny, your daddy scraped and painted your house before he gave it to you. He used latex. That’s a water-based paint, so it’s safe. I don’t know if he took any pipes out, so add a question in your log about lead in the water. In the meantime, use the cold water whenever you can. Run it for about three minutes in the morning before you drink any of it or use it for cooking.”

“Does my apartment have lead in it?” asked Felicia.

“That is a question for your landlord,” said Rosalie. “The government passed a new rule to protect children from lead poisoning.”

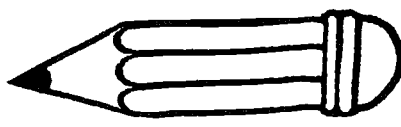


“Your landlord has to tell you if your apartment has lead paint or other **hazards** in it. So, ask your landlord if he didn’t tell you,” Rosalie added.

“I don’t remember that he told me about any lead in the house. I will have to call him,” Felicia said.

Rosalie continued. “You might want to ask the doctor about lead poisoning, too. Lots of people who go to our clinic live in old houses. So, the doctors usually ask if your house is old. They might also ask if your children or their friends have had lead poisoning. If the doctor doesn’t ask you, you ask the doctor. It might be time to call the clinic for a well-child **appointment.**”

“I will do that first thing tomorrow,” Felicia said.

Hazards 

Chapter

8

A health log helps the doctor

“This log business does make sense. How could anyone remember to ask all of these questions?” Ginny added. “Rosalie, do you think I should write a question about Donny’s stuttering?”

“That’s exactly the sort of question to write in your log. You could also start looking for what might cause Donny to stutter.”

“What do you mean?” asked Ginny.

“Well, I’ve heard doctors at the clinic talking about **symptoms** of speech or learning problems. One child might have trouble sitting still. Another child might seem to have a poor memory.” Rosalie added. “Or, a child might stutter. Each child is different.”

Ginny looked startled. “Maggie sure has trouble remembering things like her ABCs and numbers. I wonder if that’s a problem?”

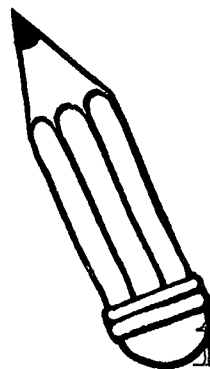
“Ginny, don’t worry! Maggie is only five. She doesn’t have to know all her ABCs and numbers yet. She can count to ten on her fingers. And, she knows her name and address. Wait and see how she does in school first!”



“My Jorge is having trouble in school,” Felicia sighed. “He doesn’t get along with the other children. His teacher says he is too **aggressive!**”

“I would ask the doctor about that. If the teacher has mentioned it, you should find out if Jorge has a problem. And, Ginny, you can ask about Maggie’s memory. As I said before, I don’t know all the answers. Maybe the doctor will have some suggestions for you.”

Symptoms



105

Chapter

9

Immunizations

“Since we’ve mentioned school, what about the shots Maggie needs? What are they for?”

“Immunizations are important,” said Rosalie. “Lots of babies were born and raised before there were immunizations. But, many children died and were crippled without the immunizations we have today. Back in the 1920s, many people got a **disease** called **diphtheria**. Thousands of people died each year. Now, children get a shot to protect them from diphtheria.”

“I never heard of that disease!” Ginny said.

“Probably not, but I bet you’ve heard of **polio**,” Rosalie replied.

Ginny nodded. “I remember getting a polio **vaccine**. You put it in your mouth.”

“That’s right. It was an oral vaccine,” Rosalie said. “Today, children can get the vaccine orally or in a shot. The oral polio vaccine is called **OPV**. The one that’s given in a shot is called **IPV**. IPV stands for inactivated polio vaccine. Children should have four doses of the vaccine. Your doctor will tell you if your children should get the vaccine orally or in a shot.”

“So, nobody gets polio or those other diseases any more, do they?” asked Ginny.

“We don’t worry about polio too much because the vaccine protects us. But, it was a fairly common disease in the 1950s. Lots of children died and many were paralyzed.” Rosalie continued, “And, people can still get these diseases. They just aren’t as common thanks to the vaccines.”



Ginny asked, “Why do people still get the diseases if we have vaccines to protect us?”

“That’s a good questions, Ginny,” said Rosalie. “Do you remember the **measles** outbreak a few years ago? People didn’t get their children immunized. Suddenly, measles are back! Children also should be immunized against diseases that are not so familiar such as **Hib** and **hepatitis B.**”

“Oh dear! What are those?” asked Felicia.

“Well, Hib is a **bacteria** that can cause **meningitis** and other health problems. Meningitis is an **infection** of the lining that covers your brain and spinal cord.” Rosalie continued, “Hepatitis B is a **virus** that can cause infection in your liver.”

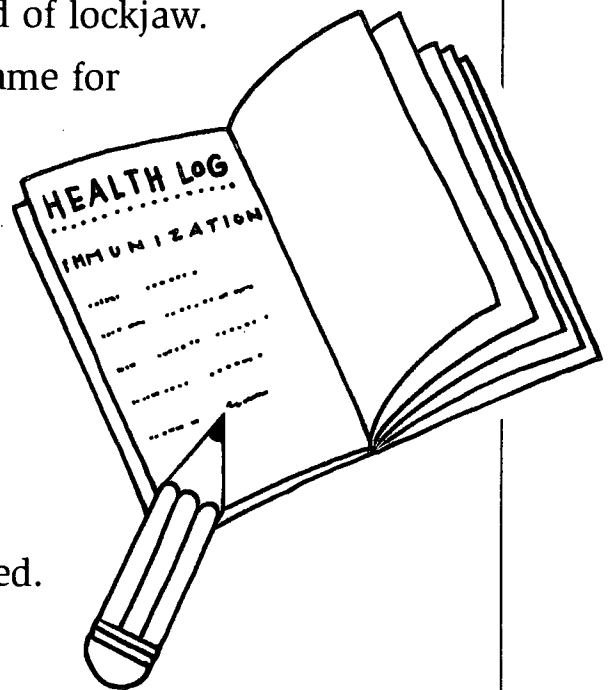
“Gosh. That sounds pretty bad,” Ginny said. “What do we need to do?”

“First, you’ll want to know what immunizations your children need. I have an immunization record for Alisha. You can get one from the clinic. Here, let me show you.”

Rosalie took a small card out of her wallet. Alisha's name and birthdate were on the card. "See how I've kept track of the shots that Alisha has had so far?" explained Rosalie. "Children should have several **DTP** shots, starting when they are babies. DTP stands for three diseases: diphtheria, **tetanus**, and **pertussis**."

"You mentioned diphtheria before. But, I never heard of those other two diseases," Ginny exclaimed.

"You might have heard of lockjaw. That's a more common name for tetanus. And pertussis is also known as whooping cough. Whooping cough is very dangerous for young children. Lockjaw is dangerous even if you are an adult," Rosalie explained. "Here's a paper from the clinic that describes the immunizations and the diseases."



Rosalie added, "I have extra copies, so you can each have one. It's a good idea to be familiar with the diseases and vaccines. It will be easier to understand what the doctors and nurses tell you at the clinic."

"Thanks! Maybe you could read over it with us later?" Felicia asked.

"Sure. The doctor or nurse at the clinic would do that for you, too," replied Rosalie. "Oh, I almost forgot to explain something else. Let's look at the immunization card again. Each of the vaccines has to be given more than one time. The follow-up shots are called **boosters**. Look at the DTP shots again. Children need to have the first shot when they are two months old. Then, they will get four boosters. Children and adults also should get tetanus boosters every ten years starting when they are around eleven years old."

"Oh dear!" Ginny said. "Does that mean we should be getting tetanus shots, too?"

“I’m afraid so,” answered Rosalie, “if you want to be protected against lockjaw! Ask about that when you take Maggie and Donny to the clinic for their next well-child visit.”

Felicia said, “My children are so afraid of needles. Jorge hasn’t forgotten when he had to get shots for school.”

“Getting shots isn’t fun, but you can help your children prepare for them,” said Rosalie. “Of course, babies will cry. All you can do is hold them and make them feel safe. You can talk to your older children or even read them a book. The library has some good children’s books about doctor’s visits. Plus, you should praise your children after they get the shots. Tell them how proud you are of them!”

“I’m more worried about my kids having a bad **reaction** to the shots,” said Ginny. “I heard that they can get really sick from them!”

Rosalie replied, “Some children will have serious reactions to the shots. But, it’s rare. It’s more common for children to have mild reactions. The place where the shot was given can get swollen. It might feel warm when you touch it. Also, your baby can run a fever. That’s the body doing its work! Babies don’t know that, so they might be cranky and sleepy. Just keep them comfortable. Take their **temperature** every few hours. Call the doctor if the fever lasts more than 24 hours or goes over 102 degrees.”

“Couldn’t I give my children aspirin to bring down the fever?” asked Felicia.

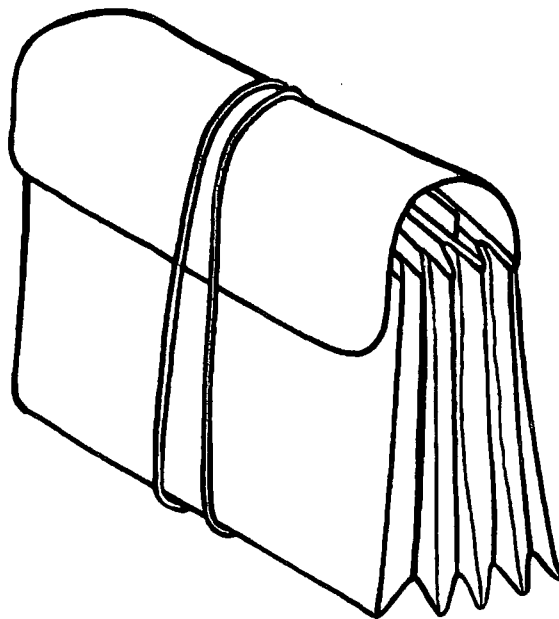


“Oh, no! Never give aspirin to children without checking with a doctor or pharmacist first! It can cause brain damage in some children if they have the flu or chickenpox. This condition is called **Reye’s Syndrome**. It’s rare, but you don’t want to risk it. Give your children an **aspirin substitute**.”

“Oh my!” exclaimed Felicia. “I think my brain is full! I don’t think I can learn any more today.”

Ginny and Rosalie laughed. “I agree with you,” laughed Ginny.

“Tomorrow morning I’ll make an appointment for Jorge and Luis,” said Felicia. “I’m going to start my health log, too!”



“I’m going to do the same thing. Thanks, Rosalie,” Ginny added.

“I’m happy to help. When it comes to children’s health care, I could just talk forever!”

With that, Felicia and Ginny collected their children from the back and headed home. Rosalie called Alisha in to wash her hands and help set the table for dinner.

Immunization 

Chapter

10

**Felicia
takes charge**

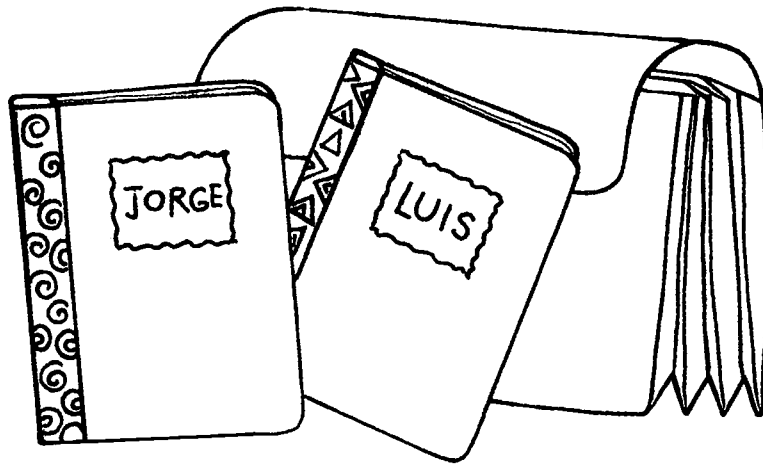
A few evenings later, Rosalie's doorbell rang.

Rosalie opened the door. "Why, Felicia! How are you? Come on in."

"Thank you. I'm glad you're home," she replied. "Can I tell you about our well-child visit?"

"Of course! Tell me all about it."

"First, I made an appointment with the clinic. Then, I bought a notebook and started health logs for Jorge and Luis."



Felicia added, “I wrote all the information I could remember. Then, I wrote my questions and took my log to the clinic.”

Rosalie smiled. “That was a lot of work! How did the clinic visit go?”

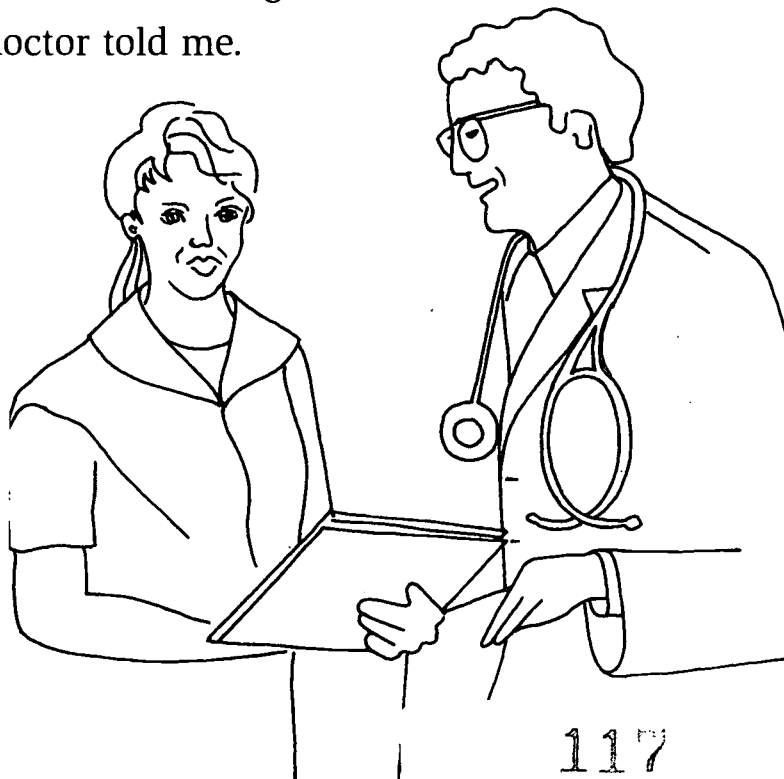
“Oh, Rosalie, it went very well!” said Felicia. “I asked about lead from the paint and the water pipes. I also asked about Jorge’s aggressive behavior. Luis is always sucking his thumb, so I asked about that, too. And, I’m proud that I didn’t worry if all my words were in perfect English. The doctor understood me with no problem!”

“Good for you, Felicia! That’s the right spirit.”

“The doctor told me that my log was very helpful. I couldn’t have remembered my questions without it!” Felicia continued. “The nurse weighed and measured Jorge and Luis. Then, the doctor asked me questions about their health. He even asked what I thought. I think he’s a very good doctor!”

“I think he is, too!” added Rosalie. “It’s important to have a doctor who knows how to **communicate.**”

Felicia smiled. “Jorge’s immunizations are all up-to-date. And, Luis had his DTP, polio, and **MMR** boosters. I’m glad that you gave me the paper that explains immunizations. I knew that MMR stood for **measles, mumps, and rubella.** It made me feel good to understand what the doctor told me.



“What did the doctor say about lead in your apartment?”

“He said that he saw no signs of lead poisoning, but he would test them to make sure. He said not to worry. The clinic will call me next week with the results.”

“Good. What did the doctor think about Luis’s thumb sucking?”

Felicia looked concerned. “He said that Luis should not be sucking his thumb all the time at his age. Luis is five years old, and he lost one of his baby teeth already. The doctor showed me how his teeth are not quite lined up correctly. He said to call the dentist. Luis has never been to the dentist. This is another big step to take, but we will take it.”

“I’m sure that will turn out okay, too. Alisha’s never had trouble with her teeth, so she’s never been to the dentist either. I really don’t remember when you are supposed to start taking children to get their teeth cleaned. I guess I’d better find out about that!” Rosalie continued, “Now, what about Jorge’s aggressive behavior?”

“Well, the doctor said that children are aggressive for different reasons,” explained Felicia. “He asked me to watch Jorge. I should write about the times he’s aggressive in my log. This may help the doctor figure out what is causing this problem.”

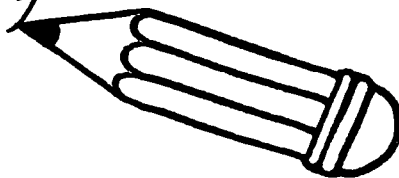
“Exactly,” Rosalie replied. “If it’s a serious problem, the clinic might refer you for **early intervention services**. They can help, but you and Jorge will have to work on the problem, too.”

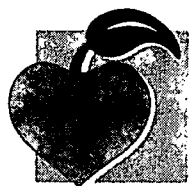
“Rosalie, thank you for getting us to the clinic for a well-child visit,” said Felicia. “You have taught me a lot about taking care of my children’s health.”

“Felicia, you took the first step yourself! Remember, you asked the first question when you asked me for help.” Rosalie took Felicia’s hand. “Now, you know more about keeping your children healthy. You took your new knowledge, and you used it to help your children. You should be proud of yourself!”

“I am proud,” said Felicia as she squeezed Rosalie’s hand. “And, you know I’ll be back when I have more questions for you.”

Keep a health log





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Rosalie's Neighborhood:



Why Do I Have to See the Dentist ?

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122

Rosalie's Neighborhood: Why Do I Have to See the Dentist?



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1997

123

Design and Illustrations, Feld Design



Characters:

Rosalie Stevens

Alisha (granddaughter, age 5)

Robert (husband)

Shawna (daughter)

Felicia Gonzalez

Luis (son, age 5)


Jorge (son, age 6)

Ginny McMillan

Maggie (daughter, age 5)

Donny (son, age 4)

Bill (boyfriend)



Chapter

1

Maggie loses a tooth

Rosalie Stevens was just getting home from her job at the health **clinic**. She heard crying when she walked into the house. Rosalie ran up the steps. She threw open her granddaughter's bedroom door. Her husband, Robert, was sitting on the bed and patting Alisha's back. Their five-year-old grandchild, Alisha, was lying on the bed in tears.

“What's wrong!” Rosalie cried.

Robert looked up. “Alisha's okay. She's upset because Maggie was hurt. Her tooth was knocked out, and Ginny had to take her to the dentist.”

Alisha looked up and stuck out her lip.
“Jorge is mean,” she cried.

“My, oh my! I’d better go see Ginny.” Rosalie hurried down the steps and out the door. She knocked on her neighbor’s door. Ginny McMillan opened it. Her eyes were red from crying.

“You are a sight! What happened?”

Ginny answered angrily, “Jorge Gonzalez pushed Maggie and made her fall! She hit the sidewalk face first and lost a tooth!”

“Oh, Ginny! No wonder you’re upset. Have you talked to Felicia yet?” Rosalie asked.



“No. I’m too angry right now! I’m sure I’d say something I’d regret later,” Ginny replied.

“That’s the truth. It would be a shame to lose a friend over angry words.” Rosalie thought about the last month. Felicia Gonzalez and Ginny had come to Rosalie for information about their children’s health care. Rosalie’s job as a nurse’s aide helped her get the information they needed. She and Ginny were close friends. In the past month, Felicia and Ginny had become friends, too.

Ginny’s voice shook. “Maggie’s mouth is all **swollen**. And, we had to go all the way to the hospital to see a dentist.”

“I want to hear all about it,” Rosalie urged.

“Well, Felicia asked if I could watch Jorge after school. I said sure. I didn’t think it would be a problem,” Ginny sighed.

“What were the children doing when Maggie fell?” asked Rosalie.

“She was pushed,” Ginny answered sharply. “They were playing tag. Everything seemed okay when I checked on them. Then, they were all crying! Alisha said Jorge was pushing them hard when he tagged them. They told him to stop, but he wouldn’t. Finally, he pushed Maggie so hard that he knocked her down.”

“What did you do then?”



“I ran outside. Alisha said Jorge pushed Maggie. So, of course, I started yelling at Jorge! Maggie got up, and her face was all bloody. She had her tooth in her hand,” Ginny replied. “I took Maggie, Donny, and Alisha in the house. Then, I called the clinic.”

“What about Jorge?” asked Rosalie.

“Jorge? Well, he was crying, too. He took off down the street when I started yelling. He must have gone home.” Ginny looked worried. “I was supposed to take care of him. I forgot all about him. Maybe I should call Felicia.”

Rosalie said, "You should call her, but you're still upset. I'll call her later, okay?"

"Okay. Thanks, Rosalie." Ginny gave her friend a quick hug. Suddenly, they saw two heads peeking around the corner.

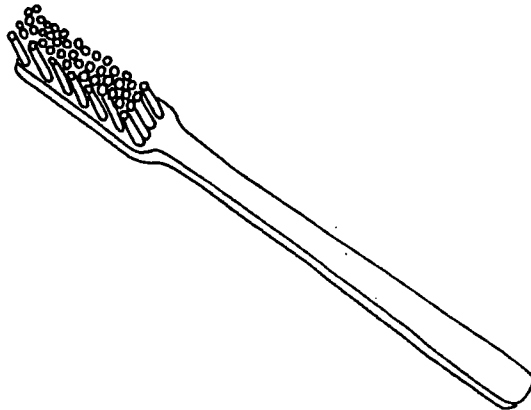
"Ginny, can you come say good night to a sleepy little boy?" Bill asked. "He's been really quiet, so his sister could rest."

"Thank you, Donny! Did you and Daddy have fun playing?" asked Ginny. Donny nodded his head. "Are you ready for bed?"



“N-n-no way!” Donny replied. Rosalie, Ginny, and Bill laughed.

“Well, I can see you have your hands full!” Rosalie exclaimed. “Ginny, I’ll come over tomorrow morning to see how you’re doing.”



Chapter

2

**Rosalie checks on
Maggie**

“You’re looking better this morning,” Rosalie said. “How are you feeling?”

“I feel a little better. Maggie’s face still looks pretty bad. It must hurt, too. She keeps moaning in her sleep. Did you call Felicia?”

“I called her last night,” Rosalie replied. “She was upset and wanted to call you.”

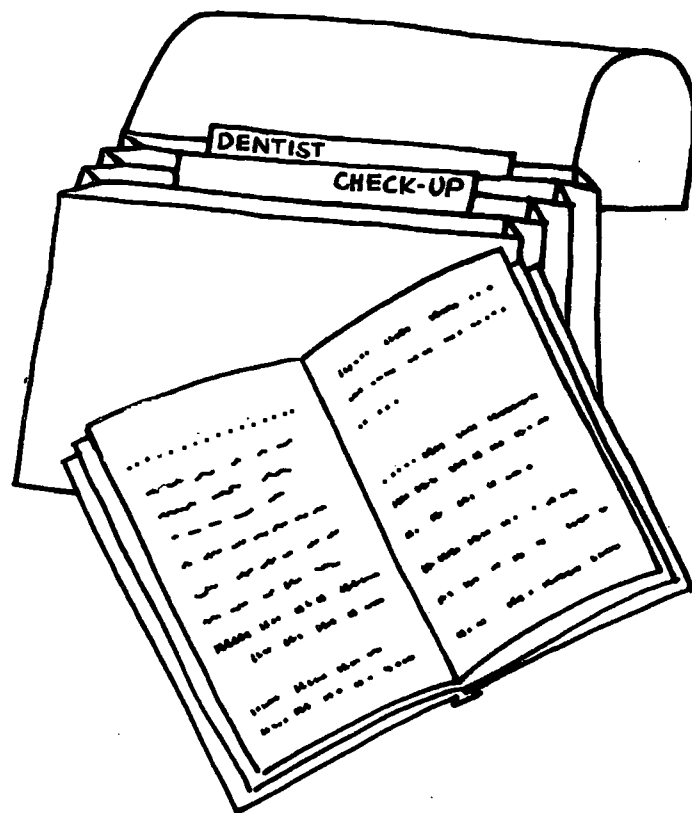
“It’s a good thing she didn’t call last night. I was really angry!” Ginny said. “I’m still not happy about what happened.”

“That’s understandable. Felicia thought you could talk about it soon. What do you think?” asked Rosalie.

“Sure. I like Felicia, but she has to do something about the way Jorge acts. No wonder he has trouble at school!”

“Felicia talked to the doctor about that. She’s keeping a record in her **health log** of the times he’s **aggressive**. The doctor said it would help them find a reason for his **behavior**,” Rosalie continued.

“Well, I hope they find a reason.” Ginny added, “Is he okay?”



“He’s okay. Felicia stopped at home after Luis’s dentist visit. Jorge was on the front steps crying. He told Felicia almost everything. Of course, he just said that Maggie fell when he tagged her. It’s hard to believe that he pushed her on purpose. He’s a little wild, but he’s not mean.”

“Maybe you’re right, Rosalie,” Ginny said.

“Hi, Momma,” said a little voice. “Hi, Miss Rosalie.” Maggie joined them in the kitchen.

Rosalie hugged Maggie and said, “Let’s see where that old tooth was! So, you lost that one on the bottom, right in front. Did Dr. Lopez tell you to do anything now that the tooth is out?”



Ginny replied, “Dr. Lopez said to keep her mouth clean. I can use a salt water solution until her mouth starts to **heal**. Do you know how to make the solution? I’m not sure how much salt to use.” Ginny looked at Rosalie hopefully.

“Sure. We’ll make some up before I go home,” Rosalie answered. “You said Maggie seemed to be in pain. Are you giving her pain medication?”

“Yes. I’m supposed to give her an **aspirin substitute**.”

“Do you remember why you shouldn’t give children aspirin?”

Ginny laughed. “I remember. It might cause Reye’s Syndrome,” Ginny replied. “Dr. Lopez agreed, but she gave me another reason. Want to know what it is?”

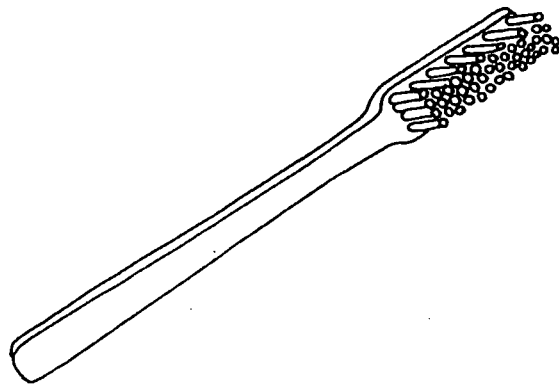
“I can guess, but you tell me,” Rosalie laughed.


“Aspirin can keep blood from **clotting**. We want Maggie’s mouth to stop bleeding, so no aspirin!”

“I didn’t think of that reason when we were talking about aspirin last time.” Rosalie added, “The mouth seems to heal quickly, so Maggie should be back to normal in no time.”

“Dr. Lopez said that **saliva** is a natural **antiseptic**. The **tissues** in the mouth heal quickest of all the tissues in the body. Isn’t that something?”

“It sure is,” Rosalie answered.





Chapter



3

What can a dentist do for an injured tooth?

Rosalie asked, “What happened at the dentist’s office?”

“Well, I left Donny with Robert. Then, I took Maggie and her tooth to the clinic. A nurse helped me when I got there. She cleaned up Maggie’s face.”

“Maggie did get a few scrapes,” Rosalie noticed.

“Yes. The nurse put an antiseptic **salve** on the scrapes. She said that I needed to take Maggie to a dentist. That made Maggie cry again. She said, ‘Why do I have to see the dentist?’”

“I don’t like going to the dentist either!”
Rosalie added. “But, I get my teeth cleaned.
It’s important to take care of your **permanent**
teeth.”

“It’s important to take care of baby teeth, too!
I learned that yesterday. A dentist should
examine a child if she’s having a problem with
her teeth. The nurse said it’s important even if
it’s just a baby tooth that falls out before it’s
supposed to.”

“That’s new to me!” Rosalie said. “What
difference does it make if a baby tooth comes out
earlier than it’s supposed to?”



“The dentist told me that.” Ginny thought for a minute. “But, let me tell you what happened next. Then, I’ll tell you what the dentist said about baby teeth.”

“Okay. What happened next?”

“Let’s see. Next, the nurse called the hospital to make an appointment. We went to the **pediatric dental** clinic at the hospital. I’m not sure what pediatric means. Do you know ?” Ginny asked.

“I know the word from the clinic. It has to do with children. Children go to a pediatrician — a doctor trained to take care of children,” said Rosalie.

“Oh, so a pediatric dental clinic must be a clinic that takes care of children’s teeth.”

“I’m sure that’s right,” said Rosalie.

Ginny continued. “Anyway, the dentist examined Maggie’s tooth. She said that dentists don’t put baby teeth back. She called them something else. Oh yes, she called them **primary teeth.**”

“Why would they want to put a baby tooth back in?”

“You’ll be proud of me. I asked Dr. Lopez. She said primary teeth keep a place open for permanent teeth to come in. If a baby tooth comes out before it’s supposed to, the other teeth can move around. Then, the permanent teeth might not come in the right way. If that happens, the child might have to get **braces.**”



“Why, Ginny! I am proud that you asked a question. That’s hard to do anytime. But it’s even harder when you are upset,” Rosalie replied. “That explains why they would want to put a baby tooth back in. But, it doesn’t explain why they don’t do it!”

Ginny smiled. “Dr. Lopez explained that, too. She said it might damage the permanent tooth that’s growing in the gums. The baby tooth might keep the permanent tooth from coming in at all. Dr. Lopez showed me pictures of Maggie’s teeth. They were **x-rays**. You could see her baby teeth. You could see new teeth growing underneath them, too. It was amazing!”

“It sounds amazing,” Rosalie replied. “So, they don’t put the baby tooth back in. But, the permanent tooth needs a space kept open so it can come in. What does the dentist do to keep a space open?”

“Dr. Lopez could put a **space maintainer** in Maggie’s mouth. But, we don’t have to do that. Maggie’s permanent tooth will come in sometime in the next year or two. So, we don’t need the space maintainer,” Ginny answered. “She would have to use a space maintainer if one of Maggie’s back teeth had been knocked out. Those permanent teeth won’t come in for years yet.”



“That’s interesting!” Rosalie asked, “But, what if she needed a space maintainer? What happens then?”

“It doesn’t really sound too bad,” Ginny said. “Dr. Lopez said that they would make an **impression** of her teeth. The impression helps the dentist make a space maintainer to fit her mouth. Then, we would go back one more time to have the space maintainer put in her mouth.”

“My, my! What will they think of next?”

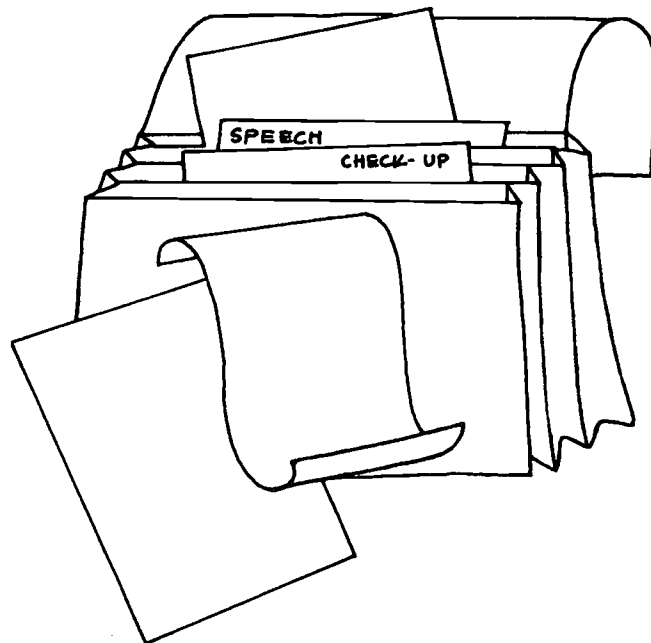
“Oh, Dr. Lopez said that baby teeth are also important for other reasons. That’s why we should try to protect them from being damaged. She said they help children chew properly. They also help children learn to pronounce words correctly.”

Rosalie started to chuckle. “It amazes me how much I don’t know about teeth!”

Ginny smiled. It was fun telling Rosalie what she had learned. She was also pleased at how much she had remembered. “Dr. Lopez gave me information about other **injuries** to teeth and what to do about them. Did you know that dentists can fix a **chipped** or **fractured** tooth? You just carry the chip in a cloth, and they cement it back on. They can fix a broken tooth so your child doesn’t lose it.”

“Well, I’m glad Maggie only lost a baby tooth. It could have been a permanent tooth if she were older,” Rosalie added.

“That’s true. Dr. Lopez said that having a permanent tooth come out is a very serious injury. She gave me information about that. It tells you what to do if that happens.”



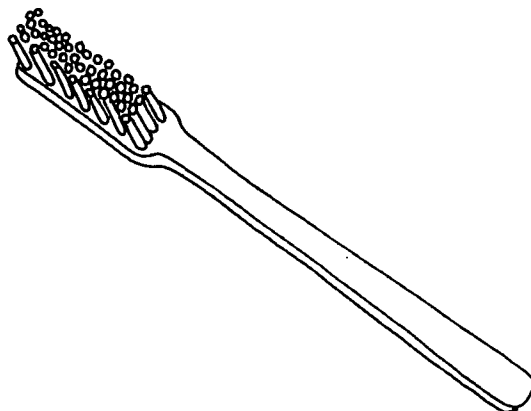
Ginny continued. “Did you know that you should put a tooth in water or milk to protect it? I never would have thought of that one!”

“I never heard of such a thing!” Rosalie said. “Can I borrow that paper? It sounds like something I should know about!”

“Sure, Rosalie. It’s nice to do something for you for a change!”

“Whew!” Rosalie exclaimed. “Now I know how you and Felicia felt after our conversation about **well-child visits** and immunizations!”

“Right! It’s your turn to have your brain filled with new ideas!” Ginny laughed. “I’m feeling much better now. It helps to talk it over.”



Chapter

4

Luis visits the dentist

Ginny called Felicia, and they decided to get together soon. A few days later, Felicia and Luis knocked on Ginny's door.

"Come on in. Rosalie is here, too," Ginny said.

"Hi, Rosalie," Felicia said. "Ginny, I am so sorry about what happened to Maggie!"

"You already apologized," Ginny replied. "We're still friends."

"I'm so happy." Felicia smiled. "Luis is happy to be here again, too. I hope the girls will forgive Jorge."

“I’m sure they will,” said Rosalie.

Felicia smiled again. “I have some news. Luis and I have just been to the dentist. I made an appointment to find out about his thumb sucking. Do you remember?”

Rosalie and Ginny nodded.

“The dentist was very nice. Her name is Dr. Lopez,” Felicia continued.

“Dr. Lopez took care of Maggie. She’s very gentle.”



“Yes, she is. Dr. Lopez said it’s normal for babies to suck. It comforts them. It’s normal for young children, too. Many children suck their thumbs or fingers until they are three or four years old.”

“But, Luis is five, isn’t he?” asked Rosalie.

“Yes,” replied Felicia. “The dentist said that it won’t really be a problem until his permanent teeth start to come in.”

“When does that happen?” asked Ginny.

“Most children start to get permanent teeth when they are six or seven years old,” Felicia replied. “Jorge is six now. So, he should start losing his baby teeth soon.”

“So, do you have to worry about Luis’s thumb sucking now?”

“The doctor at the clinic noticed that Luis’s teeth do not line up correctly. That’s why we went to the dentist in the first place. Dr. Lopez agreed with the doctor. Sucking his thumb is affecting his teeth. She said he must suck his thumb often and with a lot of **pressure**.”

“What can you do to stop it?” asked Rosalie.

“Dr. Lopez told Luis that sucking his thumb was hurting his teeth,” Felicia replied. “She asked him to try to stop sucking it. Later, she told me that she didn’t expect him to stop because she asked him. Dr. Lopez knows how stubborn children can be!”



Rosalie and Ginny laughed. Rosalie asked, “What if he can’t break the habit by the time he’s six or seven?”

“Dr. Lopez said that children start to depend on putting their thumb — or fingers or whatever — in their mouths. It makes them feel safe. It is a hard habit to break! Dr. Lopez may have to put a device in his mouth if he’s still sucking his thumb it in a year or two.”

“What kind of device?” Rosalie asked.

Felicia said, “She showed me different kinds. They all fit in the mouth. They would keep Luis from putting his thumb in his mouth. Dr. Lopez said they are very effective.”

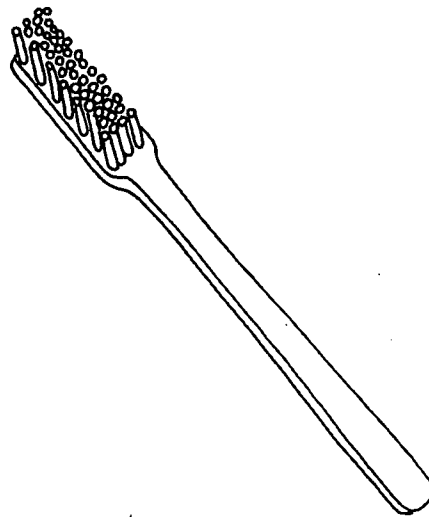
“I would imagine!” laughed Rosalie. “Just seeing something like that would make me stop!”

“Oh, yes!” Felicia giggled. “I will have to be firm with him. I don’t think Luis even knows he’s sucking his thumb most of the time. So, I’ll try reminding him whenever he does it. Maybe that will help.”

“That will get his attention, at least,” Rosalie said.

“We’ll remind him, too, Felicia,” offered Ginny.

“Oh, thank you! I’m sure we can help Luis stop sucking his thumb if we work on it together!” Felicia exclaimed.



Chapter

5

**Alisha has a
toothache**

Rosalie stopped at Ginny's house to get Alisha when she got home from work.

Ginny said, "Alisha isn't feeling too well. She says she has a toothache. It must hurt. She's been cranky all day."

"Oh, dear! I wonder what started that?" worried Rosalie.

Alisha came into the room dragging her teddy bear. "One side of her face looks a little swollen, doesn't it?" asked Ginny.

“Hmm. Yes, it does. I guess we’d better get you home.” Rosalie hugged Alisha. “I’ll get you a hot cloth to put on that jaw. Okay?”

“Wait a minute,” Ginny said suddenly. “I don’t think you should put heat on it.”

“Why not?” asked Rosalie. “I’ve always used heat for a toothache.”

“I’m sure I saw that in one of the papers Dr. Lopez gave me.” Ginny picked up a folder. “I’m keeping information from the dentist in this folder. I keep things I get at the doctor, so it should work for the dentist, too.”

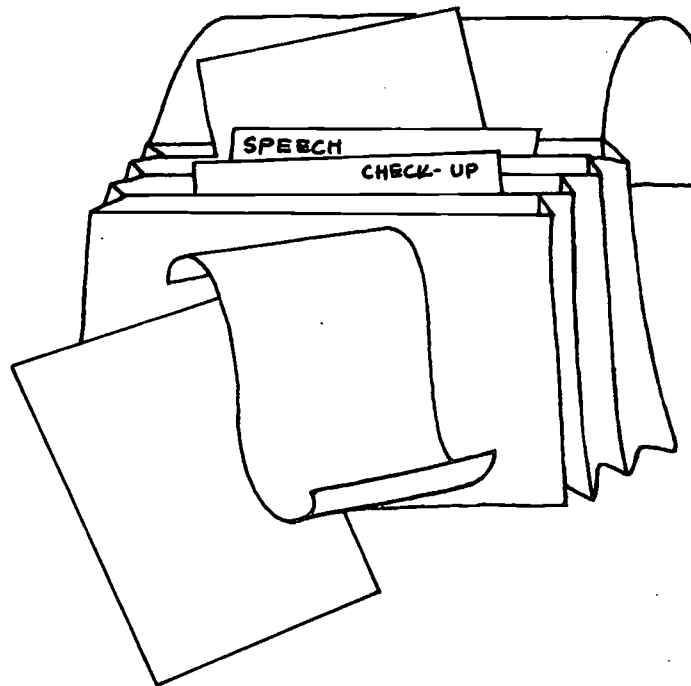
“That’s a really good idea.”



“Here’s the information on toothaches,” Ginny said. “Look here, Rosalie. Don’t rub aspirin on the child’s gums and don’t apply heat.”

“I see. Well, I knew that aspirin wouldn’t be a good idea,” Rosalie said. “But, I’m surprised about the heat. What should I do?”

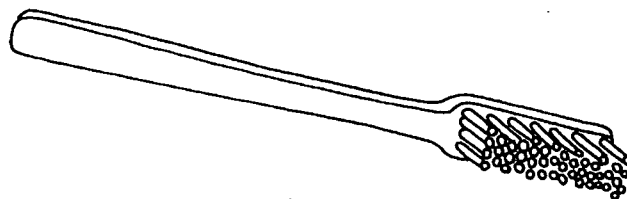
“Let’s see. Have Alisha **rinse** her mouth with cold water. Then put ice in a **gauze pad** or a clean cloth. Keep that on the area until the pain dies down. You should make an appointment for her to see the dentist, too.”



“Isn’t this something!” said Rosalie. “It seems like all our children suddenly have to see the dentist. First, Maggie loses her tooth. Then, Luis goes to the dentist about his thumb sucking. Now, you tell me that Alisha should see the dentist about her toothache.”

“It’s always something with children, isn’t it,” laughed Ginny. “Just think about all we’re learning about our children’s teeth!”

“Well, I think I’ve learned enough for a couple of weeks!” Rosalie laughed, too.



Chapter

6

What is nursing bottle mouth?

A few days later, Ginny called Rosalie. “Did you take Alisha to the dentist?” she asked.

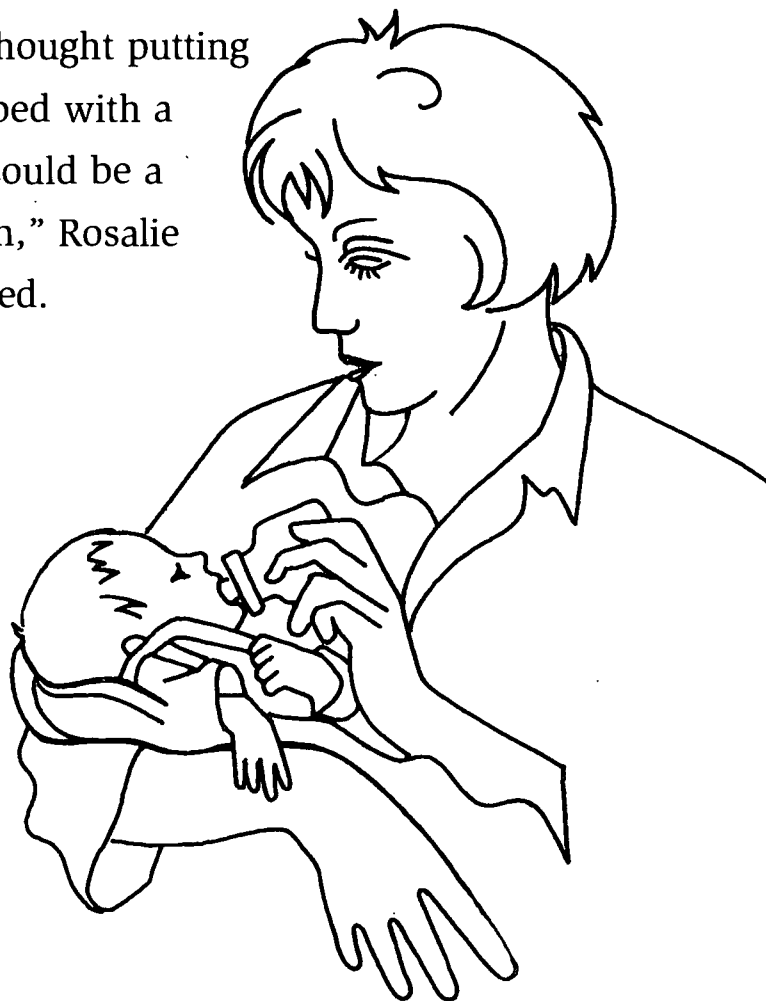
“Yes, I did. I sure have a lot to learn about dental care!” Rosalie answered. “We saw Dr. Lopez, too. She told me that Alisha’s gums or teeth don’t look **infected** now. Maybe she had a piece of food stuck in there. It could have come out when she rinsed her mouth.”

“That’s good news,” said Ginny.

“That’s good, but I had some not so good news, too. Alisha has **baby bottle tooth decay**. Dr. Lopez said some people call it **nursing bottle mouth**,” Rosalie sighed.

“What’s that?”

“It’s tooth decay that young children get when they sleep with a bottle of formula, milk, sugary juices, or sugar water. Those all have sugar in them. Dr. Lopez said that you shouldn’t give babies **pacifiers** dipped in sugar or honey either. The sugar can cause tooth decay. So, Alisha has **cavities**. I never thought putting her to bed with a bottle could be a problem,” Rosalie explained.



Ginny asked, "Can't you ever put babies down with a bottle?"

"You can give them a bottle of water. That's okay since it doesn't have sugar in it," answered Rosalie.

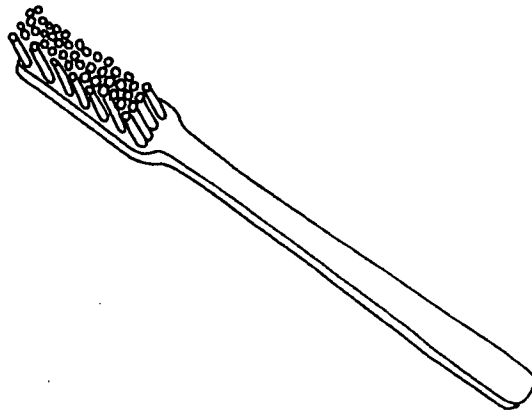
"Can the dentist do anything about the cavities?" asked Ginny.

"Dr. Lopez said they would pull her teeth if the decay was advanced. We're lucky the teeth aren't too badly decayed. She'll be able to fill the cavities," Rosalie explained. "She also said she would make another appointment to get Alisha's teeth cleaned. I should have been having her teeth cleaned since she was one year old!"

Ginny looked surprised. "You're kidding! Neither of my kids have had their teeth cleaned. All they have are baby teeth."

“That’s what I said.” Rosalie added, “I’m learning that it’s more important than I thought to take care of those primary teeth!

Dr. Lopez said that dentists want to prevent children from having trouble with their teeth later. That’s preventive dental care. It’s the same thing I told you about preventive health care — but for your teeth.”



Chapter

7

What happens during a dental check-up?

A week later, the three friends were sitting in Rosalie's kitchen again. Rosalie said, "You know, I had never been to the pediatric dental clinic. Now I've been there three times for Alisha. First for her toothache, then to get her teeth cleaned, and then to get cavities filled."

"I've taken both Jorge and Luis to the dentist," Felicia added.

"And, I've been there with Maggie and Donny too." Ginny said.

Rosalie said, "I don't know how you feel, but I've learned a lot. I always prided myself on how much I knew about health care. But, I was neglecting dental care completely."

"There's so much new information! It's hard to remember the details," Felicia added.

"I'm curious. Did your children have X-rays taken? Dr. Lopez took X-rays of Maggie's mouth. But, she didn't take any of Donny's. I forgot to ask her about that."

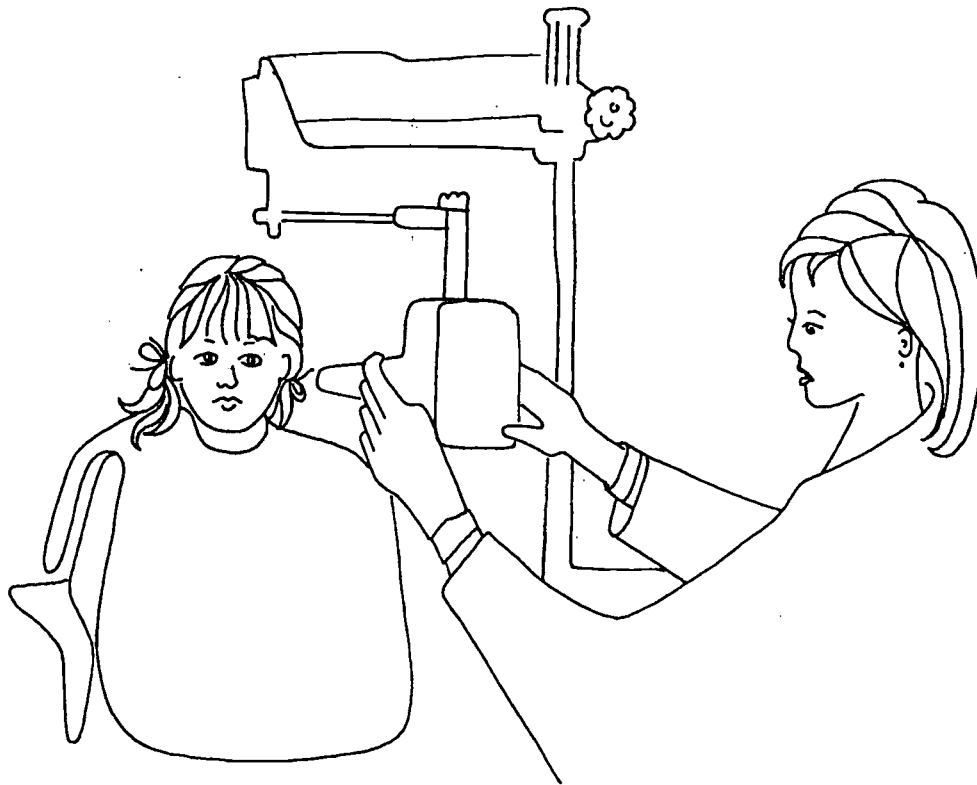
"Oh, yes. She took X-rays of Alisha's mouth. That was because Alisha had had a toothache. Plus, she has cavities from that baby bottle decay," Rosalie replied.



“Maybe the dentist was making sure the rest of Maggie’s teeth were okay. I bet she had to check on that since her tooth was knocked out,” Felicia added.

“The dentist said she only takes X-rays if she really needs them. So, Felicia’s reasoning makes sense to me, too.”

Felicia said, “The dentist asked me questions about Jorge’s and Luis’s health. Not all of the questions were about their teeth. That information must help her figure out if they have healthy teeth. Does that sound right?”



“Yes, Dr. Lopez asked me questions, too. It reminded me of the questions that doctors ask when they take your medical history. The information helps them figure out how to help you stay healthy,” Rosalie said.

“Did Alisha get a **fluoride treatment**?” asked Felicia.

“Yes. First, Dr. Lopez examined Alisha’s teeth and gums. She looked at her jaw, too.” Rosalie added, “Then, she cleaned and polished Alisha’s teeth. Last of all she used fluoride.”

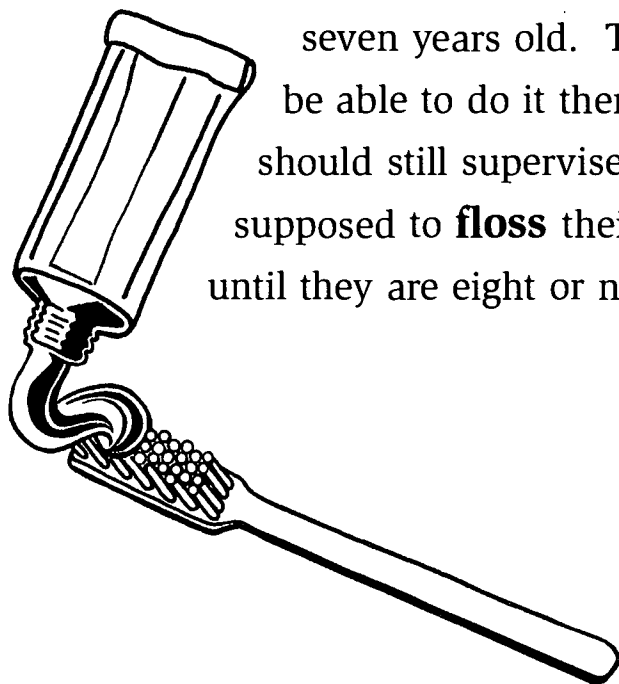
“Both of my boys liked the toothpaste. Dr. Lopez must buy a special kind that children like!” Felicia added. “The dentist said that fluoride helps keep teeth strong. It also can prevent cavities.”

Ginny agreed. “Dr. Lopez told me to buy fluoride toothpaste. She said Maggie and Donny are old enough to spit the toothpaste out. Smaller children might swallow it. They can get too much fluoride that way.”

“The dentist said that our tap water has fluoride in it. We would have to give the children fluoride drops or tablets if we didn’t have it in the water,” Rosalie added.

“Dr. Lopez showed us how to **floss** our teeth,” said Felicia. “Did she do that for you, too?”

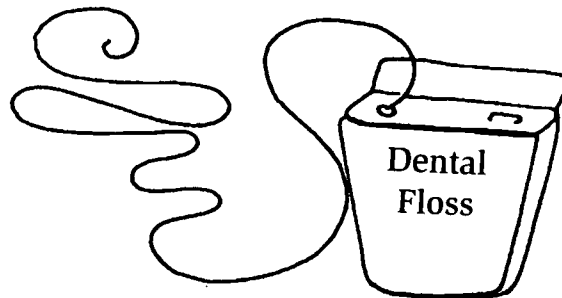
Ginny said, “Dr. Lopez told me to brush the kids’ teeth until they are around six or seven years old. Then, they should be able to do it themselves. But, I should still supervise them. I’m supposed to **floss** their teeth for them until they are eight or nine years old.”



Felicia said, "I guess I'm going to have to start flossing my teeth. I'm not very good about that. Dr. Lopez said I should try to set a good example."

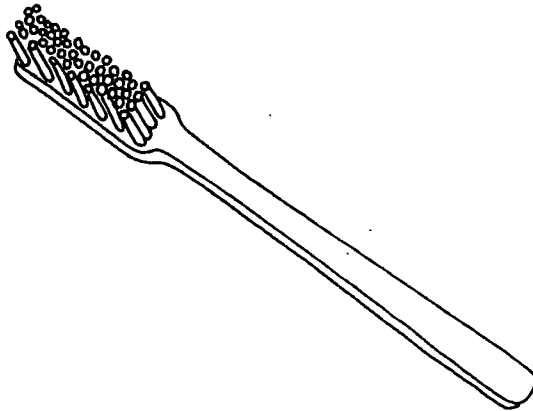
"She's right about that. It's not easy to change our own habits. We have to try, though, if it helps our children stay healthy. Did you make an appointment to take the children back for a check-up in six months?" asked Rosalie. "I made the appointment for Alisha before we left the clinic."

"I made appointments for Jorge and Luis. How about you Ginny?"



“I made appointments, but I have to do some work before we go again. Donny was afraid to get in the dentist chair. I told him that the dentist wouldn’t hurt him. Even Maggie told him that Dr. Lopez was nice, but it didn’t convince Donny.” Ginny continued, “Rosalie, you said the library has children’s books on going to the doctor. Do they have dentist books for kids?”

“I am sure they do. Let’s go to the library. We can look for the books. Plus, the children can pick out other books to borrow.”



Chapter

8

**How can I help
take care of my
children's teeth?**

Two weeks later, Ginny and Felicia knocked on Rosalie's door.

"Hi Rosalie! We're taking books back to the library. Do you and Alisha want to join us?" Ginny asked.

"I'd love to! Can we wait for a few minutes?" asked Rosalie. "I was just starting a page in Alisha's health log. I thought I should start adding information about her dental health, too."

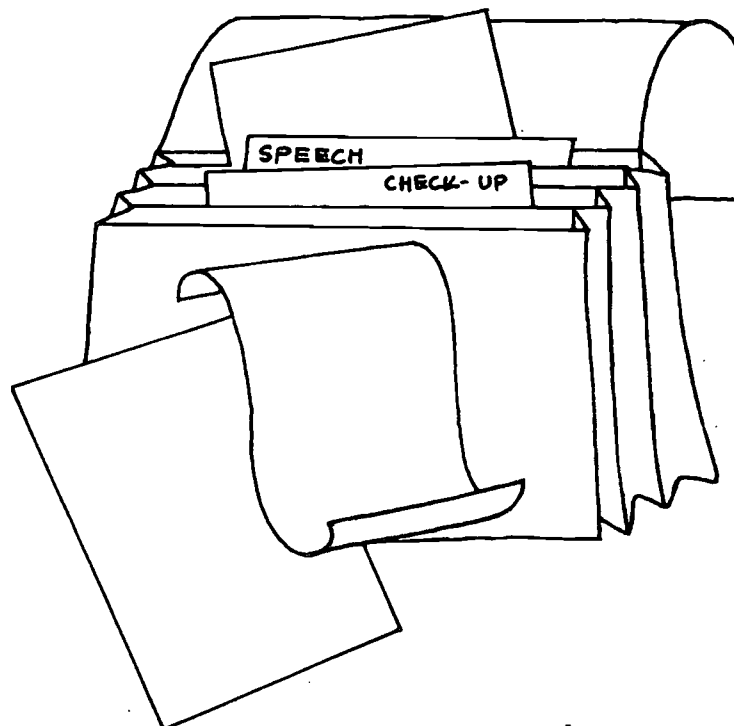
"What are you writing?" asked Felicia.

“I wrote the phone number for the dental clinic. Then, I wrote about her cavities and getting her teeth cleaned.” Rosalie added, “I can’t remember when she got her first teeth.”

Ginny said, “You can use your health log for dental records, too. I like that idea. I should do that for my kids. I can write down when Maggie’s tooth got knocked out.”

“Can I see how you are writing the information?” asked Felicia. “Then, I can do the same for my boys.”

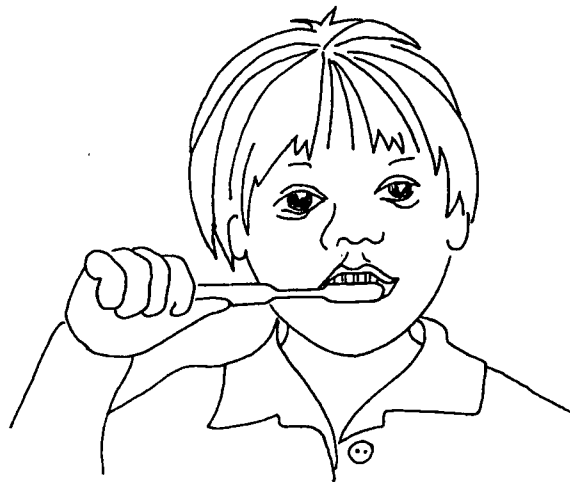
“Sure. You can both see what I’ve written,” said Rosalie. “How have you been doing with taking care of the children’s teeth? It’s hard to get into a new routine, but we are working on it!”



“We are working on it, too. Maggie is starting to remind me that she and Donny have to brush their teeth before bed,” Ginny laughed. “She really liked to brush her teeth when I let her buy a special toothbrush. I never noticed that you could buy a child-sized one.”

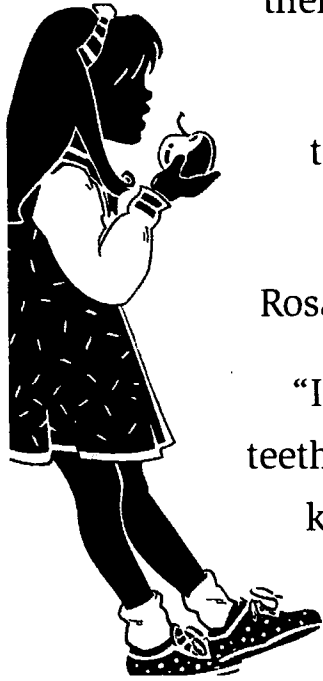
Felicia said, “Oh, yes. My boys enjoyed buying toothbrushes, too. Jorge likes to remind me about brushing our teeth. He shakes his finger and says, ‘Brush your teeth twice a day.’”

“We’re supposed to have them brush their teeth after they have sweet snacks, too,” added Ginny. “I’m trying to cut down on the sweets. I’ve been buying more fruit and vegetables.”



“I’ve been buying yogurt. Luckily, Alisha likes it, and it’s a healthy snack, too,” said Rosalie.

“I’m lucky,” added Felicia. “I’ve never eaten too many sweets. The boys usually eat fruit for their snacks.”



“Did you read the information the dentist gave us?” asked Ginny.

“No, not yet. Why?” asked Rosalie.

“I read about taking care of a baby’s teeth. Now, I feel guilty that I never knew all of this!”

“Don’t blame yourself for things you didn’t know, Ginny! We’re learning new things every day.”

“What did you learn?” asked Felicia.

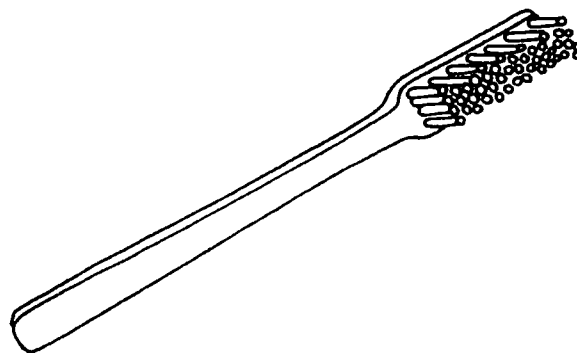
“The paper said you should clean your baby’s gums with a soft, damp cloth after you feed them. You can use a children’s soft toothbrush to keep their teeth clean when they start **teething.**”

“We’ll save that information for the next one of us who has a baby!” said Felicia.

“That won’t be me!” laughed Rosalie. “Are you ready to run to the library?”

“Do we have to run?” Ginny laughed.
“You’re going to run Felicia and me ragged!”

“Honey, we’ve got to run. How else can we keep up with all we need to know about raising healthy kids today!” Rosalie smiled broadly at her two friends. “Let’s go!”





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172

Rosalie's Neighborhood:



Let's Talk

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173

Rosalie's Neighborhood: Let's Talk



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1997

Design and Illustrations, Feld Design

174



Characters:

Rosalie Stevens

Alisha (granddaughter, age 5)

Robert (husband)

Shawna (daughter)

Felicia Gonzalez

Luis (son, age 5)

Jorge (son, age 6)

Ginny McMillan

Maggie (daughter, age 5)

Donny (son, age 4)

Bill (boyfriend)

Chapter

1

**Felicia
learns to help Jorge**

Ginny answered her telephone on the first ring. "Hello."

"Ginny? This is Felicia. Could you come to visit today? This rain has kept us inside. My boys want to play with some other children."

"I'd love to come!" Ginny said happily.
"Should I invite Rosalie, too?"

"Yes, please," replied Felicia. "I thought the children could help us make cookies."

"That sounds like fun. We'll be there soon!"

Ginny said good-bye and called Rosalie. They arrived at Felicia's apartment a short time later. Soon, the three women were helping the children make cookie dough. "Look how nicely these children are working together!" Rosalie exclaimed.

Just then, Alisha yelled, "Jorge! Stop grabbing the spoon!"

Jorge held on to the spoon and started pushing Alisha. Felicia said, "Jorge, stop! What have we been talking about?" Jorge stopped and ran to his mother. She hugged him. "That was very good, Jorge. I'm proud of you!" She smiled at her son and said, "Now, what do you say?"

"I'm sorry, Alisha."

"Okay, Jorge," Alisha answered. "Let's share."

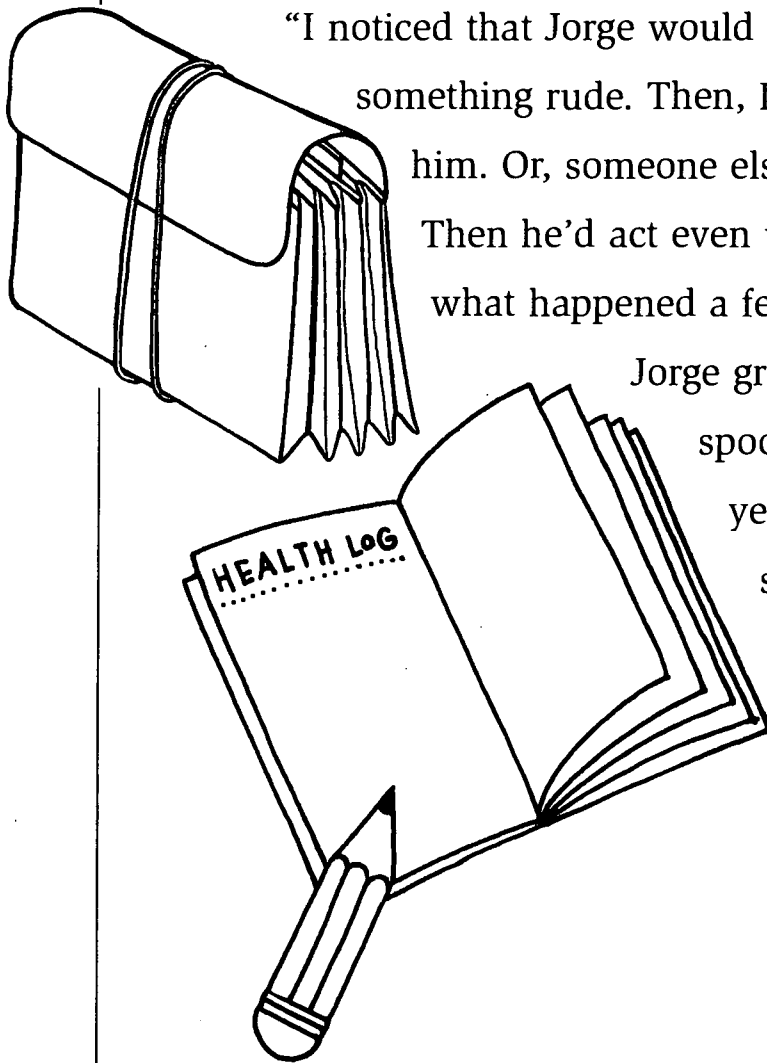
They all sighed in relief. Ginny asked, "How did you do that?"

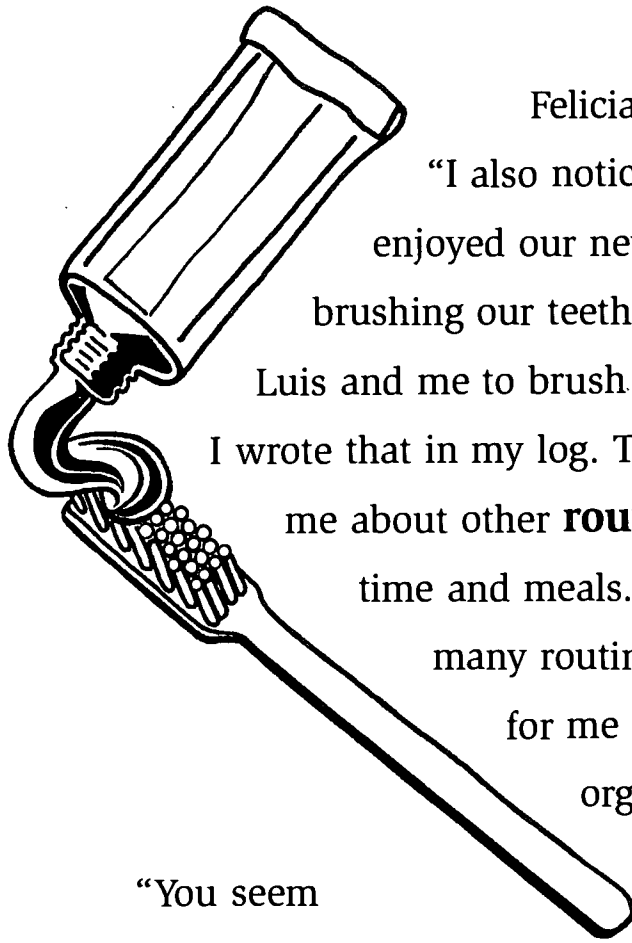
“I’m learning to **communicate** with my son,” Felicia said proudly. “Jorge and I visited Dr. Wheeler again at the **clinic**. Do you remember when he asked me to keep a record of times that Jorge was **aggressive**? I wrote everything I noticed in my **health log**.”

“What did you notice?”

“I noticed that Jorge would say or do something rude. Then, I would yell at him. Or, someone else would yell. Then he’d act even worse. It’s like what happened a few minutes ago.

Jorge grabbed the spoon. Alisha yelled. Jorge started pushing.”





Felicia continued,
“I also noticed that Jorge
enjoyed our new **routine** for
brushing our teeth. He reminds
Luis and me to brush our teeth, too.
I wrote that in my log. The doctor asked
me about other **routines** like bed
time and meals. I don’t have
many routines. It’s hard
for me to stay
organized.”

“You seem
organized to me,” Ginny said.

“Well, I keep my apartment neat. I keep my
children clean. But, we don’t eat at the same
time each day. And, the children don’t have a
regular bedtime. They go to sleep when they
want.”

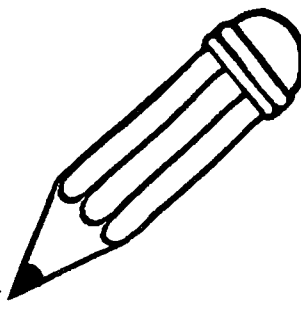
Ginny said. "My kids go to bed at 8 p.m. every night. I need time to myself!"

"Does a regular bedtime really make that much difference?" Rosalie asked

"Dr. Wheeler said some children, like Jorge, may need routines. The routines help them feel secure. He also said that I should spend more time talking with and listening to Jorge. The doctor thought that more **communication** might help Jorge learn to control his **behavior**."

"Wait a minute," said Ginny. "You talk to Jorge."

“I thought so, too,” said Felicia. “The doctor gave me some information. He said there’s a difference between ‘talking at’ and ‘talking with’ children. Many people don’t know the difference.”

communicate 

Chapter

2

Do you listen to your children?

“Communicating with our children sounds important,” said Rosalie. “I want to know more about this.”

“Me, too,” added Ginny.

Felicia found the information and handed it to Ginny. “I’m learning how to use some of the ideas with Jorge. I can tell you about some of it. But, you could borrow the papers, too.”



“Thanks, but I like to hear new ideas first,” said Ginny. “I learn a lot from listening.”

Felicia nodded. “Listening is an important part of **communication**. We’ve learned a lot from listening to each other.”

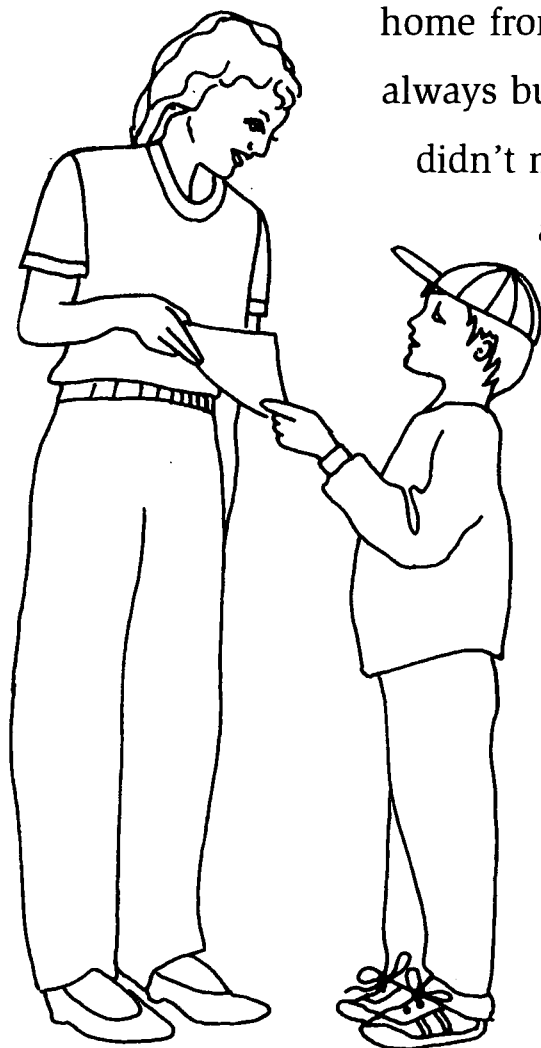
“That’s true! But, what does listening to each other have to do with our children?” asked Ginny.

“I don’t listen to you the same way I listen to Alisha,” Rosalie said. “I pay attention when I listen to you. I think about what you’re saying. Then, I think of questions to ask you. But, I don’t always pay attention to Alisha when she talks. You know how much she talks! And, sometimes she doesn’t seem to care if I listen. Other times, she’ll say, ‘Grandma, are you listening to me?’”

They laughed. Felicia said, “Jorge talks a lot, too. I wasn’t really listening to him most of the time. I’d think of other things and just nod my head as he talked. The doctor suggested that I take time each day to really listen to what Jorge is telling me.”

“How do you really listen to a child?” Ginny asked.

“You need to make time to listen. Jorge always wants to talk to me as soon as he comes home from school. I am always busy then, so I didn’t make time to pay attention.”

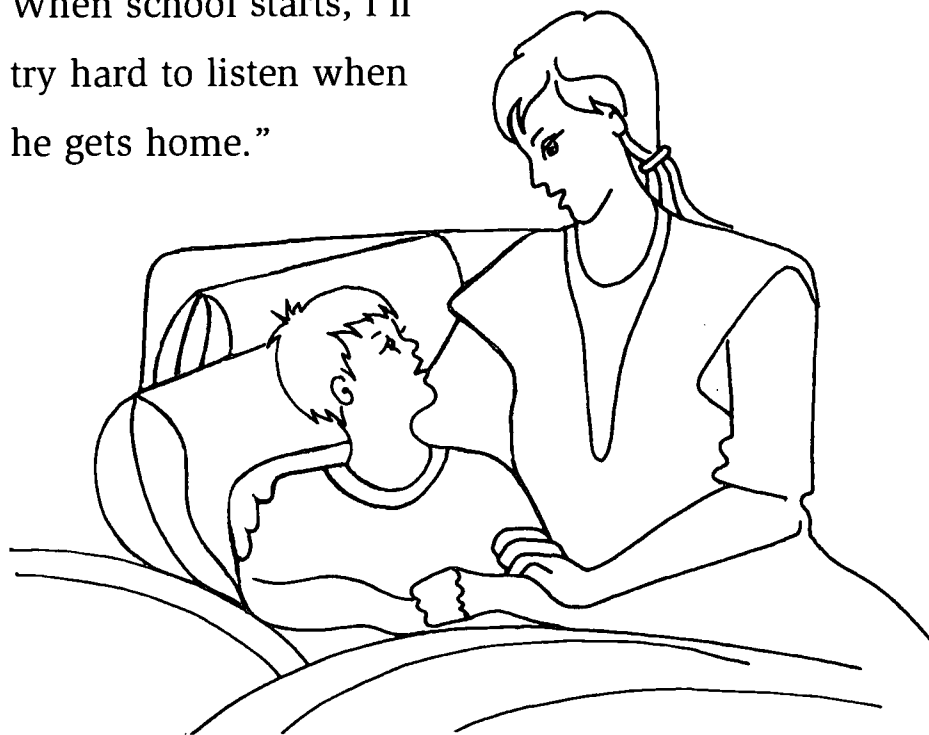


“Sometimes it’s hard to make time, especially when you have two children,” Ginny added.

“Or five,” laughed Rosalie. “They must have given up on me and just talked to each other. Maybe I can do better with Alisha. The best time for me to listen is at the dinner table. We always try to eat together. That way, I can get Robert involved in communicating, too.”

“The best time for me would be at bedtime,” added Ginny. “When is the best time to talk with Jorge?”

“Right now, we’re trying to talk when we get up in the morning. Jorge and I get up earlier than Luis. So, it’s just the two of us for a little while. When school starts, I’ll try hard to listen when he gets home.”



Ginny asked, "Should we be doing other things, too?"

"I think we'd want to ask them questions, too," said Rosalie. "That would show that we were really listening."

"That's a suggestion in the paper," said Felicia. "It also said we should give our children a chance to ask us questions."

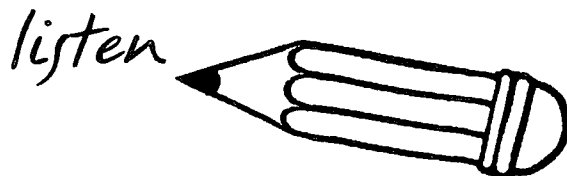
"They ask questions all of the time!" Ginny replied.

"That's true. We answer their questions, too. But, sometimes we just talk on and on. We don't let our children say anything," Felicia continued. "One idea that I liked was to pause after saying something. You can stop at the end of an idea or a sentence. Give your children time to say something or ask a question. The paper said to be patient. It might seem like hours before they speak, but usually they will. In time, you end up with a conversation!"

“I’ll try that,” Ginny said. “What should you do if you don’t understand what they are saying? Sometimes my kids just mumble.”

“Be honest,” Felicia replied “Ask them to repeat it, or ask what they meant. Sometimes you just have to say you don’t understand.”

The women were quiet for a minute. They all seemed to be thinking about everything they were learning.



Chapter

3

**What do your children
say to you?**

Ginny said, "Okay. I can make time to listen to my kids. I can ask them questions. And, I can give them a chance to ask questions. Is there anything else I should do?"

"Let's see. The paper said to try to understand what your children are really saying to you. They like to test you."

"I'm not sure what you mean," Ginny said.

“Well, sometimes Jorge will say something that I don’t agree with. He’ll say something that I know is wrong. I’m learning that children see and hear many things on TV, at school, in the neighborhood, and even at home. They’re so curious. Then, they come to you and repeat what they’ve seen or heard. One day, Jorge said a bad word to me. I was very angry, so I punished him. Now, I wish I had talked to him. I could have explained that some words are not polite. I’d tell him that it hurts my feelings when he says those words. I wouldn’t punish him.”



Ginny asked, “Would that teach him not to say bad words?”

“I hope so,” Felicia added. “The information said to expect children to be polite to adults. And, we should be polite to them. That way, we can be good **role models** for our children. It also says that we shouldn’t treat children like equals. After all, we’re the parents, and they’re the children.”

“So, we should treat our children politely. But, we should remember that we’re the parents. We’re not equals,” Ginny said.

“Right. This can help us **discipline** our children without seeming mean or unreasonable. That’s what I’ve been doing with Jorge. I didn’t yell at him when he pushed Alisha. I tried to keep my voice calm. I wanted to be polite, so I wouldn’t embarrass him. But, we’ve talked about how unhappy his **behavior** makes me.”

Felicia continued, “That’s what I meant when I said, ‘What have we talked about?’ I didn’t have to say anything else. Then, I praised him for listening to me.”

“That really worked!” Ginny exclaimed.

The women noticed Alisha and Jorge standing in the kitchen. “What do you two want?” asked Rosalie.

“We want some cookies, please.”

Jorge added, “Can we go outside? The rain stopped!”

“It has? We’ve been so busy, I hadn’t noticed,” Ginny said.

“Look at the time. Thanks for having us over today,” Rosalie added. “We should get home. By the way, can I borrow this information? I see some things I want to read about.”

“Sure. The next time we visit, you can tell us what you learned!”

“As usual, I learn something new about raising children every time we’re together. We’re just fools for learning,” Rosalie smiled.

“At least we’re fools for something good!” Ginny added. They laughed and walked into the sunshine.

behavior 

Chapter

4

Milestones for language development

A week later, Felicia saw Rosalie at the grocery store. “Hello! I’m glad I ran into you. When are we going to get together again?”

“Let’s get together now,” Rosalie answered. “Do you want to walk home with me?”

“I’d like that.” Felicia smiled. “Jorge! Luis! We’re going to Miss Rosalie’s house for a visit.” The boys ran to their mother. Soon, they were all walking toward Rosalie’s home.

Rosalie said, "I finished reading the papers I borrowed. There was a lot of information about how children learn language."



"I know. What did you learn?" asked Felicia.

"For one thing, children develop language skills at different rates. I could've guessed that from my own

experience. Some of my children didn't seem interested in talking. I think others, like Alisha here, started talking before they were born!"

Rosalie and Felicia laughed.

They reached Rosalie's street. Ginny was sitting on the front steps watching Maggie and Donny. "Ginny! Look who's here. Want to join us?" asked Rosalie.

"Sure! Why don't we just sit out here?"

Rosalie and Felicia put their groceries away and joined Ginny on the steps. "I've been telling Felicia that I finished reading the papers I borrowed."

"She read that children learn language at different times," added Felicia. "I can see that in my children. Jorge started to talk when he was very young. Luis still doesn't talk very much."



Ginny thought a moment. “Maggie talks a lot. I figure Donny doesn’t want to talk much because he stutters. Or, maybe he’s not ready to talk.”

“Well, he should be talking now,” Rosalie said. “He’s almost four years old. I’m going to get the checklist that was in those papers. It lists things children should be able to do at different ages.”

“I thought you just said that kids develop at different times?” Ginny asked.

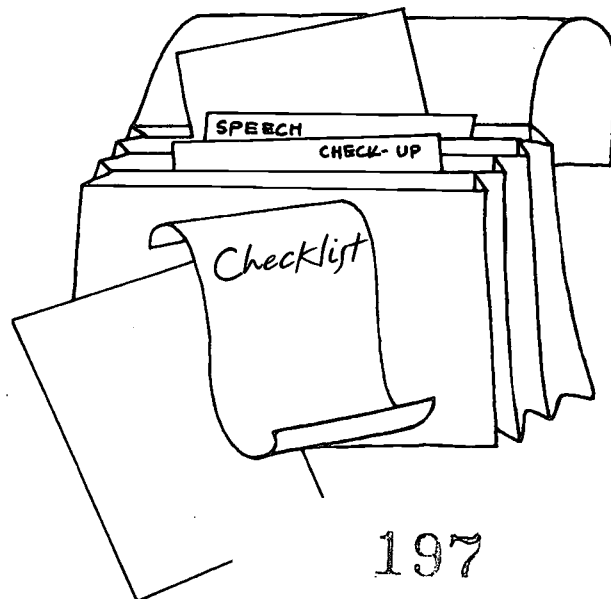
“Yes, but doctors know that most children can do things at certain ages. It’s okay if they do them a little earlier or later than most children. But, it might be a problem if they are really late,” said Rosalie. “I’ll be right back.”

Ginny smiled at Felicia. “I’m so happy to have you and Rosalie to talk to,” Ginny said. “We’ve really learned a lot together. Plus, it’s easier for me to talk to doctors at the **clinic** now. I have a better idea of what to ask.”

Rosalie came back. “Let’s see. The checklist gives some **milestones** for each age.”

“Milestones?” Felicia and Ginny asked.

“Yes. They’re things that children should be able to do at different ages. Let me give you an example. Donny is about four years old.” Rosalie said, “He should be able to talk about things he does every day. He should also be able to sing a song and speak in sentences that have four or more words. People outside of the family should be able to understand him most of the time. Can Donny do those things?”



Ginny thought for a while. “He stutters but not so much that you can’t understand him. It’s just hard to wait for him to get the words out.” Ginny continued, “He doesn’t say much, though. I guess I should start paying attention to that. Now, I’m getting worried.”

“Don’t worry too much. Why don’t you write things you notice in your **health log**? That really worked for me,” Felicia said.

“That’s a good idea,” Ginny replied. “I’ll try it. Would the doctors at the clinic know about language development?”



Rosalie said, “They know a lot. They’ll also **refer** you to a **speech-language pathologist** if Donny has a language **disorder**.”

“Slow down, Rosalie!” Ginny said. “A speech-language what?”

Rosalie laughed. “I just learned that word and wanted to use it! A speech-language pathologist is a specialist who knows how children learn speech and language. These specialists can give you ideas on helping your child learn to speak more clearly.”

“Do you have a checklist for older children?” asked Felicia.

“Here’s one for five-year-olds. They should be able to tell a story and not have it wander off in different directions. They also should use sentences that give lots of details. So, they might say ‘I have two red balls at home’ instead of saying ‘I have a ball’. They should be able to speak in short paragraphs. And, they should speak fluently. That means that they talk without a lot of pauses or breaks.”

“Luis may not be able to do those things,” Felicia worried.

“Maybe you should write about that in his health log,” Ginny said.

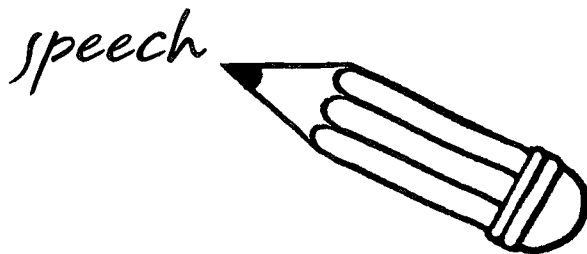



“That’s a good idea,” Rosalie added. “We shouldn’t expect children to say or do things too early. That can cause problems if they’re not ready or able to speak. That goes for other things, too, like walking or being potty-trained.”

“Oh, dear!” Ginny said suddenly. “I didn’t realize how long we’ve been talking!”

Rosalie said, “I have other things to tell you about helping our children learn language skills. Do you want to meet again on Saturday? We could go to the park.”

“That’s a great idea!” Felicia and Ginny said.





Chapter

5

**How can we help
our children
develop language
skills?**

Rosalie greeted Felicia and her children. She and Ginny had just arrived at the park. Their children ran off to join Jorge and Luis on the swings. The women sat on a bench close by.

Rosalie looked at her friends. “Did you know that children learn as much before their fourth birthdays as they learn between the ages of four and eighteen? That means we’re our children’s first teachers.”

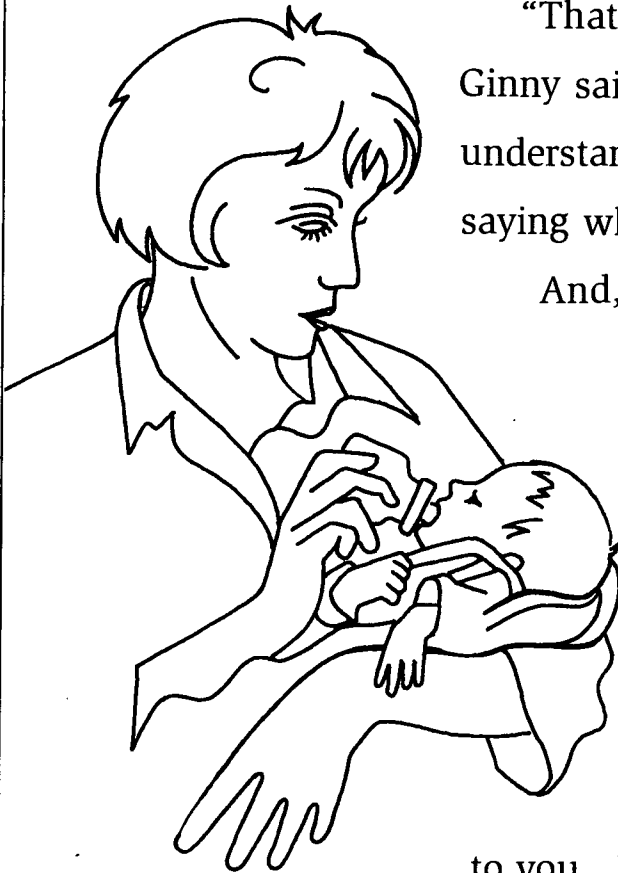
“How can I be a teacher for my children. I don’t know enough to be a teacher!”

“Right,” added Ginny. “I haven’t even finished high school.”

“You aren’t giving yourself enough credit,” Rosalie continued. “We know things from our experiences. And, we’ve found out that we can learn more every day. We are three very curious women!”

They laughed, and Felicia continued. “So, we should trust what we know. Then, we need to be curious about learning more. That way we can learn better ways to help our children. Is that what you mean?”

“Exactly!” Rosalie smiled and added, “Our babies are curious, too. We need to help them learn about their world. The information from the clinic says we should talk to our babies from the day they’re born!”



“That seems silly,”
Ginny said. “They don’t
understand what you’re
saying when they’re babies.

And, they can’t talk
back to you.”

“But, they
need to hear the
sound of your
voice,” Rosalie
replied. “Babies
really do talk

to you. You just need to
listen carefully. Don’t you remember Maggie and
Donny crying when they were hungry, or wet, or
tired? Alisha cried when she just wanted some
attention, too. Then, she would smile and coo.”

Ginny sighed. “I do remember that. I guess I
never thought about it as talking.”

Felicia said, "I sang to my babies. Jorge and Luis loved that! It made me feel closer to them."

"You can also tell babies what you're doing," Rosalie added. "You can even say things that sound silly. For example, you can say, 'We're getting a clean diaper now. Doesn't that feel good?'"

"I don't remember talking to my babies. But, I did start talking to them when they were a little older. It was before they could talk much," Ginny said. "I would ask Maggie if she wanted juice. She wouldn't say anything. But, I could tell she wanted it because she would wave her arms and point."



“She answered you,” Felicia said. “My boys did the same thing. It’s amazing when you think about it. They couldn’t talk, but they understood you.”

Rosalie said, “I remember walking Alisha around the house. I would name everything we saw. ‘Here’s the lamp. Let’s turn the light switch on and off. Oh, look. Here’s a picture of your mama.’ Maybe that’s why she has so many words to use now.”

“That makes sense,” Ginny said. “I’ve been trying to talk more with Maggie and Donny. They love *Sesame Street*, so I’ve been watching it with them. I ask them about the characters. They love to explain it to me.”

“That’s a good idea. I think of TV as a free baby-sitter,” Felicia said. “I never thought about watching with my boys. I’m going to try that.”

Rosalie smiled. “Let’s see what other things we can do. The papers also mention playing finger games like ‘Eensy Weensy Spider’ and reciting nursery rhymes.”

Ginny said, “I used to love that spider song! My mom used to read nursery rhymes to me.”

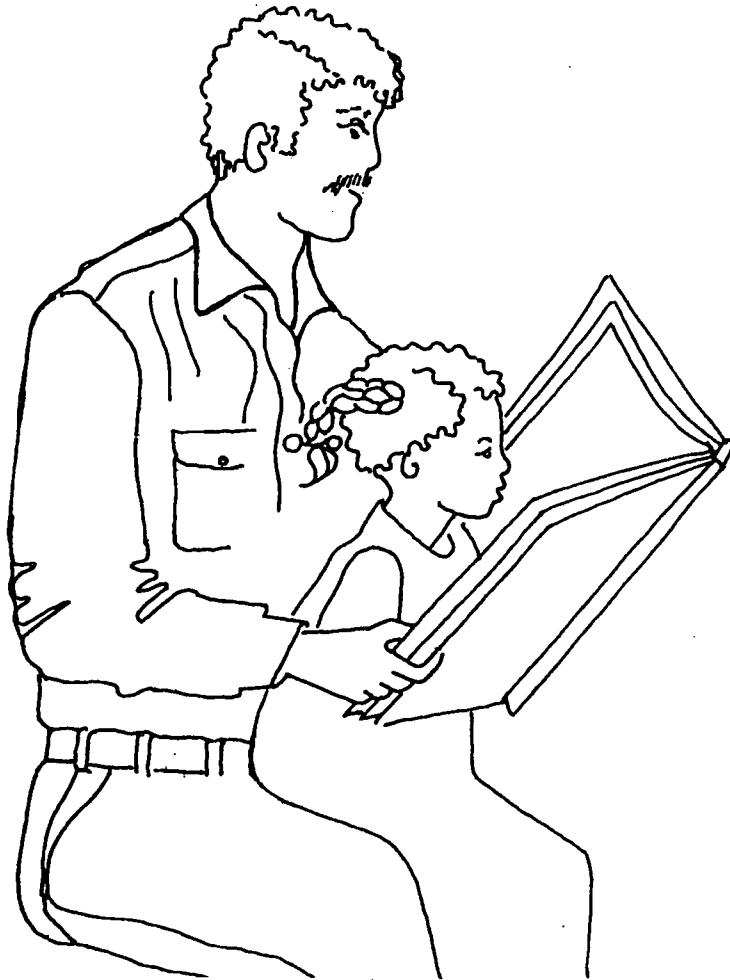
Felicia looked puzzled. “I’m not sure what you mean by nursery rhymes.”

Ginny replied, “Nursery rhymes are little poems for children. Let’s see if I can remember. One of them started ‘Hey diddle diddle, the cat and the fiddle. The cow jumped over the moon.’”

Felicia added, "I also tell my children stories about our family. They like to hear about our relatives in Guatemala."

"Robert and I tell Alisha stories about the family. Ginny does that, too," added Rosalie. "Alisha also likes us to read stories. I asked the librarian to help me find stories about animals. Alish wants us to read them all!"

"Well, that will keep you busy!" Ginny said. "I know I should read to my kids. But, I don't feel really comfortable reading out loud."



“Neither do I,” added Felicia. “It’s hard if the book is in English.”

“I’ve seen some books that only have pictures. You just make up a story. Or, you can ask your children questions about the pictures. Then, they can make up the story,” Rosalie said. “I’ll show you where they are at the library if you want.”

“Thanks, Rosalie. You really spend a lot of time at the library, don’t you?” Felicia said.

“It’s free. And, Alisha loves to be there.”



“Well, Rosalie, I have a lot of new ideas. But, what else can we do?” asked Ginny.

“I have two more things for you to think about,” Rosalie replied. “You can help children develop language by having them draw pictures. Drawing helps children develop skills they need in writing. You can talk to them about the picture. Ask what they’ve drawn. Then, you can write what they tell you on the drawing. Kids love that. And, it helps them see the connection between talking and writing.”

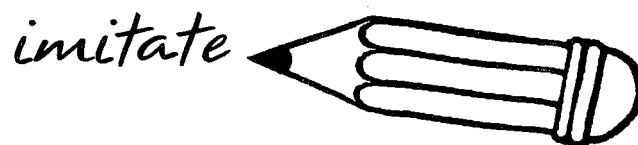
“That sounds like fun!” Felicia said.

“The last thing sounds really important. It says that children learn by watching their parents. They **imitate** things that we do,” Rosalie said. “So, we should let our children see us reading and writing. Then, they will want to imitate us. That’s another way for us to be role models for our children.”

“Being a parent is a big responsibility!” Felicia said.

“I believe that more every time I learn something new,” added Ginny.

“We’re responsible adults, right?” asked Rosalie. “We can handle it!”



Chapter

6

Luis has a hearing problem

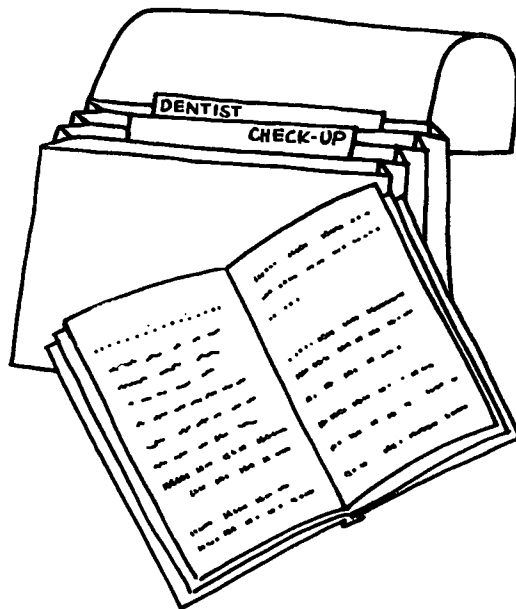
Ginny walked into the health clinic as Felicia and Luis were leaving. “Hi, Felicia. What are you doing here?” asked Ginny.

“I just met with the doctor. I may have good news about Luis!” Felicia said happily. “I wish I could talk now, but I don’t have time.”

“Okay. I’ll call you later,” Ginny said. “Maybe I’ll have good news about Donny’s **stuttering**, too.”

Ginny called Felicia that evening. “So, what’s the good news?”

Felicia replied, “Well, I started writing about Luis in his health log. I wrote about his speech — the words and sentences he used. I found something strange!”



“What did you find?” Ginny said.

“I noticed that he didn’t seem to know a lot of words. He would say, ‘I saw a big uh... It was something big’. He didn’t seem to know the words. I also noticed that he didn’t always answer me. At first, I thought he was ignoring me. But then, I noticed that Luis always wanted the sound on the TV very loud. And, I realized that I repeat things to him.”

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“What does that mean?” asked Ginny.

“He has trouble hearing!” said Felicia.

“That’s the good news?”

“No. The good news is that his hearing loss is temporary.”

“What does that mean?” Ginny asked.

“Luis’s hearing problem can be fixed,” Felicia replied. “Other hearing problems are permanent. They usually can’t be fixed. For example, some people lose their hearing after they are exposed to loud noises.”

“I hear loud noises all of the time. How can you avoid that?”

“It’s hard to avoid some loud noises. But, you could stay away from loud music. All you have to do is turn it down.”

“That’s true. But, I like to play my music loud. The kids like loud music, too,” Ginny replied.

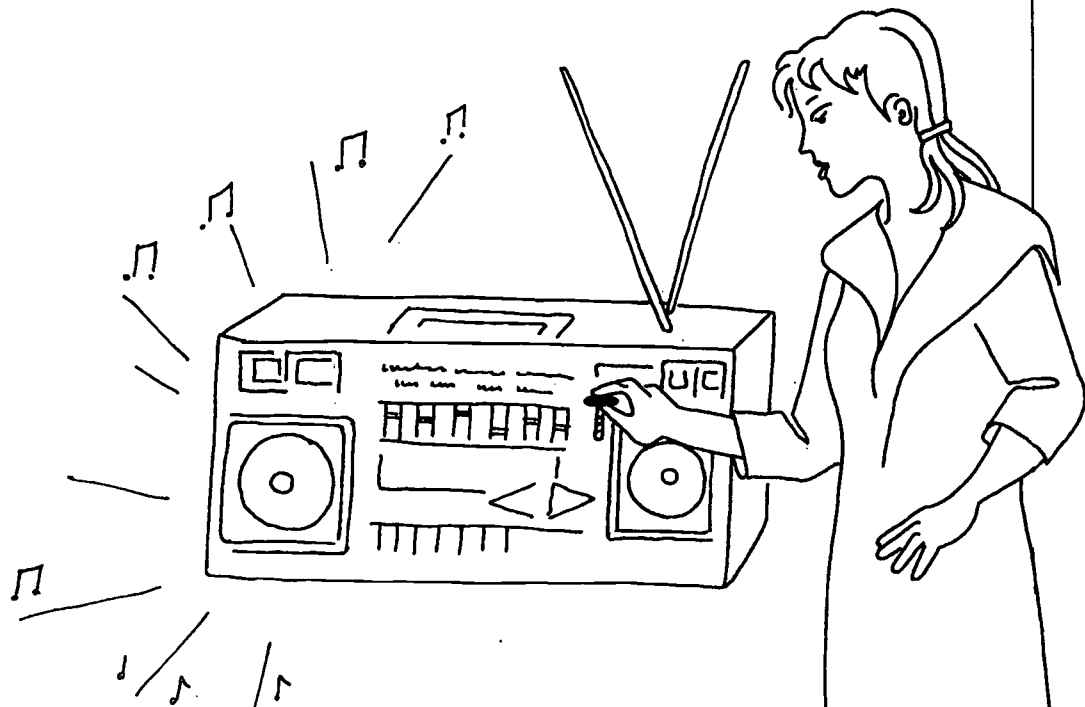
“They may like it now,” Felicia said. “But, they may have permanent hearing loss by the time they are teenagers. Then, it’s too late!”

“Can’t people use hearing aids?”

“Sure. They can also learn to use sign language and read lips,” Felicia answered.

“But, it’s better to prevent permanent hearing loss if you can.”

“Okay. I’ll turn down my stereo,” Ginny said. “Now, what about Luis? You said that his hearing loss is temporary, right?”



“Right. The doctor looked at my log,” Felicia continued. “Then, he asked me questions about illnesses that Luis has had. I’d never told the doctor about Luis’s ear **infections**. He hasn’t had one for a while, so it slipped my mind,” Felicia said. “The doctor said that ear infections can cause fluid to build up in the ear canal.”

Ginny asked, “How can that be fixed?”

Felicia went on. “The doctor made an **appointment** to take Luis to an **audiologist** at the hospital. There is a special clinic for hearing and speech problems.”

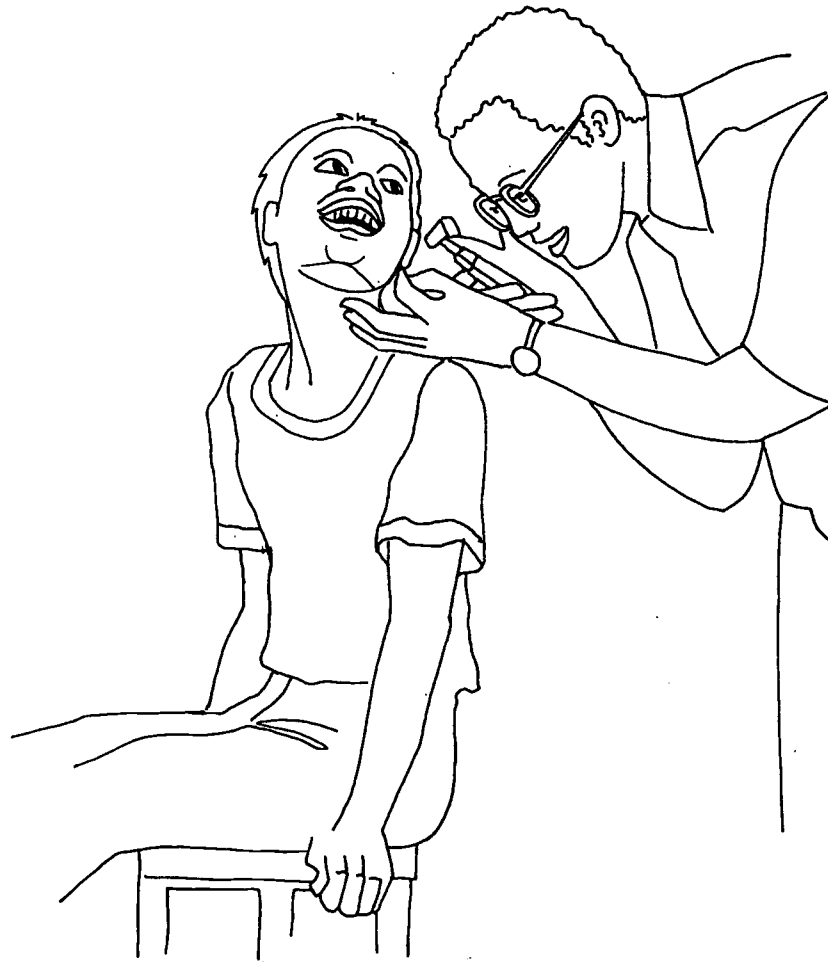
“Oh. What’s an audiologist?”

“The audiologist is a specialist who knows about hearing. The audiologist told me that Luis does have fluid in his ears. He said that children can get fluid in their ears from ear infections, colds, or allergies. Other children have hearing problems because they have so much wax in their ears. These problems can be solved.”

“That’s good news!” Ginny said.

“Yes, it is. I feel badly though. We aren’t sure how long Luis has had trouble hearing.”

“Is that bad?” asked Ginny.



“I don’t think it’s good,” Felicia replied.

“It might explain why he doesn’t talk very much. It might also explain why he doesn’t seem to know a lot of words.”

“Do you think he’ll learn to speak more after his ears are better?”

“The speech-language pathologist thinks Luis’s language will start to develop when he can hear better. We have to get rid of the fluid first. First, we’ll try **antibiotics**. He may have surgery if the antibiotics don’t work.”

“That would scare me!” exclaimed Ginny.

“Surgery would scare me, too. But, this is surgery that would help Luis hear better,” Felicia said. “The doctors would put tubes in his ears to drain the fluid. That’s all.”

“That doesn’t sound too bad,” Ginny replied.

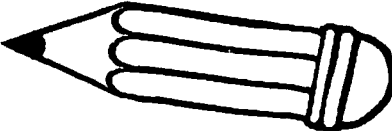
“No. It doesn’t sound too bad,” Felicia sighed happily. “Then, we can work on his language development. The specialist told me some things to do with Luis. We’ll sing songs, tell stories, and read. I’ll ask questions and help him learn the names of things in our house and the neighborhood. We have a lot to do before Luis starts kindergarten next month!”

“Let me know if I can help you,” Ginny offered.

“Thank you, Ginny. You’re a good friend!”

Ginny smiled. "I'm glad that your visit to the clinic was a success. I have an appointment for Donny to see a speech-language pathologist next week. The doctor said that the information I wrote in my health log was helpful. He decided that Donny should have some tests done at the speech and hearing clinic. Come over next Thursday afternoon. I'll tell you what happened."

"That sounds good. I'll see you then!"

infection 

Chapter

7

What can I do if my child has a speech problem?

Felicia smiled when she saw Ginny and Rosalie sitting on the steps, “I want to hear what happened at the speech and hearing clinic today,” Felicia said.

Ginny replied, “I took my health log to the speech and hearing clinic. The speech-language pathologist there asked me questions about Donny’s stuttering. She also asked about the kinds of language Donny uses. That’s what I had been writing about in the log. So, I was ready to answer her questions.”

“Did you and the pathologist decide what to do to help Donny?” asked Rosalie.

“We’re working on it,” Ginny said. “Donny has a slight problem with stuttering. The pathologist said that stuttering in a child Donny’s age is not a big problem. Lots of three- and four-year-old children stutter. They just get excited and stumble over their words. It’s a little worse with Donny because he gets angry with himself when he stutters.”

“What can you do to help Donny?”



“First, I have to be patient. I get frustrated waiting for him to get the words out. I guess Donny can tell. This makes it harder for him to speak. He stutters even more. Then, he gets frustrated and angry with himself.”

“That poor child,” Rosalie sighed.

Ginny said, “Donny doesn’t need sympathy. He needs us to help him with this problem. One thing we can do is help him speak slower and relax. His stuttering is worse when he gets excited. We can tell him to take his time. We’ll wait.”

“I’m sure we can all help him with that,” Felicia said. “What else should we do?”

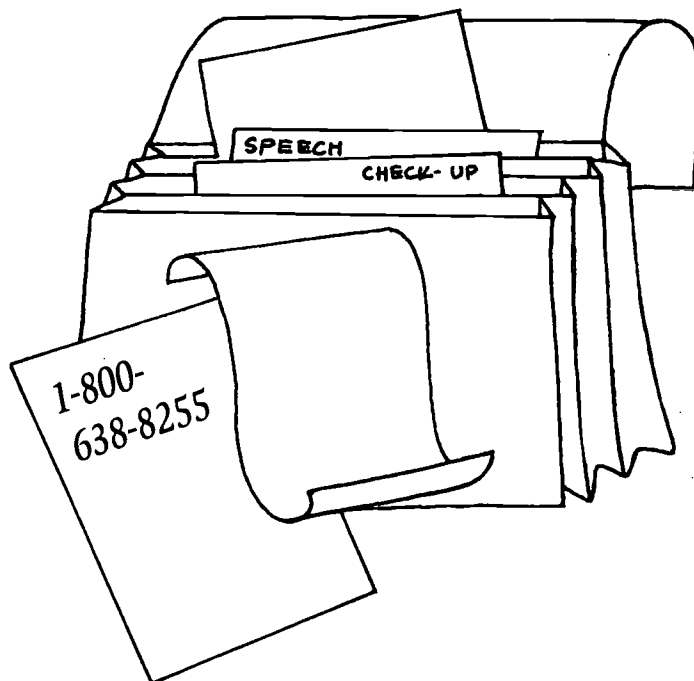
“The speech teacher said to have him start over with the word he stuttered. She noticed that Donny has trouble with the **consonants** ‘p’, ‘r’, and ‘k’. Children who stutter have the most trouble with certain letters.”

Ginny continued, “She also suggested that we have him listen to a word or phrase. Then, use a tape recorder to tape him saying it. That way, he can listen to himself talk.”

“Did you get any information from the clinic about speech disorders?” asked Rosalie.

“Yes. And, I found a telephone number on one of the papers. It’s a toll-free 800 number for the American Speech-Language-Hearing Association. Here it is — **800-638-8255**. I called and they sent me free information,” Ginny replied.

“What does the information tell you?”



Ginny looked at the materials. “Stuttering is one of the most well-known speech disorders. But, **articulation disorders** are the most common ones. Those are problems with the way children say words. For example, some children change or leave out sounds. They might say ‘wabbit’ for rabbit or ‘cool’ for school.”

“Don’t children stop doing that as they get older?” asked Rosalie.

“Yes. Most kids outgrow it, but some don’t. Then, they should see a speech-language pathologist who can help them learn to speak more clearly.”

“It sounds as though Donny is getting the help he needs to overcome his stuttering,” Rosalie said.



“It’s not just his stuttering,” Ginny said. “The pathologist told me that Donny’s language development seems **delayed**, too. He isn’t learning words and how to communicate as quickly as other kids his age.”

“Now, what could have caused that?” asked Rosalie.

“We’re not sure,” Ginny answered. “She said Donny could be self-conscious about his stuttering. Stress can cause delayed language, too. Those two seem to be the most likely causes. We ruled out fetal alcohol syndrome.”

“What’s that?” asked Felicia.

“Babies can be born with fetal alcohol syndrome if their mothers drink a lot of alcohol. Those poor babies have all kinds of health problems, including delayed language,” Ginny added.

“Can you do anything to help Donny develop his language?” Felicia asked. “Can you use the same ideas I’m using to help Luis?”

“Yes. Plus, Bill and I play language games with him. So far, Donny really likes them.”

“Sounds as though you have your work — I mean, your play — cut out for you!” Rosalie said. “You’re lucky that you could get Donny the help he needs.”

“We’re lucky that we know to go to the health clinic. And, we know to ask questions. And, it was lucky that I met Rosalie and you, too,” Felicia added. “We’ve helped each other learn important information about our children’s health. Now, we know how to get the help we need.”

“That is true, Felicia. I don’t know what would have happened if we hadn’t started asking Rosalie questions!” Ginny added. “Having someone like Rosalie to ask would sure help other mothers in the same boat we were in.”

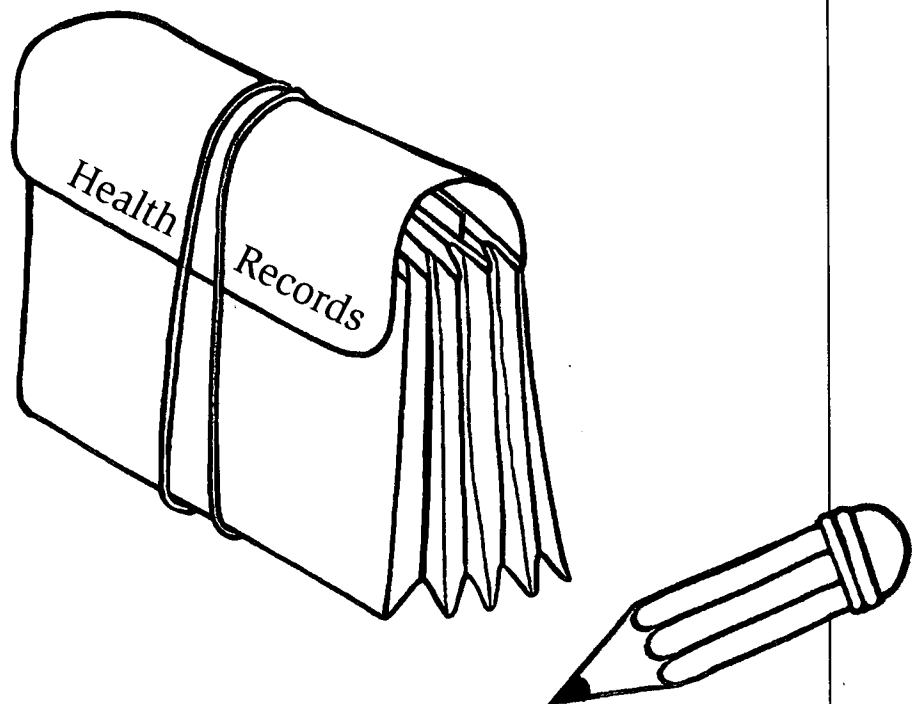
“What boat?” asked Felicia.

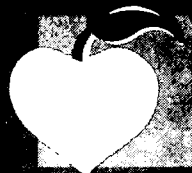
“It’s an expression that means that we’re in the same situation. We’re in the same boat. Mothers need a lot of information to raise healthy children. We don’t always know where to get it. Of course, we have Rosalie.”

“And, now we have other places to get information, too,” Rosalie added. “That 800 number, for example. And, the doctors and specialists at the clinics.”



Ginny said, "I guess that means that we're steering our boat in the right direction!" The three friends smiled at each other. They knew that their adventure in learning about their children's health was just beginning. It was bound to be a wonderful trip!



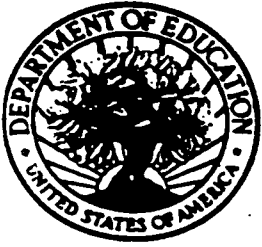


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230

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