



Understanding the Early Years (UEY) *Making research make sense* Volume 1, Issue One • November 2006

## Children who attend part-time preschool programs have higher EDI scores than those who don't

From Early Development Instrument (EDI) Preliminary Findings

UEY Niagara Region research project 2006 EDI results

While the majority of children in the Niagara Region are experiencing average to excellent developmental outcomes, nearly a quarter of them are not. Twenty-three point one percent (23.10%) of senior kindergarten (SK) children participating in the most recent EDI scored as 'At Risk or Vulnerable' in overall readiness to learn at school.

Children in this group tend to exhibit a number of areas of challenge. The following areas have been identified and are presented in order of prevalence:

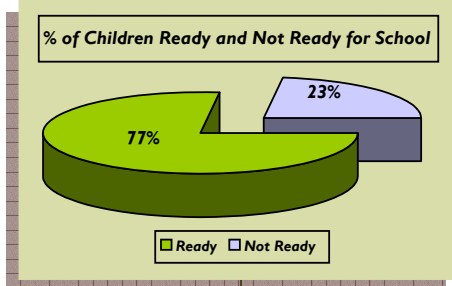
- Very little general knowledge and difficulty with the language the family speaks at home
- Gross (i.e. walking) and fine (i.e. holding a pencil) motor skills
- Hyperactive behaviours such as restlessness, distractibility, impulsivity, fidgeting, and difficulty settling into activities
- Difficulty working neatly and/or independently, solving problems, following class routines, and transitioning during changes in their schedules
- Helping behaviours, meaning they did not help someone who was hurt, sick, or upset and did not invite others to join in games or activities
- Social skills and low self-confidence and rarely playing with various children or interacting cooperatively

- Problems identifying letters or attaching sounds to them, problems rhyming, problems with directionality of writing, and difficulty writing their own names
- Being unprepared for school because they were dressed inappropriately, arrived late, and were hungry or tired
- Aggression such as getting into physical fights, kicking or biting others, taking other people's things and/or were disobedient or had temper tantrums

By the spring of 2007, the EDI data will be mapped by municipality and neighbourhood, along with socioeconomic variables and community resources. This will provide the overall context regarding how children in Niagara aged 0-5 are doing.

This information can assist with planning, decision-making, resource allocation, professional development endeavours, and program and service development.

To receive UEY research updates or host a presentation, please contact Glory Ressler, UEY Coordinator at the ECCDC at 905•646•7311, or gressler@eccdc.org.



## Childhood obesity is on the rise in the U.S. & Canada, including Niagara

From Heart Niagara's 2006 Annual General Meeting

Presentation by Dr. Goutham Rao, Clinical Director, Weight Management and Wellness Center, Children's Hospital of Pittsburgh and Associate Professor of Pediatrics, University of Pittsburgh School of Medicine

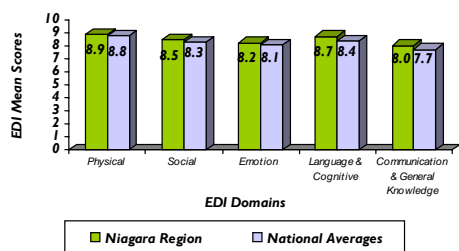
The 'big five' causes of the recent increases in obesity have been identified as:

- one fast food consumption (more than 2 times per week);
- two sweetened beverages (pops, juices, etc.);



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Niagara Region 2006: Comparison of Children's Mean Scores and the National Average





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- three** not eating together regularly as a family;
- four** amount of sedentary time spent in front of various types of media (TV, Internet, video games, iPod); and
- five** lack of habitual daily activity such as walking to school or daily outdoor play (organized sports are not as helpful as some parents believe, as children's participation in them is too sporadic).



In terms of treatment, dieting and medication have very limited results with high costs and numerous side effects. A new area of study that is attempting to address this growing concern is called the 'Built Environment'. It is a more holistic, realistic, and cost-effective strategy, which suggests that the solution lies in the following aspects of the built environment:

- schools/daycares, cities, and workplaces (policies, practices, playgrounds, walking trails, etc.);
- community-based practices (healthy eating and exercise initiatives, etc.); and
- community food environment (restaurants, stores, markets, etc.).

The ECCDC website includes an extensive menu plan developed by Public Health Dietitians. You can find it at [www.eccdc.org/cc-programs/foodcalendar/php](http://www.eccdc.org/cc-programs/foodcalendar/php). The ECCDC also provides professional development opportunities and resources for outside play. Check out the current edition of *Esteem* magazine or contact us for more information.

## One in five children suffers a mental health challenge

From Niagara Child & Youth Services,  
2006 Annual General Meeting

Presentation on Parenting and Child Mental Health by Dr. Allan Ralph, Consulting Clinical Psychologist at Triple P [Positive Parenting Program] and Associate Professor of Clinical Psychology at the University of Queensland, Australia

Evidence suggests parenting practices have a pervasive influence on all aspects of child development (Collins et al, 2000), and that offering programs and supports for parents is an avenue that should be pursued in order to improve outcomes for children. Parenting interventions are among the most powerful and cost-effective supports that can be provided (ibid).

Triple P has done numerous studies on the impact of its parenting programs ([www.pfsc.uq.edu.au](http://www.pfsc.uq.edu.au) and [www.triplep.net](http://www.triplep.net)) and results show that utilizing evidence-based, community parenting programs is a cost-effective and impactful strategy.

The following key assumptions underpin their successful program:

- We must increase the capacity of the whole community and target early intervention
- A variety of service delivery avenues for positive parenting information must be utilized including child care, preschools, and community-based programs and services
- Preparation for parenthood needs to promote flexibility, adaptation, and capacity to change
- Normalization of parenting challenges needs to occur and de-stigmatized access points must be developed
- Parents must be validated and empowered
- Parenting programs should have a lifespan approach that is associated with the developmental stages of their children (i.e. different knowledge and skills re: prenatal/ infants, toddlers, preschool, primary school and teenagers)

Parenting tip sheets, parenting groups, public seminar series, teacher training, and workplace programs and training were highlighted as relatively low-cost, high-impact approaches.

To receive Parenting tip sheets based on early childhood





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developmental stages and local research findings you can make available to parents, simply contact Glory Ressler, UEY Coordinator at the ECCDC at 905•646•7311, or [gressler@eccdc.org](mailto:gressler@eccdc.org). For materials or training on positive parenting or interacting with parents, visit the ECCDC Resource Library. For membership information, please call Liz Vanier at 905•646•7311, or email [lvaniem@eccdc.org](mailto:lvaniem@eccdc.org).

## Niagara Regional Police received more than 1000 criminal domestic violence complaints in 2005

### Impact of Violence, Abuse, and Neglect on Infants and Toddlers

Presentation by Dr. Diane Benoit, MD, FRCPC, and Associate Professor, University of Toronto, Associate Scientist at the Research Institute, Staff Psychiatrist in the Department of Psychiatry at the Hospital for Sick Children [September 18, 2006]

Dr. Benoit identified the various ways that exposure to domestic violence affects children's development. Exposure can range from overhearing threats or observing violence directly as it occurs. Dr. Benoit pointed out that the more pervasive the domestic violence, the greater the impact it has on children's developmental outcomes.

Dr. Benoit outlined the following ways that infants or toddlers may be impacted by their exposure to domestic violence:

1. **Intra-personal Thoughts;** feelings and related behaviours of low self-esteem; anxiety (e.g. separation anxiety disorder); depression; suicidal thoughts; negative life view
2. **Emotional Health;** instability; unresponsiveness; psychological disorders; impulse control problems; anger; physical self-abuse; substance abuse/dependence; eating disorder; Post-Traumatic Stress Disorder (PTSD)
3. **Social Skills;** attachment problems; low social competency; decreased capacity for empathy/sympathy; non-compliance/oppositional defiant disorder; disruptive behaviour; aggression; antisocial behaviours; violence; delinquency; criminality; self-isolation; dependency; sexual maladjustment
4. **Learning;** low academic achievement; learning impairments; impaired moral reasoning

Severe interruptions in children's attachment with their parents/caregivers are a major problem associated with exposure to domestic violence. Often these children have disorganized attachment because the parents/caregivers are unable to meet their needs. First responders to children's

exposure to domestic violence have a significant role to play in diminishing its effects. The following are tips for providing support if you are a first responder:

- Locate child and ensure she/he is not hurt
- Introduce yourself and describe who you are
- Speak at child's level by sitting/squatting
- Acknowledge something upsetting happened
- Try not to talk badly about either parents/caregivers
- Do not say everything will be okay or make promises you cannot keep
- Reassure child that the violence was not his/her fault
- Explain to child why any use of force was needed
- Keep child with known adults whenever possible
- Provide parent with information about safety and resources
- Before leaving, explain to child what will happen next

### Duty to Report

- Every person in Ontario, including someone who works with children, must call a Children's Aid Society immediately to report his/her suspicion that a child may have been abused or is at risk for abuse.
- The person who suspects that a child may have been abused or is at risk for abuse must report to a Children's Aid Society, and cannot ask anyone else to report for him/her.
- If a person has more suspicions or information about a child, then a Children's Aid Society must be contacted again, even if other reports have previously been made.
- If a person who has professional or official duties in their work with children does not report a suspicion of child abuse, then this person can be charged and fined up to \$1,000.

If you suspect a child under your care is living in a home where she/he is exposed to violence, you can call your local Niagara office of Family and Children's Services at 905•937•7731 or 1•888•937•7731 anytime. If you wish, you can report anonymously or ask to remain confidential.

Additional resources on this important issue are available at the ECCDC Resource Library. Contact Liz Vanier at 905•646•7311 to enquire about a membership or email [lvaniem@eccdc.org](mailto:lvaniem@eccdc.org).

Canada

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