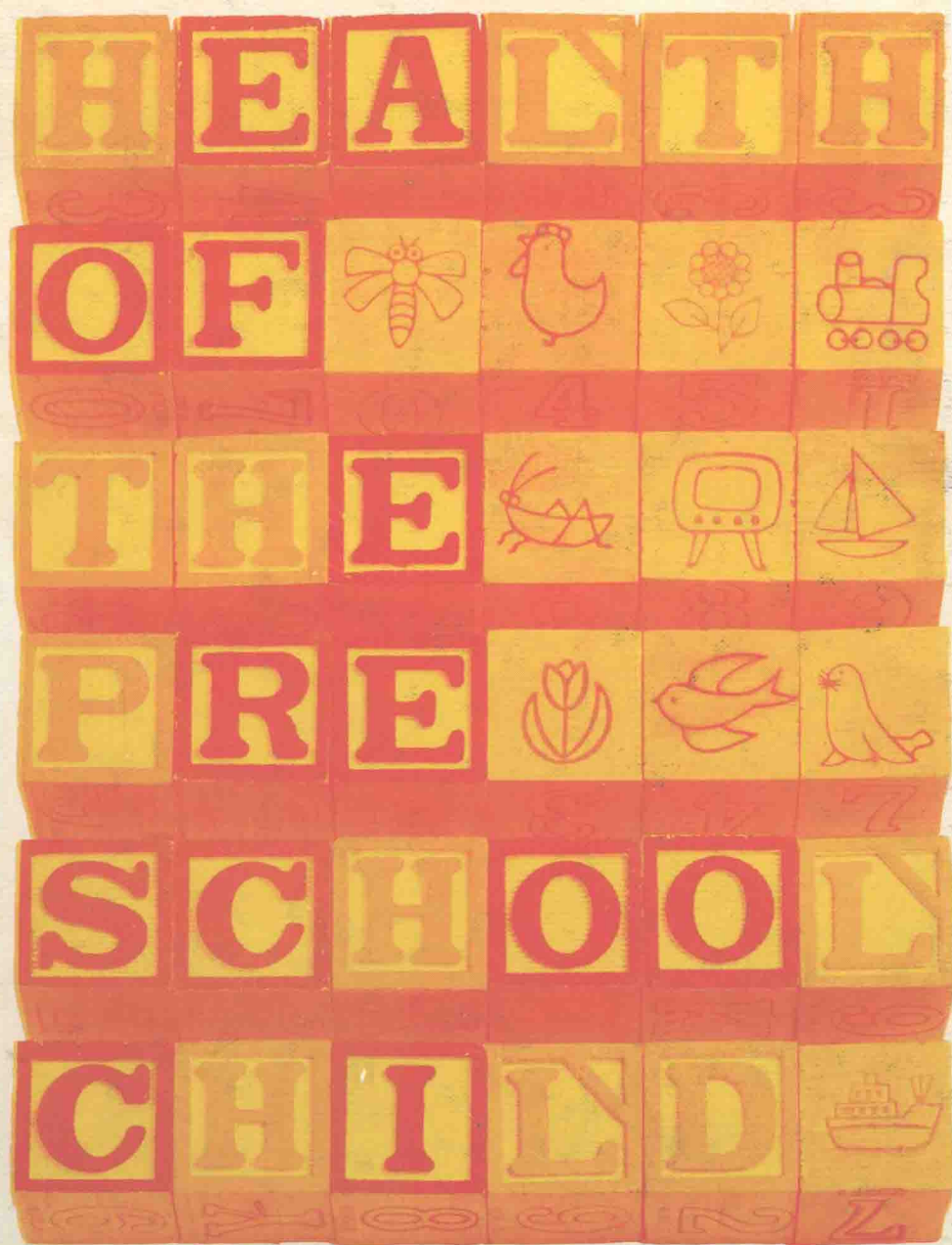




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HEALTH OF THE PRESCHOOL CHILD

To our families

PREFACE

With the safeguarding of young children's health in places other than their homes, fast becoming a concern of people other than their parents, we felt a need to help provide those who are charged with overseeing the physical, social, emotional, and cognitive health of little children with accurate, practical, and comprehensive information

This need of personnel in all types of preschool settings came to us from almost opposite directions, as members of two different professions.

Professor Edith Reinisch, while instructing college students in early childhood education, found that child health information for students other than those in the health professions, was difficult to find. Information that was available dealt mostly with the health of older school age children. This was confirmed when she attended meetings for planning in-service educational programs for staffs of preschools. It was noted that locating sources of adequate health information and the need for education in child health was a constant concern among preschool personnel.

Dr. Ralph Minear, a pediatrician, engaged in giving care to children in an urban neighborhood health center, found that teachers and parents of young children often do not know many important health facts. The type of telephone calls in which teachers requested information about a child with a particular medical problem demonstrated this. It was difficult to be completely helpful because the teachers were unable to give useful health information based on their knowledge and observations. Parents continued to bring their child to the health center for preadmission health examinations with little understanding of the purpose of such an evaluation. This led to inaccurate and missing information that affected the ability of teachers and health professionals to share information that would benefit the health of that child. Because of these deficiencies, Dr. Minear began inservice instructions in several preschool centers.

Knowing of each other's interests, the two authors joined forces to help a large group of preschool personnel fulfill their role in the young child's health program, resulting in this book. It is the first one written specifically to aid those enrolled in early childhood education studies, as well as individuals already working in preschool programs. The unique blend of both of these professionals' perspectives will instruct and stimulate those who participate in the protection and improvement of the health of preschool children. This textbook helps the preschool teacher to distinguish between what is normal and what is unusual in the appearance,

behavior, and characteristic reactions of a child; to know what to do in an emergency to protect the child's life and health; and to provide a healthful and safe environment while preserving the personal dignity of each child.

This textbook can be the basis of a formal course on child health. Such a course should be included in every early childhood curriculum. It may also be used for in-service education and as a reference for teachers and parents.

A note on avoiding sex bias: students, teachers, and health professionals are men and women; children are girls and boys. In order to avoid sex bias the use of *he* and *she* is alternated in this book.

We take pleasure in expressing our appreciation to Dr. Edith M. Dowley for her encouragement and many suggestions about content and style, to Sabina Minear for suggesting ways to present concepts more clearly, to Dr. Frances A Hellebrandt and Professor Constance D'Elia for many corrections and editorial changes, and to Louise Landry for unlimited patience in typing the manuscript.

We also thank the American National Red Cross, Washington, D.C. and Springfield, Mass., for reviewing and commenting on Chapter 8, First Aid.

Finally, we would like to thank Bill Sullivan for his patience and the many suggestions during the writing of this book.

Edith H. Reinisch
Dr. Ralph E. Minear Jr.

HEALTH OF THE PRESCHOOL CHILD

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Child Health— Whose Concern?

The preschool child has his whole life before him. But he must be healthy if he is to have a life that permits him to benefit from all of his abilities. A disease, an abnormal condition, an injury, or emotional and physical abuse or neglect may damage the young child's health. Early detection, good treatment, prevention, and support may reduce the damage. The maintenance of health, then, becomes an important endeavor of those who surround the preschool child.

What is health if it is so important? Health is a complex concept that is difficult to define. Yet many individuals and professional groups have offered definitions. A useful definition of health is the following one issued by the American Academy of Pediatrics. "Good health is a dynamic state of physical, mental, and social well-being which is influenced by many environmental and hereditary factors over which an individual exercises varying degrees of control. It is a constantly changing entity, and acquisition of good health should never be left to chance."

Why is the general public so concerned about the health of the preschool child? Cultures have always had a strong interest in their future generations. Assuring health has been part of that concern. Because of recent scientific achievements more people have come to expect that health will be an important factor in producing a better next generation. In the past the focus of concern rested primarily with parents. Now a very large number of young children no longer remains exclusively within the care of their parents but is enrolled in a variety of preschool programs. Therefore, the direct concern for children of this age group has broadened to include all individuals who care for them.

Who is likely to be watching over the health of preschool children? Besides parents there are health professionals who watch a child's growth and development. The health professionals wait for the child to come to them. They include physicians, medical

specialists, pediatric nurse practitioners, nurses, physician's assistants, and a large number of other persons whose primary work is in the field of health. We are aware of the different levels of training and experience in this group and we will specify the type of professional when it becomes necessary. It may also be volunteers, aides, student teachers, assistant teachers, teachers, or preschool directors who watch the child's health. For the sake of simplicity, and because preschool programs are learning experiences for children, we refer to all people in this category as teachers. We are quite aware of the differences in educational background and levels of responsibility among such personnel. Where a distinction is necessary it will be made. All nursery schools, day care programs, Head Start programs and other projects for young children will be referred to as preschool programs.

Since health is influenced by environmental factors, what is a healthful preschool environment? It is a well-designed physical facility with proper ventilation, heat, light, and a low noise level. It is a good playground with safe equipment. It is safe toys and materials for learning experiences. In addition to these physical aspects, a healthful environment also includes well-planned activities in the preschool, conducted by a well-trained staff who have proper attitudes toward children. In a good environment the children's health is protected, maintained, and improved at the same time that growth and development are promoted. This means the preschool will have a well-planned health program. Thus a healthful environment is more than a good physical environment; it is also a good psychological, cultural, and social environment. This leads us to the comprehensive concept of health expressed in the above statement and throughout this book. The term environment is used here in its broadest sense. A healthful environment then is the result of integration of many components.

Who of those watching over the young child's health is in the best position to carry out that task? It is the teacher in the preschool program. She is the one who knows almost as much about each child as the parent, because she sees him every day. The teacher has the advantage of seeing each child as one of a group of children of the same age, rather than as a single individual. She is likely to make more diverse demands than a parent on the child. Thus, health may be watched differently than it would be by a parent. The teacher's sole responsibility in the preschool situation is the child, whereas at

home, the child competes for parental attention with many other activities. Such a focus sharpens the teacher's observational skills as the program progresses. The teacher serves the parents and is accountable to them for the child's health during a specific time. A parent does not have this type of obligation. His only obligation under law concerns harm, neglect or abuse. All of these reasons give the teacher an advantage in listening to, watching over, observing and caring for a young child's health needs. The importance of this role cannot be stressed enough.

How does the teacher watch a child's health? The teacher may be called on to do many things. Some of these are:

1. Interview parents about their child's health and about family health.
2. Recognize ill children and act in case of an emergency.
3. Make judgments when to consult a parent or a health professional.
4. Assist in the health evaluation of the children in the program and keep records of health information.
5. Include health education in the child's learning experiences.
6. Make the environment of the program safe and healthy.
7. Support essential health needs of some children.
8. Become the link between the child and the health professional.

Though these demands appear to be overpowering it does not mean the teacher must be a health expert. For example, he does not have to diagnose a case of measles or chicken pox. The teacher is a member of the health team, therefore he does not act alone. Instead, he helps the health professionals make the diagnosis and assists in restoring the child to good health. He does not have to treat a child who has had an accident. All he needs to do is give first aid until a health professional gives care. He does not and should not make any final decisions about the physical and mental development of a child. The specialist in each area will do that.

How does the teacher acquire the knowledge to perform all those tasks related to the care of a young child's health? What should the teacher know? The teacher acquires the knowledge through education and experience. The education may be a formal one or it may be acquired on the job. Experience may come from work in

preschool programs or from being a parent. Regardless of how the teacher acquires knowledge it will be broadened by frequent consultations with health professionals and health-oriented literature.

The purpose of this book is to strengthen the knowledge of those who already work in preschool programs and to offer information to those who are preparing to enter this challenging field. The aim throughout the book is to include enough theoretical background material to insure an intelligent application of broadly conceived principles and practices. The focus, however, is on the efficient management of the day-by-day problems of preschool facilities cognizant of their unique place in modern society.

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