

Cut Back on Your Kid's Sweet Treats

10 tips to decrease added sugars www.choosemyplate.gov



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Child Health Clinic 4 located in Kinnelon



http://www.safekids.org/poisonsafety



# HD Healthy News

Spring 2016

## **Children's Health Edition**

March, April, May

Limiting sugary treats and drinks from a kids diet may seem difficult, but it doesn't have to be. Here's some simple tips on decreasing added sugar & calories but keeping the nutrients.

- 1. Serve small portions. It's not necessary to get rid of all sweets and desserts. Show kids that a small amount of treats can go a long way. Use smaller bowls and plates for these foods. Have them share a candy bar or split a large cupcake.
- Sip smarter. Soda and other sugar-sweetened drinks contain a lot of sugar and are high in calories. Offer water when kids are thirsty.
- 3. Use the check-out lane that does not display candy. Most grocery stores will have a candy-free check-out lane to help moms out. Waiting in a store line makes it easy for children to ask for the candy that is right in front of their faces to tempt them.
- 4. Choose not to offer sweets as rewards. By offering food as a reward for good behavior, children learn to think that

- some foods are better than other foods. Reward your child with kind words and comforting hugs, or give them nonfood items, like stickers, to make them feel special.
- Make fruit the everyday dessert. Serve baked apples, pears, or enjoy a fruit salad. Or, serve yummy frozen juice bars (100% juice) instead of high-calorie desserts.
- 6. Make food fun. Sugary foods that are marketed to kids are advertised as "fun foods." Make nutritious foods fun by preparing them with your child's help and being creative together. Create a smiley face with sliced bananas and raisins. Cut fruit into fun and easy shapes with cookie cutters.
- Encourage kids to invent new snacks. Make your own snack mixes from dry whole-grain cereal, dried fruit, and

- unsalted nuts or seeds. Provide the ingredients and allow school-aged kids to choose what they want in their "new" snack.
- 8. Play detective in the cereal aisle. Show kids how to find the amount of total sugars on the Nutrition facts label in various cereals. Challenge them to compare cereals they like and select the one with the lowest amount of sugar.
- Make treats "treats," not everyday foods
   Treats are great once in a while. Just don't make treat foods an everyday thing. Limit sweet treats to special occasions.
- 10.If kids don't eat their meal, they don't need sweet "extras". Keep in mind that candy or cookies should not replace foods that are not eaten at meal time.

#### March is Poison Prevention Month

More than 2 million poisonings are reported each year to the 57 poison control centers across the country. More than 90 percent of these poisonings occur in the home. The majority of non-fatal poisonings occur in children younger than six years old. And, poisonings are one of the leading causes of death among adults.

Kids are especially attracted to color. LIQUID LAUNDRY PACKET SAFETY TIPS:

Young children are explorers, and as they develop, they often learn by touch and by putting things into their mouths. Liquid laundry detergent packets are designed to dissolve in water, so when they come in contact with wet hands or mouths, they start to dissolve and might release the concentrated liquid inside. We want to encourage our kids to explore and discover new things, we just need to be careful to keep them safe. Here are a few

tips to show you how. Keep liquid laundry packets out of children's reach and sight. Keep packets in their original container and keep the container closed. If a child gets into their original their original container closed.



child gets into them, call the Poison Help number immediately: 1-800-222-1222.



## National Infant Immunization Week

| April 16–23, 201  | 6      |                            |                      |                      |                               |       |  |                          |             |              |         |                                  |                           |                    |              |              |  |
|---|--------|----------------------------|----------------------|----------------------|-------------------------------|-------|--|--------------------------|-------------|--------------|---------|----------------------------------|---------------------------|--------------------|--------------|--------------|--|
| Vaccines  | Birth  | 1 mo                       | 2 mos                | 4 mos                | 6 mos                         | 9 mos | 12 mos   | 15 mos                   | 18 mos      | 19–23<br>mos | 2-3 yrs | 4-6 yrs                          | 7-10 yrs                  | 11-12 yrs          | 13–15<br>yrs | 16-18<br>yrs |  |
| Hepatitis B <sup>1</sup> (HepB)   | 1*dose | <b>⋖</b> 2 <sup>nd</sup> ( | dose>                |                      | <b>4</b>                      |       | 3 <sup>rd</sup> dose   |                          | <b></b>     |              |         |                                  |                           |                    |              |              |  |
| Rotavirus² (RV) RV1 (2-dose series); RV5 (3-dose series)  |        |                            | 1st dose             | 2 <sup>nd</sup> dose | See<br>footnote 2             |       |  |                          |             |              |         |                                  |                           |                    |              |              |  |
| Diphtheria, tetanus, & acel-<br>lular pertussis³ (DTaP: <7 yrs)                                     |        |                            | 1st dose             | 2 <sup>nd</sup> dose | 3 <sup>rd</sup> dose          |       | /  | <b>≺</b> 4 <sup>th</sup> | dose>       |              |         | 5 <sup>th</sup> dose             |                           |                    |              |              |  |
| Tetanus, diphtheria, & acel-<br>lular pertussis⁴ (Tdap: ≥7 yrs)                                     |        |                            |                      |                      |                               |       |  |                          |             |              |         |                                  |                           | (Tdap)             |              |              |  |
| Haemophilus influenzae type b <sup>5</sup> (Hib)  |        |                            | 1st dose             | 2 <sup>nd</sup> dose | See<br>footnote 5             |       | < 3 <sup>rd</sup> or 4<br>See foc  | th dose, >               |             |              |         |                                  |                           |                    |              |              |  |
| Pneumococcal conjugate <sup>8</sup> (PCV13)   |        |                            | 1st dose             | 2 <sup>nd</sup> dose | 3 <sup>rd</sup> dose          |       | <b>∢</b> 4 <sup>th</sup> (   | dose>                    |             |              |         |                                  |                           |                    |              |              |  |
| Pneumococcal polysaccha-<br>ride <sup>6</sup> (PPSV23)  |        |                            |                      |                      |                               |       |  |                          |             |              |         |                                  |                           |                    |              |              |  |
| Inactivated Poliovirus <sup>7</sup> (IPV)<br>(<18 yrs)  |        |                            | 1 <sup>st</sup> dose | 2 <sup>nd</sup> dose | ⋖                             |       | 3 <sup>rd</sup> dose   |                          | >           |              |         | 4 <sup>th</sup> dose             |                           |                    |              |              |  |
| Influenza® (IIV; LAIV) 2 doses for some: See footnote 8   |        |                            |                      |                      | Annual vaccination (IIV only) |       |  |                          |             |              |         | Annual vaccination (IIV or LAIV) |                           |                    |              |              |  |
| Measles, mumps, rubella <sup>9</sup> (MMR)  |        |                            |                      |                      |                               |       | <b>∢</b> 1 <sup>st</sup> c   | lose>                    |             |              |         | 2 <sup>nd</sup> dose             |                           |                    |              |              |  |
| Varicella <sup>10</sup> (VAR)   |        |                            |                      |                      |                               |       | <b>⋖</b> 1 <sup>#</sup> 0  | lose>                    |             |              |         | 2 <sup>nd</sup> dose             |                           |                    |              |              |  |
| Hepatitis A <sup>11</sup> (HepA)  |        |                            |                      |                      |                               |       | <b>∢</b> 2-  | dose series, S           | ee footnote | 11>          |         |                                  |                           |                    |              |              |  |
| Human papillomavirus <sup>12</sup><br>(HPV2: females only; HPV4:<br>males and females)              |        |                            |                      |                      |                               |       |  |                          |             |              |         |                                  |                           | (3-dose<br>series) |              |              |  |
| Meningococcal <sup>13</sup> (Hib-Men-<br>CY ≥ 6 weeks; MenACWY-D<br>≥9 mos; MenACWY-CRM<br>≥ 2 mos) |        |                            |                      |                      | See footnote 13               |       |  |                          |             |              |         |                                  |                           | 1#dose             |              | Booster      |  |
| Range of recommended ages for all children  Range of recommended ages for catch-up immunization     |        |                            |                      |                      |                               |       | Range of recommended ages during which catch-up is encouraged and for certain high-risk groups |                          |             |              |         |                                  | Not routinely recommended |                    |              |              |  |



# Foods Commonly Associated with Food Allergies

Eight foods account for 90 percent of all reactions: milk, eggs, peanuts, tree nuts, soy, wheat, fish and shellfish. Even trace amounts of a food allergen can cause a reaction.

# MAY is Food Allergy Action MONTH

#### Food Allergy Risk Factors and Related Diseases

Food allergies affect children and adults of all races and ethnicity.

- A food allergy can begin at any age.
- Your risk of having food allergies is higher if you have a parent who suffers from any type of allergic disease (asthma, eczema, food allergies, or environmental allergies such as hay fever).
- Children with food allergy are 2-4 times more likely to have other related conditions such as asthma

- and other allergies, compared with children who do not have food allergies.
- Food allergies may be a trigger for or associated with other allergic conditions, such as atopic dermatitis and eosinophilic gastrointestinal diseases.

Learn more at: www.foodallergy.org

1 in 13 children in the U.S. has a food allergy.

On World Asthma Day
(Tuesday, May 5) and
throughout May, people with
asthma and organizations
dedicated to asthma control and
education join together to
increase awareness about
asthma and improve the lives of
all people with asthma.

Asthma, a lung disease, affects over 22 million people living in the United States, including 1 in 12 children. It causes 3 in 5 people living with asthma to limit their physical activity or miss days at school and work.

http://www.cdc.gov/asthma/triggers.html

http://www.aaaai.org/ http://www.aafa.org/ **Asthma** is a disease that affects your lungs. It causes repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing.



#### **Triggers**



MOULD



COLD AIR







POLLEN



INFECTION





EXERCISE

Children's Mental Health Month What Every Child Needs For Good Mental Health...

A child's physical and mental health are both important.

#### Basics for a child's good physical health:

- Nutritious food
- Adequate shelter and sleep
- Exercise
- Immunizations
- Healthy living environment

#### Basics for a child's good mental health:

- Unconditional love from family
- Self-confidence and high self-esteem
- The opportunity to play with other children
- Encouraging teachers and supportive
- Safe and secure surroundings
- Appropriate guidance and discipline

(Taken from MentalhealthAmerica.net)

#### Give children unconditional love.

- \*Love, security and acceptance should be at the heart of family life. Children need to know that your love does not depend on his or her accomplishments.
- \*Mistakes and/or defeats should be expected and accepted. Confidence grows in a home that is full of unconditional love and affection.
- \*Nurture children's confidence and selfesteem.
- \*Praise Them Encouraging children's first steps or their ability to learn a new game helps them develop a desire to explore and learn about their surroundings. Allow children to explore and play in a safe area where they cannot get hurt. Assure them by smiling and talking to them often. Be an active participant in their activities. Your attention helps build their self-confidence and self-esteem.
- \*Set Realistic Goals Young children need realistic goals that match their ambitions with their abilities. With your help, older children can choose activities that test their abilities and increase their self-confidence.

- \*Be Honest Do not hide your failures from your children. It is important for them to know that we all make mistakes. It can be very reassuring to know that adults are not perfect.
- \*Avoid Sarcastic Remarks If a child loses a game or fails a test, find out how he or she feels about the situation. Children may get discouraged and need a pep talk. Later, when they are ready, talk and offer assurance.
- \*Encourage children To not only strive to do their best, but also to enjoy the process. Trying new activities teaches children about teamwork, self-esteem and new skills.

#### Make time for play!

#### **Encourage Children to Play**

To children, play is just fun. However, playtime is as important to their development as food and good care. Playtime helps children be creative, learn problem-solving skills and learn self-control. Good, hardy play, which includes running and yelling, is not only fun, but helps children to be physically and mentally healthy.

For more information: http://

www.mentalhealthamerica.net/every-child-needs

 $\underline{http://www.cdc.gov/ncbddd/childdevelopment/}\\ \underline{mentalhealth.html}$ 

#### Honey Lime Fruit Salad

#### Ingredients:

- 2 large bananas, sliced
- 1 (16 ounce) package fresh strawberries, hulled and sliced
- 1/2 pound fresh blueberries
- 2 tablespoons honey
- 1 lime, juiced
- 1/3 cup pine nuts

Any tropical fruits could be substituted

#### Directions:

Combine bananas, strawberries, and blueberries in a bowl. Drizzle honey and lime juice over fruit; stir to coat. Sprinkle with pine nuts.

Prep Time: 20 minutes

Serves: 8

Calories: 115

(Link) Allrecipes.com

## Kid Friendly Recipes...



#### Contact

## Serving the towns of Bloomingdale, Florham Park, Kinnelon and Riverdale

530 Newark Pompton Turnpike Pompton Plains, NJ 07444

Phone: 973-835-5700 ext. 127

Fax: 973-835-4328 www.peqtwp.org/health



# **Announcements**

- Vegetative waste pickup resumes for Pequannock residents on April 1st.
- All dogs and cats must be licensed through the Health Department, avoid fines and license your pet.
- Pet Adoption application available online at www.peqtwp.org search animal shelter.
- Want to donate to the shelter? Check out our wish list on <u>Amazon</u>, all purchases are to help our shelter! <u>Click</u> above or search Pequannock Animal Shelter wish list.
- FREE Adult Vaccine
   will be available to
   uninsured or under insured, call nurses for
   availability and
   eligibility. Shingles,
   Pertussis/Tetanus &
   Pneumonia shots.

Facebook.com/PEQTWP.HealthDept

Twitter.com/@PEQTWP Health

Don't forget to *Like* us on Facebook or follow-us on twitter for health news and updates.

## CHC -Child Health Clinic-

Our **Child Health Clinic**, offers immunizations and wellness physical to children who are uninsured or underinsured. Clinic is held every other month by **appointment only**.

Visits are \$10.00. Please contact our public health nurses so confirm if you qualify and make an appointment.

Susan DeGraw, RN & Jean Vrablik, RN

(973) 835-5700 ext. 135 or 109





## Food Safety

Want to know how your favorite restaurant in town or the surrounding towns we serve is rating? Check out our link to the latest inspected restaurants.

Click below or visit: www.peqtwp.org/health

