Connecting the dots

West Virginia Birth to Three RAU-1 Newsletter • Fall 2020

A Note from Our Parent Partner

•

•

•

•

•

•

•

•

•

•

•

•

•

Hello! My name is Jade, and I'm the Parent Partner for Region 1 and the "editor in chief" of our quarterly newsletter. I'm also a selfproclaimed Mama Bear to two kids, including my seven year old son, who is a graduate of our Birth to Three program.

When someone asks me what my favorite season is, I always seem to struggle to answer because there's so much beauty in each of them. But arguably, the months where summer begins to turn in to fall are my favorite. July, August, and September have all the fun of the summer months – like the Fourth of July, the county fair, and the perfect weather for playing outside – mixed with the anticipation of the new school year beginning, the beauty that fall brings to our region, and of course, Halloween.

Please do not hesitate to reach out to me at (304) 214-5775 or via e-mail at jjeffers@ccwva.org, and please follow us on Facebook at West Virginia Birth to Three RAU-1, Catholic Charities for the latest program updates, new resources, and activities for you and your family.

Advice from a sunflower: Be bright, sunny, and positive. Spread seeds of happiness. Rise, shine & hold your head high.

.

In This **Odition**

A Note from Our Parent Partner – 1 Look Before You Lock – 2 Resource Spotlight: Hearing & Vision – 2 Monitoring Your Baby's Hearing Health – 3 Easy Fall Leaf Craft – 4 Progress Through the Pandemic – 4 The Grandparent's Guide – 5

•

Sbare Your Story

We love to hear and share your family stories! Family stories are an invaluable way to show the impact that our program makes. If you are interested in sharing your family's story and experience, please reach contact our Parent Partner at (304) 214-5775 or jjeffers@ccwva.org.

GODDOCO With Us

Follow us on Facebook at **West Virginia Birth to Three RAU-1, Catholic Charities** for updates about our program, local resources and programs, and activities for you and your family.

Look Before You **DOC**®

Heatstroke is one of the leading causes of non-crash-related fatalities among children and it can happen in minutes. A child is accidentally left alone in a vehicle, or gets in on his or her own, and the temperature inside the car or truck starts to rise. It doesn't need to be a hot day; when the temperature outside is as low as 60 degrees, the temperature inside a vehicle can reach 110 degrees. If a child's body temperature reaches 107 degrees, that child will die. Unfortunately, even great parents can forget a child in the back seat.

- Look Before You Lock. Get into the routine of always checking the back seat of your vehicle before your lock it and walk away.
- **A Gentle Reminder.** Keep a stuffed animal or other memento in your child's car seat when it's empty, and move it to the front seat as a visual reminder when your child is in the back seat. Or place your phone, briefcase, or purse in the backseat when traveling with your child.
- **A Routine Check.** If someone else is driving your child, or your daily routine has been altered, always check to make sure your child has arrived safely.
- **A Key to Safety.** Keep your vehicle locked and keep your keys out of reach; nearly 3 in 10 heatstroke deaths happen when an unattended child gains access to a vehicle.
- Act Fast to Save a Life. If you see a child alone in a vehicle, call 911.

If you see a child alone in a car, take action to avoid heatstroke. Every minute matters – call 911!

•

•

•

•

•

•

•

•

•

•

•

•





Resource SpocedBbC: Vision & Hearing Resources

Hearing or vision impairments can drastically impact a child's ability to develop communication, language, and social skills. The earlier that a child with a hearing or vision impairment begins receiving services, the more likely they are to reach their full potential.

The West Virginia Birth to Three website has a wealth of information on many topics, including resources and supports for families who have a child with a hearing or vision impairment.

The **Family Guide for Families of Young Children Birth to Five with Hearing Loss** is a family friendly guide with great resources for families, including basic information about hearing loss, developmental milestones for children using oral language and ASL, and communication options.

Additional resources for both hearing and vision concerns can be found under the Resources tab on the West Virginia Birth to Three website - <u>http://www.wvdhhr.org/birth23/resources.asp</u>.

The **InfantSee** program provides a no cost eye assessment so you can learn more about your baby's eye health and visual development! You can learn more about the InfantSee program at <u>https://infantsee.org/</u>.

MONITORING YOUR BABY'S HEARING HEALTH

KNOW THE FACTS

- 1 to 2 infants out of 1,000 age 0-3 are identified as deaf or hard of hearing.
 5 children out of 1,000 age 3-17 are identified as deaf or hard of hearing.
- * Most babies with hearing loss will have no signs or symptoms.
- 90% 95% of deaf and hard of hearing children are born to hearing parents.
- Hearing isn't all or nothing. Your baby may hear some sounds but not all those needed to learn or develop speech.
- * Early identification of hearing loss provides the opportunity for your baby's language, social and emotional development to reach its full potential.

FOLLOW EARLY HEARING DETECTION AND INTERVENTION GUIDELINES

Hearing screening before 1 month of age for all infants

•

St DIAGNOSIS Audiological evaluation before 3 months of age for all infants who do not pass the screening

INTERVENTION

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

•

Early Intervention **before 6 months** of age for all infants identified as deaf or hard of hearing

BE AWARE OF THE RISK FACTORS FOR LATE ONSET HEARING LOSS

Caregiver concern about hearing, speech, or developmental delay

- Family history of permanent childhood hearing loss
- NICU care longer than five days
- In utero infections: Cytomegalovirus (CMV), herpes, rubella
- Craniofacial anomalies
- Neurodegenerative disorders
- Head trauma
- Chemotherapy
- Syndromes associated with progressive or delayed-onset hearing loss, such as neurofibromatosis, osteopetrosis, Townes-Brock, and Usher syndrome; other frequently identified syndromes, including Waardenburg, Alport, Pendred, Downs syndrome, Sticklers and Jervell and Lange-Nielson

LEARN AND TRACK YOUR BABY'S LANGUAGE MILESTONES

0-3 Months

- Startles to loud sounds
- Quiets or calms when you talk
- Makes cooing sounds like ooh and ahh
- Smiles at people
- Cries change for different needs

4-6 Months

- Moves eyes in the direction of sounds
- Responds to changes in your tone of voice
- Pays attention to music
- Makes babbling sounds like baba, mama, or gaga
- Giggles and laughs

7 Months to 1 Year

- Turns and looks in the direction of sounds
- Looks when you point
- Uses common words like no and bye-bye
- Responds to his/her name
 Understands words for
- common items and people like *cup*, *truck*, and *daddy* Babbles long strings of
- Sounds, like mimi, upup, bababbaba
 Starts to respond to
- "No," "Come here," and "Want more?"
- Uses gestures like waving bye and shaking head no
- Says 1 or 2 words, like hi, dog, or uh-oh

Easy Fall Leaf **DOO**

This easy fall leaf craft is a great transition from summer to fall!

All you'll need for this activity is masking tape, clear contact paper, and fall leaves (available at most dollar stores).

- Cut out a piece of clear contact paper a 2 x 2 square is a great size, but use what works for you!
- Tape the contact paper onto a window or wall leave the backing paper on except for on the corners facing you (the sticky side will be out). I found this easiest tape the corners, and then peel the paper off the rest, then tape the whole thing on the edges.
- Let your toddler or pre-schooler put leaves up on the contact paper to create a beautiful collage!



Please remember that all activities require adult supervision and participation. Please be aware of small parts and allergies.

Adapted from <u>http://www.mominthesix.com</u>.

•

•

DFOBFOSS Through the Pandemic

We had just completed our annual review of what felt like a whirlwind of a year and I felt great about our future. My little guy had just received his brand new hearing aids and a Speech Language Pathologist and Hearing Specialist had been added to our team. At 18 months old, he had started walking independently and things seemed to be progressing quickly with physical and developmental therapies. Then the pandemic hit and I was panicked. My team, as usual, stepped up and we got through it.

My son was born with a severe foot deformity and we joined the Birth to Three program when he was seven months old. In that first year, the team was with us as we overcame one hurdle after another – casting, braces, a hearing impaired diagnosis, a fight for hearing aids, and the list goes on. With each bump in the road, they were my support system. There were days when all I could see were delays and struggles, and they would come swooping in with positivity and reassurances. When I had self-doubt, they propped me up and reminded me of all that Jake and our family had already overcome. They pointed out not only his strengths, but our family's strengths as well.

PFOBFOSS Through the Pandemic (Continued)

I remember talking to my husband as more and more restrictions were put in to place last spring about how all of it was going to affect our boy. I was so worried about losing services because we had come so far, and the thought of regression hung in my mind like an ominous rain cloud. For a while, the team continued in home visits and I really thought that we were going to get through the shutdown without any interruptions, but inevitably, home visits were stopped. When virtual visits were first introduced, all I could think was how on Earth are we going to do virtual therapy? I wasn't trained in anything and I had an almost 2 and 3 ½ year olds. How was I going to find time to be solely focused on a computer screen for an hour, and how was I going to make Jake focus too?



With a lot of grace on both ends, the ream and I quickly hit our stride. We found ways to make it work for our family – for example, we adjust times, sometimes meeting twice a week for a half hour instead of once a week for an hour. The team was so patient as Jake darted in and out of the screen and I peppered them with what felt like a thousand questions. At each visit, they would have new ideas to engage Jake and keep him focused. Sometimes those ideas worked, and sometimes not so much. They talked me through different techniques to help Jake and assigned "homework." I was diligent with everything that they were telling me and the line between mom and therapist became blurred for those few months, but it felt so worth it! I had already developed a great relationship with our team and over those months, a new level had been reached. I was gaining confidence as our weekly chats confirmed that my fear of regression would not come true.

•

•

•

•

While I can't say that I loved virtual therapy, it did have its benefits. My worry for Jake's future after Birth to Three has ebbed a little, thanks to the crash course lessons in therapy that I received. I am thankful for the inventiveness of my therapists and the quick action of the Birth to Three program as they adjusted. By the time we were allowed to resume in home visits again, the entire team was impressed with Jake's progress and that made my momma heart soar. What could have been a detrimental setback for my son ended up being a great hands on experience for me!

The Grandparent's **GOOOO**: What's New? What's the Same?

Are you a grandparent providing care for your grandchildren under preschool age? If so, you are not alone, in 2011 there were 4.8 milling children under 5 years old being looked after by grandparents while parents worked (Kisner, 2017). There are probably even more now!

If you're a grandparent providing care for your preschool grandchildren, you may find you're more patient and relaxed with your grandchildren than you were the first time around. You may also wonder if you're up on the latest child care strategies. Here are some things to consider about what's new and what has stayed the same when it comes to caring for babies and toddlers.

Eating	You might remember battles with your own kids over finishing everything on their plates.
	Turns out even babies and toddlers can tell when they're full and it's OK to let them
	decide what and how much to eat, from a selection of healthy options.
Sleeping	The latest research says putting babies on their backs to sleep helps to prevent Sudden
	Infant Death Syndrome (SIDS). And when they are awake, tummy time (playing while
	babies are on their bellies) is really important for developing physical skills.
Spanking	The debate about whether spanking is helpful or harmful has been going on for a long
	time. But now experts agree: spanking does not work. Spanking may appear to work in
	the moment. It can get the child's attention and get him to stop doing what he's doing. But,
	in the long term, spanking has been found to increase a child's aggression, and it doesn't
	teach them how to manage behavior and feelings in positive ways.
Early Brain	We know a lot more than we used to about how brains develop. There's a lot going on in
Development	there, even in baby's first year! Babies and young children are building more than 1
	million new brain connections every second. With loving care, they learn what it means to
	feel safe, secure, and loved by their first birthday.
Playing	Play is how kids learn about the world. Grandparents are the perfect partners for
	pretending and exploring. The best toys have been around for a long time: blocks, shape-
	sorters, and pots and pans perfect for making lots of noise!
Talking	Talking and listening are great gifts to give your grandchildren. The more words that
	babies and toddlers hear, the more they learn. Sharing songs and stories, and answering
	endless "Why" questions, are great ways to build language skills and the bond between
	you.
Reading	Every time you snuggle up to read to your grandchild, you're creating two relationships –
	the one with you and the one with books. Reading aloud builds vocabulary and language,
	and it helps your little one develop literacy skills needed later on in school. But to her it's
	just plain fun!
Unconditional	Kids need to know there's someone in their corner, no matter what. That's the role most
Love	grandparents are happy to fill.

(Kisner, 2017)

To learn more about any of these topics, please visit

https://www.zerotothree.org/resources/1985-the-grandparent-guide-what-s-new-what-s-the-same.

Adapted from: Kisner, K (2017). The grandparent guide: What's new? What's the same? Retrieved from <u>https://www.zerotothree.org/resources/1985-the-grandparent-guide-what-s-new-what-s-the-same</u>.

Region One RAU **DOGODODOD**

Wheeling Office 2000 Main Street, Suite 222 Wheeling, WV 26003 (304) 214-5775

Is your child moving, hearing, seeing, learning and talking like other children their age? If you have any questions, please give us a call!

West Virginia Birth to Three Region 1 RAU is a program of Catholic Charities WV. West Virginia Birth to Three services and supports are provided under Part C of the Individuals with Disabilities Education Act (IDEA). It is administered through the West Virginia Department of Health and Human Resources, Office of Maternal, Child and Family Health.

1-800-619-5697 · www.wvdhhr.org/birth23

Find more COVID-19 resources on our webite! http://www.wvdhhr.org/birth23/covid19 resources.asp



