Partners in Practice: Health & Nutrition in Family Services
Fourth Edition

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Introduction

*Why do I go to the dentist?* Because my Mother made me.

*Why do I go to the doctor for a checkup when I’m not sick?* Because I was taught that “an ounce of prevention saves a pound of cure.”

*Why do I wash my hands before I eat?* Because I wasn’t allowed to eat if I didn’t.

*Why do I believe collard greens are good for me and potato chips are not?* Because my parents served collard greens, encouraged me to eat them and told me they were beneficial to my health.

*Why do I make sure that I always have some sort of health insurance, even if I don’t have a regular job?* Because my father told me how important it was if I became very sick, like he did.

All of these are messages. They are messages I received as a child. They are messages that came from my parents and helped create some of the rules that governed our family. Most likely, they were the same messages that came from their parents, and their grandparents, and so on, back through the family tree. Just like hair color, lack of hair, stature, noses and a million other genetically determined characteristics, messages, too, pass down through families.

Unfortunately, these messages are not universal. They are not found in all families. Obviously, those families in which these messages are missing tend to be less healthy than other families. They may not eat nutritionally sound meals. They may not get preventive health care. Their children may not be immunized or get well-child checks. They may wait until a family member is really sick, and then take them to the emergency room. They may not get dental care at all.

Some of the families we serve in Head Start may have never received these messages. Some of our own staff may not have received them either. Much of our job as family advocates is to make sure that our staff, our children and their families all receive these messages.
Chapter 1: Key Concepts of Health In Head Start

What is Health in Head Start?

When we speak of Health in Head Start, we are talking about medical and dental health, nutrition and mental well-being. We are talking about the child and the family, the home, the classroom and the community. We are not interested in the scattershot, episodic type of health care that is often attributed to low income families. We are interested in comprehensive services, readily accessible sources of care, continuity of care and most of all, parent involvement in the health care of their children. Nothing we do for the child will have any lasting significance if the families do not take responsibility for the ongoing health care of their children. Consequently, “Parent Involvement” and “Family Focus” are keys to our success.

Although there are specific sections in the Performance Standards on Health, Mental Health and Nutrition, these are just a small part of the concept of Health in Head Start. The word “Health” is scattered throughout the Performance Standards. It is in every section. It addresses child health, family health and staff health. It includes both prevention and treatment. It requires collaboration with families and partnerships with the community. It deals with safety in the classroom, the kitchen, on the bus and in the home. It promotes a team approach to health. In other words, Head Start integrates Health into every facet of the program.

There used to be a saying in Head Start that many people have forgotten. It goes: “A child must be healthy in order to learn.” Let’s make sure we don’t forget it!

Reauthorization of Head Start

On December 12, 2007 President Bush signed The Improving Head Start for School Readiness Act of 2007, reauthorizing the Head Start program. This reauthorization is also known as Public Law 110-34, and can be found summarized in the Information Memorandum HS-08-01. Information Memoranda as well as The Improving Head Start for School Readiness Act of 2007 can now be found on the Early Childhood Learning and Knowledge Center, Office of Head Start, website: http://eclkc.ohs.acf.hhs.gov/hsic.

Head Start is not an entitlement program, but a discretionary program, which must be periodically reauthorized. These reauthorizations bring with them change and move Head Start in somewhat different directions. Additionally, with the reauthorization will come changes in the Performance Standards. Programs must be ready to adjust to the changes as they arrive. Although the Head Start Act is law now, many sections require that regulations, policies, or procedures be developed before implementation can actually occur. Be on the watch for future updates.