



### Trauma Awareness Month

By Lindy Kartchner BSN, RN, CPEN

May is National Trauma Awareness Month. In 1988, Ronald Reagan recognized the need for trauma awareness and established May as the month for us to dedicate our time and resources to increasing education and prevention activities. In over 30 years, trauma has remained a leading cause of death and injury. Every year, adults and children account for 37 million Emergency Department visits due to trauma. Traumatic injuries are the number one cause of death in children. In 2021, Primary Children's Hospital provided care for over 1500 patients impacted by trauma.

The statistics around trauma are sobering and stand as a call to action. How do we decrease the number of children affected by trauma? One of the top causes of pediatric trauma is motor vehicle collisions. How can you protect your child while in a vehicle? Ensure that they are properly restrained in a seatbelt or carseat. Do you have questions about whether your child is in the right sized carseat? Is that carseat properly installed and are the straps being used appropriately? Does your child wear their seatbelt correctly? Knowing the answers to all of these questions can be confusing. You can call 801-662-6583 for a free carseat check provided by Primary Children's Hospital. Let's all do our part to decrease the number of traumatic injuries in our community.



### 7 Myths About Child Mental Health

Adapted from an article by Harold S. Koplewicz, MD

Many children and teens with emotional problems keep their pain secret. Others express their feelings in risky or offensive ways. Due largely to stigma — fear, shame, and misunderstanding about psychiatric disorders — the majority never receive clinical care. Debunking myths about child mental health is critical to getting more children the help and understanding they deserve.

**MYTH 1:** A child with a psychiatric disorder is damaged for life.

It is by no means an indication of a child's potential for future happiness and fulfillment. If a child's struggles are recognized and treated—the earlier the better—they have a good chance of managing or overcoming symptoms.

### 7 Myths About Child Mental Health continued

**MYTH 2:** Psychiatric problems result from personal weakness.

It can be difficult to separate the symptoms of a child's psychiatric disorder from a child's character. But a psychiatric disorder is an illness and not a personality type.

**MYTH 3:** Psychiatric disorders result from bad parenting.

While a child's home environment and relationships with his parents can exacerbate a psychiatric disorder, these things don't cause the disorder. Many disorders are thought to have biological causes.

**MYTH 4:** A child can manage a psychiatric disorder through willpower.

A disorder is not mild anxiety or a dip in mood. It is severe distress and dysfunction that can affect all areas of a child's life. Kids don't have the skills and life experience to manage conditions as overwhelming as depression, anxiety, or ADHD.

**MYTH 5:** Therapy for kids is a waste of time.

Treatment for childhood psychiatric disorders isn't old-fashioned talk therapy. Today's best evidence-based treatment programs for children and teens use cognitive-behavioral therapy, which focuses on changing the thoughts, feelings, and behaviors that are causing them serious problems.



**MYTH 6:** Children are overmedicated.

Most psychiatrists use enormous care when deciding whether and how to start a child on a treatment plan that includes medication — usually along with behavioral therapy.

**MYTH 7:** Children grow out of mental health problems.

Children are less likely to "grow out" of psychiatric disorders than they are to "grow into" more debilitating conditions. Most mental health problems left untreated in childhood become more difficult to treat in adulthood.



### Why is screen time an issue?

By Sandy Patton--SelectHealth

Time spent in front of a screen typically means less time being active. Less activity and more screen time may be a factor in the recent rise of childhood obesity. Children need 60 minutes of physical activity a day—this helps them build strong bones, muscles, and cardiovascular health. Instead of spending time playing video games or watching TV, encourage your kids to play soccer, ride scooters with friends, or play tag in the backyard.

We know that screens are everywhere and they come in many forms—tablets, TVs, video games, smartphones, etc. These devices are easily accessible at home and at school, and that's part of the reason why kids are spending so much of their day in front of one.

In the 1970s, the average age a child first watched a television was four years. Contrast that to today—now 75% of infants and toddlers watch TV before the age of two. In fact, 43% of children younger than the age of two watch TV every day.



How much time is recommended?

Help limit screen time to one to two hours a day by modeling a positive attitude about physical activity. Your child will take notice of your healthy habits.

How can I get my child to be more active?

Make it fun to be active and find something that your child enjoys doing. Take your child with you when you walk the dog, explore a nearby park, or kick the ball around with them in the front yard. This will help your children establish healthy habits when they're young.

Children can engage in informal activity such as playing at a nearby basketball court, joining a neighborhood pickup game of soccer after school, or they may be interested in joining a team sport. Either way, it's important to provide children opportunities to be active every day.

### Car Seat Corner:

**Question:** Why do I need to keep my child rear facing until after age 2?

Your child's head, neck and spine need as much time as possible to grow and strengthen. A rear-facing car seat absorbs crash forces instead of your child's underdeveloped body. Long legs are never a reason to turn your child forward facing. We don't see broken legs from keeping a child rear facing, we see spinal injuries from turning them around too soon. The recommendation from the American Academy of Pediatrics is: "Children should ride in a rear-facing car safety seat as long as possible, up to the limits of their car safety seat. This will include virtually all children under 2 years of age and most children up to age 4." There isn't a magic age to turn them around. Every time you change your child from rear facing to forward to a belt positioning booster, to just a seatbelt alone you lose a level of safety. Don't rush it!

For any car seat questions, call Primary Children's car seat team at 801-662-6583

<https://publications.aap.org/aapnews/news/12188>

**WHY REAR FACING?**

Your child's head, neck and spine need as much time as possible to grow and strengthen.

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A rear-facing car seat absorbs crash forces instead of your child's underdeveloped body!

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