

Well Child Tamariki Ora (WCTO) Provider Update

November 2020

Ngā mihi ō te rā ki a koutou mā mai i a mātou ngā kaimahi ō Immunisation Advisory Centre.

Greetings from the WCTO Promotion Team of the Immunisation Advisory Centre.

In this newsletter:

- Workforce development: Well Child Tamariki Ora Conference and pre-Conference Workshop, 19-20 November 2020
- National SUDI Prevention Training (National Safe Sleep Day – Te Rā Mokopuna, 4 December)
- Migrant and Refugee families (International Migrants Day, 18 December)
- National Oral Health Day: 6 November
- Other upcoming events



“**Whakatauki** are metaphors that support critical thinking by allowing the receiver of the **whakatauki** to consider another way of thinking from a worldview other than their own. To affirm **whakatauki** is to accept the indigeneity of a Māori/iwi lens and invites the receiver to align their thought processes to this.”¹

Upcoming National WCTO Workshop and Conference 19 & 20 November 2020, Holiday Inn, Rotorua

The theme for this event is Pōhutu.

Pōhutu is the largest active geyser in the Southern hemisphere, and situated close to the venue for Well Child Tamariki Ora Workshop and Conference.

This global landmark and the surrounding area receive strength and warmth from Papatūānuku (Earth Mother). The waters and energy from below provide the region with healing and therapeutic resources that not only bring wellness but also a connection through the geothermal network that links not just New Zealand and the Pacific, but the World to this special place.

We hope that our Workshop and Conference provides a similar source of wellness and connection, bringing warmth to you all.



¹ <https://tewhariki.tki.org.nz/assets/Uploads/Te-Whariki-Whakatauki.pdf> (accessed 21 October 2020)

Please note registrations for each day is separate (these are separate but related events). Registrations to attend the smaller, interactive Workshops are now closed. Spaces for the Conference are still available.

[Click here for programme and registration details.](#)

Recent changes to the National Immunisation Schedule

Note that most recent changes to the NIS were effective as at 1 October 2020. A key change includes a new immunisation visit at 12 months. See [here](#) for more information.

Primary Maternity Services Notice Review 2021

Feedback on the Ministry of Health's proposed changes to the above is currently being sought. The proposed changes are being made to increase the flexibility of community services to better meet the needs of women and their whānau. The closing date for submissions is 5pm, Friday 13 November. For more information, go to: www.health.govt.nz/publication/primary-maternity-services-notice-review-2021

National SUDI prevention training

[Hāpai Te Hauora](#) run free [National SUDI Prevention Online Training](#).

The course includes seven training modules and takes approximately 45-60 minutes to complete. Click the link to register and complete the course.

The training covers the following topics:

- An introduction to SUDI prevention
- Connecting and engagement with whānau
- Consistent health messaging
- Accumulation of risk factors for SUDI



Note that National Safe Sleep Day – Te Rā Mōkōpuna falls on December 4.

Migrant and refugee families

In acknowledgement of International Migrants Day occurring within the period of this newsletter, the following is excerpted from the WCTO Practitioner Handbook.²

Families with significant, long-term needs require high-intensity services and involvement with different multiple resources and/or agencies. Parents who are preoccupied by their life circumstances and environment may find it difficult to respond to and benefit from professional expertise and advice. A coordinated team approach to supporting such families is required.

Such vulnerable families can include new migrants and refugees, especially where the parents' comprehension of English is limited.

Migrant and refugee families are a unique and diverse group of families and the various ethnic communities they represent are growing. Some have chosen to emigrate from their home countries for lifestyle or family reasons, whereas others have been forcibly displaced due to threats of violence, warfare or extreme poverty in their home countries.

² Ministry of Health. 2013. [Well Child / Tamariki Ora Programme Practitioner Handbook: Supporting families and whānau to promote their child's health and development – Revised 2014](#). Wellington: Ministry of Health.

Regardless of the reason for their arrival in New Zealand, all migrant and refugee families will experience a period of resettlement and may require assistance in navigating access to the entitlements and services available to them. Health practitioners need to know about these entitlements and should be prepared to advocate on behalf of families if necessary.

The incidence of financial stress is higher in refugee and some migrant groups. For these families, the first and most important consideration is access to entitlements, services and employment. Migrants, quota refugees and family reunification members are generally eligible for the same benefits and entitlements as other New Zealanders. Asylum seekers are eligible for publicly available health, education and welfare services provided they have lodged a claim for refugee status and are awaiting a hearing. For information about Work and Income financial assistance, visit the Work and Income website (www.workandincome.govt.nz). Applicants can call the Work and Income Contact Centre (freephone 0800 559 009) or they can use the Language Line number (freephone 0800 000 196) to request language assistance.

Newly arrived children and their parents may speak little or no English and may have experienced traumatic events, grief and loss. Staff need training and support to understand the serious impact of trauma and loss on parents, parenting capacity, children and the parent–child relationship.

A good interpreting service is essential. It is not acceptable to rely on the use of older children as interpreters for the parents at appointments. Access to interpreters varies from region to region. District health boards provide interpreters for the community and secondary care services that they fund. In some regions, primary health providers have access to district health board interpreting services or to the Office of Ethnic Affairs' Language Line. The [Refugee Health Handbook](#) (Ministry of Health 2012) contains further advice on working with a family and an interpreter.

Because families can be moved into alternative accommodation, it may be difficult to keep track of them. Good liaison with housing, and migrant and refugee community services can ensure that, as soon as a new family arrives in an area, these services inform a designated provider of WCTO care so they can make contact as soon as possible. Many families in temporary accommodation are unable to receive mail and have no direct telephone access. These families move frequently and therefore their children may never receive specialist or other referral services. Referrals should be managed with these constraints in mind.

Establishing rapport, engaging with the family and communicating clearly throughout the consultation are crucial factors in providing safe, effective and appropriate care.

Considerations with migrant and refugee families

- Ask parents if there are any special requirements or information that they would like you to consider when providing care. For example, there may be cultural differences in relation to who is involved in decision-making, and it may therefore be appropriate to include family members besides the mother or parents.
- Allow extra time for the appointment to accommodate the need for interpreting, establishing rapport, careful explanations and so on.



- Acknowledge that you understand that parents may have different perspectives and experiences of illness, health and disability.
- Encourage questions and respect the parent's knowledge and experience.
- Take opportunities to familiarise yourself with the cultural and religious beliefs and practices of the parents with whom you work.
- Avoid making generalisations and assumptions about ethnic groups. People from one group may 'look' similar, but differences in education, religion, culture and lifestyle can be vast.
- Beware of attributing too much to culture and ethnicity. Other factors, such as torture and trauma, grief, loss and resettlement issues, will influence the behaviour and engagement of parents and families.

Resources and additional reading

CALD (Culturally and Linguistically Diverse groups) courses are MoH-funded and developed and managed by Waitemata DHB. [These courses are free and available for DHB and PHO staff](#). For more about eCALD courses click [here](#).

HealthEd resources on new migrant health, www.healthed.govt.nz (choose 'New migrant health' from the dropdown menu).

Health Navigator website, www.healthnavigator.org.nz/clinicians/r/refugee-health/

Ministry of Health. 2012h. [Refugee Health Care: A handbook for health professionals](#). Wellington: Ministry of Health.

Ministry of Health website, www.health.govt.nz, 'Our work' section on [refugee health](#) and for [publications](#) on this topic.

Refugee Health website, www.refugeehealth.govt.nz

National Oral Health Day

National Oral Health Day is celebrated on 6 November 2020. The theme this year is 'Switch to water', with a focus on moving away from sweetened drinks (for everyone). NZ Dental Association resources are available for download via [this link](#). A limited number of hard copy resources are available on a first-come basis (please email Brooke at NZDA on register@nzda.org.nz). This day provides a good opportunity to remind families/whānau about the importance of oral health.

Children are at risk of tooth decay (or dental caries) from around 6 months – that is, from the time teeth appear in the mouth. For infants and young children who develop early childhood caries (ECC) (see risk factors below), their growth, development and quality of life can be affected. ECC often leads to significant dental problems with many teeth requiring filling and extraction, sometimes under general anaesthetic.³ Early detection of decay can therefore help prevent this disease or stop its progression and improve a child's quality of life.

³ Ministry of Health. 2013. [Well Child / Tamariki Ora Programme Practitioner Handbook: Supporting families and whānau to promote their child's health and development – Revised 2014](#). Wellington: Ministry of Health.

Risk factors for early childhood caries (ECC)

Factors that increase the risk of ECC are:

- improper use of a bottle when bottle-feeding, for example when:
 - put to bed with a bottle
 - put to sleep after feeding without cleaning the teeth
 - the bottle is used for prolonged periods
 - the bottle is used for feeding sweetened drinks
- snacking with sugary foods and drinks throughout the day
- not starting to clean teeth regularly with a fluoridated toothpaste as soon as the teeth erupt through the gums
- having a history of high levels of tooth decay in the family
- living in a low-income family or in non-fluoridated areas
- being born prematurely or at lower-than-normal birthweight, or being born with developmental disabilities and disorders

In addition, some breastfed babies who nurse for long periods throughout the day and night may develop ECC. However, breast milk is the best form of nutrition for infants and breastfeeding is associated with a lower risk of developing dental decay when compared with bottle-feeding.



Upcoming events

- National Oral Health Day: 6 November
- [International Day for the Elimination of Violence against Women \(White Ribbon Day\)](#): 25 November
- [National Safe Sleep Day/Te Rā Mokopuna](#): 4 December
- [World Volunteer Day](#): 5 December
- [Human Rights Day](#): 10 December
- [International Migrants Day](#): 18 December

Website address: www.wellchild.org.nz; for previous newsletters, see the *Health info & Resources* tab.

Newsletter mail-out dates for 2021: 15 February, 17 May, 16 August, 15 November



Updating your contact information

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If you know other providers who do not receive our newsletter or updates, you can forward this link (<http://eepurl.com/KpORP>) to them to register.

