Children's Mental Health Taskforce

Meeting Minutes

August 13, 2014

Present: Co-Chair: Senator Bartolomeo Rep. Whit Betts, Dr. Charles Newfield, Dr. Myron Genel, Dr. Irvin Jennings, Tina Fox Dugdale, Gracelyn Guyol Next meeting: 9/17/14 11am

I. Convene Meeting

a. Meeting convened at 11:05am.

II. Remarks by the Chairs

a. Co-chair Sen. Bartolomeo welcomed the Task Force, explained co-chair Rep. Diana Urban away on vacation, and introduced presenters.

III. Presentation: Tina Fox Dugdale & Claire Dalidowitz, Making Connections: Kids Nutrition and Mental Health

a. Tina Fox Dugdale- Poor maternal prenatal nutrition is a contributing factor to child mental health issues. The rapidly developing fetal brain is vulnerable to nutrient insufficiencies as is the brain of young children. Certain nutrients such as DHA and vitamin A effect brain development more than others. The prenatal diet can "program" a child's development. Food insecurity effects mental health both in terms of nutrient deficiencies and in terms of the psychological stressors caused by uncertainty that one will be able to acquire an adequate quantity of food in a socially acceptable way. Nearly 1 in 11 CT residents are experiencing food insecurity. In order to secure an adequate quantity of food, dietary quality suffers, contributing to increased childhood obesity. Both protein-calorie malnutrition and nutrient deficiencies have a detrimental effect on the development of the neurotransmitter systems and greater brain development. For example the synthesis of serotonin, a mood regulator in the brain linked to depression, partially depends on the intake of foods containing tryptophan and vitamin B-6. Poor nutrition affects the temperament of young children; temperament is linked to later behavioral problems and adjustment disorders. Children (0-5) with iron deficiency have a pattern of temperament of increased wariness, social inabilities, slow reactivity, and negative emotionality. Furthermore mothers suffering from mental health issues and poor nutrition may undermine infant growth. Charts depicting the relationship between child and parent nutritional deficiencies, parent-child relationships, and mental health issues can be found in presentation materials.

i. Questions-

1.Rep. Betts- On your last slide, farmers in general try to educate consumers in terms of what they are buying but people lack the knowledge or motivation to prepare health foods. What would you suggest the WIC program do to address this? Tina Fox Dugdale- Well that's a great question, we have to keep trying.

- 2. Dr. Jennings- Is there any disorder or identified behavioral problem you would recommend a specific diet or particular food you would treat with? Tina- That is a clinical question, I educate people on the basics.
- 3. Sen. Bartolomeo- Are supplements just as good? Tina- No the nutrients in supplements are not as bioavailable as those in real food.

4. Sen. Bartolomeo- The My Plate example showed no oil category, but essential fatty acid come from oil, can you comment on that? Tina- When you get into the teaching of the My Plate those sorts of good fats are

discussed as part of the protein section.

b. Claire Dalidowiz- Example of how DHA affects child mental health. DHA is found in fish, if a pregnant mother does not eat fish, child is born with low stores of DHA, mother breastfeeds with low stores, lack of DHA results in child's inability to stay on task as well as decreased word recognition and reading, and increased aggression. A number of additional case studies

are included with presentation materials as well as handouts related to DHA and Choline. Short term recommendations include insurance reimbursement of complete vitamins and minerals, DHA supplements, and RD nutritional counselling for Medicaid recipients. Long term recommendations include addressing child poverty and food insecurity, as well as increasing pre- and post-natal supports and community gardens.

i. Questions-

- 1.Dr. Jennings- Is there any disorder or identified behavioral problem you would recommend a specific diet or particular food you would treat with? Claire Dalidowitz- It depends; there is no one magic thing.
- 2.Dr. Jennings Is there are connection between a single food or food group or supplement and a behavioral health problem?

Claire- (Discussion of the choline handout which can be found with presentation materials).

3. Sen. Bartolomeo- Just to clarify, I've heard anecdotally that St. John's Wart can help with depression, if a child with depression walked in to your office is the something that you would have them eat?

Claire- It depends on the child. We must be cautious because medications effect vitamin absorption but supplementing vitamins that compete for carriers can result in an insufficiency of another vitamin.

- 4.Dr. Jennings- just a few notes, St. John's wart was popular but studies did not show an effect on depression, also once it was thought that feeding children sugar lead to ADHD, this has also not be shown in the studies.
- 5. Dr. Genel- I think the overall message here is public health. We will not see short term changes or a specific thing that solves a single issue but over time with good nutrition and good activity we can make a difference.
- 6. Gracelyn Guyol- When I work with people on alternative treatments that do not have insurance or have state insurance they cannot afford natural supplements but they can get covered for every drug out there, we should encourage coverage of supplements by insurance.

IV. Focus Group Reports/ Discussion

Gracelyn Guyol- For the people who were not here for the July meeting I made ten holistic mental health recommendations to the task force in writing, they were handed out but most of us weren't here. I'm told they're on the website and I have asked the secretary to email them to the whole group.

V. Other Business

Senator Bartolomeo- We have another meeting on September 17th and our report is due on September 30th. We want to give thought as to whether we are done or need to continue. So what we want is for the subgroups to compile their recommendations and get them to Alessandra prior to our September 17th meeting we will use that meeting to decide where we want to go. Also by the time we have our next meeting the new security will be up and running, what that means is guest will not be able to use the walkway on the third floor of the garage, you can still park there but will need to walk around to the main entrance, it will increase time.

VI. Closing

Meeting is adjourned at 12:25pm