Dear Members,

Welcome to the second edition of our newly revised newsletter. We begin this issue with a thoughtful reflection on the devastating shooting in Parkland, Florida by a developmental-behavioral pediatrician, Judith Aronson-Ramos, MD. This piece follows a call to action by our president, Nancy Lanphear, MD, in her president’s bulletin (also posted on the discussion board) as well as several recent posts by our Twitter team about gun violence prevention. SDBP has also formally endorsed the Curry School of Education Call to Action.

This issue also includes several updates from our wonderful SIGs, Sections, and Committees. Be sure to check out the special spotlight on the International SIG as well as a piece on encouraging family self-advocacy from the Advocacy Committee. We are also excited to spotlight an SDBP psychology fellow, Dasha Solomon, PhD, as well as the involvement of several trainees as part of our new Twitter Team.

Finally, we want to take a moment to recognize the passing of a giant in the field of pediatrics, T. Berry Brazelton, MD. If you have not already, please check out the post by Jeff Yang, MD on the discussion board to hear more about his impact on our members or to post your own thoughts and memories. There will also be a celebration of Dr. Brazelton’s life on Monday, April 23rd in Boston: www.brazelontouchpoints.org/honor. And you can also Share tributes, stories, and memories of Dr. Brazelton’s impact on the Brazelton Touchpoints Center’s Facebook page – www.facebook.com/BrazeltonTouchpointsCenter.

As always, feel free to send us any feedback or newsworthy information to include as you see fit! We welcome submissions from all members and would love to hear from you! The next submission deadline will be May 31, 2018. Questions about submissions can be sent to schlenz@musc.edu.

Thank you!
SDBP Communications Committee

Newsletter Team: Alyssa Schlenz, Lisa Campbell (co-chairs), Shruti Mittal (Trainee/Recent Grad Liaison), Janice Wilkins (Association Manager), and Meg Gorham (Newsletter Designer)

In this Issue

- Reflections on Parkland
- Encouraging Family Self-Advocacy
- Spotlight on International SIG
- Trainee Spotlight
- Meet our Twitter Team!
- Committee Updates
- SIG/Section Updates
Reflections on Parkland

Submitted by: Judith Aronson-Ramos, MD,
Developmental & Behavioral Pediatrician in Parkland, Florida

Nestled in the northwest corner of Broward County, on the edge of the Everglades, Parkland used to be a little-known city. We joked that busy nights for the police were catching people driving 40 mph on our main two-lane road. My husband and I chose Parkland after the birth of our second daughter and have been living here for 23 years. Both of our children are proud graduates of Marjory Stoneman Douglas High School.

On February 14th our world shattered as bullets rained down on our community. My own sense of safety and reality were turned upside down. The unthinkable happened, right here. Our friend’s children were murdered, many of the families I treat suffered tremendous loss or were intimate witnesses and victims of the violence. Teachers we know and loved were killed, others were traumatized by the terror of sheltering their students and themselves for hours awaiting rescue. The first few weeks were surreal. So many funerals, so many people in black, the town frozen in sorrow and disbelief. But quickly, the courage of the students pulled everyone out of the fog and into action.

As a developmental and behavioral pediatrician, I am fortunate to be able to help my community directly. I have been working with trauma-trained therapists to provide free immediate therapy, and I continue working with members of the community to be sure these services are long lasting. The FAAP has agreed to help develop a local task force to address ongoing community needs and advocate for safer gun laws. There is a strong sense of pride in our community now regarding our response to the tragedy. However, there is still so much we have yet to accomplish.

As developmental and behavioral pediatricians we all get some training in bereavement, trauma, and PTSD. However, now it is critical to learn more about current conceptualizations of grief and loss, interventions for acute trauma and management of chronic and delayed grief. There has been considerable development and change in our understanding of grief as a process, as well as a growing database of information about the psychological impact of school shootings. To effectively support grieving children, teens and families means understanding the grieving process is unique to each individual. It also means understanding the grieving process is not linear. Learning to live with loss in an adaptive way is more meaningful and helpful than trying to “overcome” a traumatic loss in an unrealistic push toward closure. I have continued to work through my own grief by providing ongoing care, resources and education, and by taking action with community groups. It has also been critical to my own healing process to have the
support of my colleagues and groups such as Sandy Hook’s Promise, Mom’s Demand Action,
and so many others who have been working for a safer society for years.

Wherever you live in the United States of America, there is something you can do. I urge you,
my colleagues, to use your unique position as trusted experts in your community to take action.
Whether it is gun safety education, mental health screening and treatment, legislative action,
resiliency projects, or learning more about the acute and chronic care of traumatized youth, it is
time to be part of the wave of change that is coming. If we do nothing, we are complicit in the
senseless deaths of children across the nation. Gun violence is a public health crisis. Firearm
related deaths continue as one of the top 3 causes of death in American youth. Changing gun
laws in the USA should not be viewed as impossible or impractical. We have managed to make
sweeping changes like this in our country before. Seat belts did not become mandatory until
1968 and it took another 25 years for this law to be implemented in every state. With these car
safety laws, it is now unquestionable that seat belt use has dramatically reduced death and
injury from motor vehicle accidents. Without better gun safety laws, there will undoubtedly be
another mass shooting. Now is the time to do something about it because our lives and those of
our children depend on it.

Encouraging Family Self Advocacy in Behavioral Pediatrics

Submitted by: Jenna Wallace, PsyD on behalf of the Advocacy Committee

In the midst of a chaotic follow up appointment, your patient’s father brings up his latest concern
– the family feels unsupported by their community at large. They have tried to help their son,
who has autism, enjoy “normal kid” activities – a trip to the ball park or the zoo, shopping trips to
Target, and Sunday worship at their local church. However, they can’t seem to escape the
stares of others and the meltdowns that occur when he is overstimulated or they experience
hiccups in their plan for the day. They are asking you for advice and feel helpless.

As professionals, teaching family self-advocacy is an important part of helping families achieve
their goals. We are often involved in helping our patients battle insurance companies and school
systems – but what about the stress that they experience in their everyday lives? Many of us
are wired to take on these battles on behalf of our patients, but we can serve families well by
encouraging them to advocate on their own behalf.

Planning ahead is an important part of advocacy; you can help families tackle problems by
guiding them to anticipate them in advance. Once they are aware of the potential hang-ups in
their plan, they can communicate their needs to local organizations before they leave home.
Parents may consider calling their place of worship to request a meeting with the child care
director and create a behavior plan for their child, or they might call ahead to a restaurant to ask
about their peak times and request a more isolated section of the restaurant. Unfortunately,
some places are unwilling or unable to accommodate the needs of our patients; however,
knowing this in advance can help to circumvent unnecessary stress. Large, family-friendly
organizations like Disney World are quick to offer accommodations, but families must know to
ask and communicate their needs far in advance. We recommend that you regularly provide
information to patients for local and state parent advocacy groups, direct families to the
autismspeaks.org “Advocacy Toolkit,” and empower them to take action in the face of difficult
circumstances.
Spotlight on International SIG

Submitted by: Dr. Demvihin Ihyembe, MD - Communications Committee Liaison

**ANNUAL MEETING CLEVELAND 2017**

Thanks to all for a great I-SIG meeting in Cleveland! We were able to use the Zoom Videoconferencing Platform to hear from 3 colleagues doing incredible DBP work in China, Rwanda, and Nepal. For those who were unable to attend our meeting, we’re happy to provide you with a snapshot of the information we learned!

**Dr. Susan Cadzow**
(DBP in Shanghai, China)
Dr. Cadzow is the Director of Developmental-Behavioral Pediatrics for LIH Olivia’s Place. Susan spoke of the challenges they face in China related to providing Developmental-Behavioral Pediatric care: limited awareness/understanding of disability; centralization of expertise; shortage of pediatricians and no specific DBP training; limited interdisciplinary collaboration; poor educational opportunities for children with disabilities. LIH Olivia’s Place is currently in the process of building teams to support a model of family-centered, interdisciplinary, evidence-based developmental and rehabilitation services that can be accessed by ALL people of China.

**Dr. Jean Paul Rukabyarwema**
(Pediatrician in Kigali, Rwanda)
Dr. Jean Paul is a pediatrician in Kigali with a passion for developmental-behavioral peds. Mentored by Dr. Robert Needleman, Jean-Paul has a heart for teaching DBP to residents, increasing community knowledge of developmental delays and disabilities, and providing compassionate and evidence-based interventions for children with disabilities. He is the only one in his region with some developmental peds expertise!

**Dr. Hemsagar**
(DBP and Pediatric Hospitalist in Nepal)
Dr. Hem is the only Developmental-Behavioral Pediatrician in Nepal. His wife is a psychologist. Together, they are working to improve awareness of developmental disabilities. They spend a lot of time advocating and providing interdisciplinary training for residents, therapists, and community workers. Hem also provides a lot of developmental-behavioral care in the context of humanitarian emergencies – the country is still coping with the ramifications of its recent earthquakes.

**I-SIG INITIATIVE**

**iCOR2: International Office Collaborative Rounds 2 Project**
We are very fortunate to be a part of the iCOR2 Project and are thankful to many of you for submitting your applications for participation. International participation has been robust and we will continue to provide updates on how the I-SIG is involved and integral to this exciting initiative.

**International Pediatric Association (IPA)**
Check out the International Pediatric Association: www.ipa-world.org! Pay particular attention to the efforts of the Humanitarian Emergencies and the Early Child Development Technical Advisory Groups (TAGs)

**We would LOVE to hear from you!**
Are you doing research related to International Developmental-Behavioral Pediatrics? Have you attended any International DBP Conferences – like the International Developmental Pediatric Congress that was held in Mumbai Dec 7-10, 2017? Do you travel to provide DBP-related care in low resource settings or to immigrant communities? We would love to hear from you and feature your experiences/work!
Email: Abigail Kroening abigail_kroening@urmc.rochester.edu or Ayesha Cheema-Hasan: ashifaisal55@yahoo.com
PLATFORM PRESENTATIONS

1st South Asia Regional Conference on Child Rights and 12th National Child Rights Conference of PPA (Pakistan Pediatric Association)

Dr. Karen Olness (DBP and Professor, Case Western Reserve University) and Dr. Ayesha Cheema-Hasan (Assistant Professor (adjunct) Brown University) were invited presenters. (Pakistan)

Hannover Germany Symposium: Interdisciplinary Perspectives on Unaccompanied Minor Refugees. "Advancing the care of refugee children with developmental delays or disabilities: An interdisciplinary approach spanning developmental-behavioral screening to specialty services.

Dr. Abigail Kroening (DBP and Assistant Professor University of Rochester Medical Center) was a plenary Speaker. (Germany)

AAP Developmental-Behavioral Pediatrics Faculty for Project ECHO (Extension for Community Healthcare Outcomes) Zika: November 2016 - Present.

Through this initiative, Dr. Abigail Kroening provides tele-mentoring and bidirectional information flow for communities in Puerto Rico and American Samoa.


Presented by the Departments of Pediatrics, Psychiatry, and Obstetrics/Gynecology, University Hospitals Case Medical Center, Case Western Reserve University School of Medicine of which Dr. Karen Olness is faculty. (USA)

ONGOING PROJECTS

CDC Project ZODIAC (Zika Outcomes and Development in Infants and Children)

Dr. Georgina Peacock, Division Director for the Division of Human Development and Disability (DHDD) at the National Center on Birth Defects and Developmental Disabilities (NCBDDD)

CDC Project ZODIAC

Development and implementation of a DBP curriculum for medical students and pediatric residents at the National University of Singapore: Dr. Evelyn Law, National University Hospital of Singapore

A Ministry Of Sharing (AMOS) Health and Hope Developmental Assessment Project in the Nejapa Neighborhood of Managua, Nicaragua: Dr. Denise Bothe, MD (Rainbow Babies and Children's Hospital),
her husband Dr. Joe Daprano, MD (MetroHealth Hospital, Cleveland) and project team have found a high incidence of positive screenings for developmental delay as children approached school age. This project is expanding to assess which factors could be addressed to maximize interventions aimed at improving the developmental and learning trajectories of affected children.

Trainee Spotlight: Dasha Solomon, PsyD

Submitted by: Jason Fogler, Ph.D. on behalf of the Psychology Section

Dasha Solomon, PsyD, is a postdoctoral psychology fellow at Boston Children’s Hospital Developmental Medicine Center (BCH, DMC). She completed her doctoral training at the Chicago School of Professional Psychology and her predoctoral clinical psychology internship at the University of Rochester School of Medicine and Dentistry. Her past research focused on dating, romantic relationships, and sexual health needs for people with autism. Dasha has continued to pursue her research interests in Susan Faja, Ph.D.’s Lab at BCH, focusing on intimate relationships and healthy sexuality for people with autism. She presented on this topic for BCH’s Autism Spectrum Center Parent Forum and the Laboratory of Cognitive Neuroscience. Dasha developed and presented a lecture to second year medical students at Harvard Medical School (HMS) focusing on collaborative care and working effectively with patients and families. Additionally, she had the opportunity to co-teach a course entitled Human Development to students at HMS. Dasha has the privilege of working with infants, children, and their families in the DMC where she conducts psychological assessments and treatments for children with developmental disabilities and feeding challenges. She looks forward to continuing her work in the DMC as a staff psychologist and an instructor at HMS next year.

Dasha is looking forward to attending the upcoming SDBP conference and getting involved in committees. She encourages other psychology students and trainees to pursue their ultimate clinical and research goals with confidence, be open to new challenges and opportunities, collaborate with colleagues and mentors, and always make time for life outside of work.
Twitter Updates: Meet our Twitter Team!

Jeff Yang (SDBP web editor and @jdpb_online) and Michelle Lavardiere (our original Twitterician) are pleased to announce the addition of several trainees to our Twitter Team! The team will be responsible for ensuring that consistent content is posted on our Twitter feed and will be helping to identify ways of enhancing Twitter for our membership.

@sdbpeds
@jdpb_online

Committee Update: Advocacy, Education

Advocacy Committee Update
Submitted by: Jenna Wallace, PsyD

In the midst of a chaotic follow up appointment, your patient’s father brings up his latest concern – the family feels unsupported by their community at large. They have tried to help their son, who has autism, enjoy “normal kid” activities – a trip to the ball park or the zoo, shopping trips to Target, and Sunday worship at their local church. However, they can’t seem to escape the stares of others and the meltdowns that occur when he is overstimulated or they experience hiccups in their plan for the day. They are asking you for advice and feel helpless.

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Education Committee Update
Submitted by: Jennifer Poon, MD

The Education Committee is actively preparing for the Teaching DBPeds workshop to be held during the 2018 Annual Meeting. The workshop will be held on Friday, September 14, 2018, with hopes to include a track on Mental Health Topics in Training. SDBP has also partnered with NAPNAP (National Association of Pediatric Nurse Practitioners) in development of a symposium with specific focus on core requirements of Advance Nurse Practitioners, including mood and anxiety disorders, autism spectrum disorder, and complex ADHD. This year’s meeting is sure to be filled with great educational content and a diversity of attendees! Please continue to check the SDPB meetings website page for updates.

SIG/Section Updates: Autism, Early Childhood, Advanced Practice Nurse

Autism SIG Update
Submitted by Karen Ratliff-Schaub, MD

The Autism SIG is a forum within SDBP to discuss and address opportunities and challenges in autism clinical practice, research and policy. At the 2017 SDBP annual meeting, in response to the SIG membership interest in practice guidelines, Dr. Carolyn Bridgemohan presented a comprehensive overview of current ASD guidelines, as well as the gaps and areas not addressed and the potential focus for the SDBP in future guideline development. Dr. Robin Hansen discussed her choices for the Top Ten articles of the year relevant to ASD’s. The SIG is now in the process of planning for the 2018 meeting in Anaheim. Suggestions from members are welcome! We are also undertaking preliminary discussions about establishing workgroups within the Autism SIG. Please contact the co-chairs with potential areas of focus and interest in active participation.

Early Childhood SIG Update
Submitted by: Miguelina German, PhD and Katherine Steinfass, MD

The Early Childhood SIG is comprised of work groups focused on different areas pertaining to the developmental and behavioral needs of young children. Current work groups include Screening in Primary Care), Postpartum Mood and Anxiety Disorders (PMAD) (Co-leaders: Jack Levine and Polina Umylyn), NICU F/u and Early Intervention (Co-leaders: Howard Needleman, Marie Clark, Katherine Steingass), and Positive Parenting (Co-leaders: Deborah Winders Davis and Lauren O’Connell). Any SDBP member interested in joining one of the work groups can contact either of the SIG co-chairs.

Recent activities of the EC-SIG:
- PMAD workgroup: Members wrote several articles for a special issue of Current Problems in Child and Adolescent Health Care focused on PMAD:
Focus areas for current and future projects:

- Screening in Primary Care: use of quality improvement methods to implement developmental screening; social-emotional screening; compiling screening resources for the SDBP e-library; discussion board for questions related to screening in primary care
- PMAD: resources for SDBP e-library on PMAD; advocacy for payment for screening for PMAD as part of well child care; second webinar on PMAD
- NICU F/u and Early Intervention: collaboration between NICU f/u clinics and local EI programs, late preterm infants, teaching NICU f/u, developmental behavioral outcomes for children with neonatal abstinence syndrome and in utero drug exposure

Advanced Practice Nurse SIG Update
Submitted by: Pat Curry, MSN, APRN, CPNP-PC, PMHS

The Advanced Practice Nurse Section is collaborating with the SDBP Education Committee and the National Association of Pediatric Nurse Practitioners (NAPNAP) to develop an educational platform for APRN’s interested in working in Developmental and Behavioral Pediatrics. Section members are assisting with the planning of a pre-conference advanced practice nursing symposium to be held at this fall’s annual meeting in Anaheim, CA. The full day symposium will focus on the diagnosis and treatment of ASD and ADHD using a case-based approach that incorporates differential diagnosis, evaluation and interpretation of test results, medication management, therapeutic, psychosocial and school interventions and treatment of co-morbidities. The symposium will be promoted by NAPNAP and SDBP and will hopefully attract new APRN members to SDBP.

A survey was sent to the APN Section members last fall to better understand their experiences and opinions regarding career preparation in DBP. Over half of section members responded to the survey (23 responses) with the following results:

- Practice sizes varied, ranging from 0-12 MD’s and 1-6 APRN’s.
- Respondents were experienced nurse practitioners (years of practice as NP ranged from 6-40 years; years of practice as NP in DBP ranged from 2-31 years).
- Only 30% of respondents had formal training in DBP; half had no prior clinical experience in DBP before their current job.
- Most job orientation consisted of shadowing or on-the-job training only; some NP’s attended DBP Prep or completed LEND traineeships.
- 70% of respondents had no established clinical competencies for their role. Performance evaluations included peer review/feedback, chart review, productivity benchmarks (e.g. RVU’s), patient/family ratings and OPPE.
• Respondents rated clinical practicums, APRN fellowships and on-the-job training as the “best” ways to prepare for a role in DBP. Conference symposiums and on-line learning modules were rated as “less helpful.”

In summary, Section members felt that there were not enough training opportunities for advanced practice nurses seeking a career in Developmental and Behavioral Pediatrics. Some standardization of job orientation and clinical competencies would be beneficial for practices seeking to hire an advanced practice nurse. More work needs to be done to prepare the future APRN workforce in DBP, especially if the volume of medical fellowship applicants in DBP continues to decline and the need increases for more advanced practice nurses in the field.

Traineerecent Graduate Section Update
Submitted by: Shruti Tewar, MBBS

In 2018, STRG’s primary aim is to improve internal communication within our network of trainees. The STRG section is very appreciative that the society is receptive to trainee input and contributions, and we hope to also play a more active role with external communications to other SIGs, Sections, and Committees.

Since the 2017 SDBP Meeting, we have been able to create a comprehensive email list-serve that has allowed us to gain a better understanding of how our section can be helpful to early career practitioners and trainees. By doing this, we have also been able to quickly reach out and communicate upcoming projects and opportunities. Trainees have provided ideas for the e-library, posting on SDBP’s discussion board, and made contributions to the newsletter and twitter team.

The STRG section is thrilled to have submitted a pre-meeting workshop proposal for trainees and junior faculty on early career development, with the guidance of senior faculty members. A brief needs assessment of the STRG section was completed to assess what trainees are interested in learning more about in regards to early career development. 68 trainees responded to a survey sent out to the section. 86.0% of participants responded yes, they are interested in attending a workshop for trainees on navigating professional development and early career. If approved, we would like to propose a reduced fee or no fee for trainees participating in this workshop.

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E-Library Highlights
Please submit to the e-library! Check out these recent additions:

- From Madness to Methods: Expanding Knowledge And Repertoire Of Instructional Teaching Methods In Developmental And Behavioral Pediatrics
- Infant Mental Health Training In DBP Settings
- Teaching Pediatric Residents Assessment And Management Strategies To Address Common Behavioral Concerns In General Practice
- Mindful Clinical Practice: Tools for DBPeds Learners
- Shared Decision-Making In Developmental-Behavioral Pediatrics: Teaching Residents

Discussion Board Highlights
Join the discussion at sdbp.org. Recent topics have including a range of clinical and practice issues, such as:

- Memories of T. Berry Brazelton
- Resources for families regarding stress and trauma (more to come on e-library)
- Screening tools for dyslexia
• GPS trackers for elopement
• Managing medication side effects and adverse events
• Online ABA programs for parents

Media News Highlights

• A brief intervention to help parents manage children’s screen time
• What is the vmPFC and why is it important?
• Bullying remains about perceived differences
• Vitamin and mineral supplements show some promise in kids with ADHD
• Modern teenagers are delaying adulthood

Do you have a current event in the media that we should highlight? Send it to Jeff Yang at: jdbp.webeditor@gmail.com

Deadlines and Reminders

Upcoming SDBP Deadlines
• 2018 Abstract submissions NOW OPEN! - Deadline: May 8, 2018
  https://www.sdbp.org/meetings/
• Research Scholars Symposium – Applications now open! - Deadline: May 15, 2018
  https://www.sdbp.org/secure/awards/sympsubmit/

Save the Date!
SDBP and NAPNAP (National Association of Pediatric Nurse Practitioners) are teaming up to provide a one-day special symposium just prior to the SDBP Annual Meeting in Anaheim, CA:

Developmental Behavioral Diagnosis and Management in Pediatrics – September 14, 2018
The multidisciplinary program will be presented jointly by NP, physician and psychologist colleagues using two case-based approaches: autism in a younger child, and ADHD/Anxiety/LD in a teen. This 8-hour event offers highly rated, evidence-based continuing education to PNPs, FNPs and other pediatric providers and will take place on the Friday before our annual meeting in Anaheim, California. More information will be available soon on the SDBP meetings website page: http://www.sdbp.org/meetings/

Reminders
• SDBP 2018 Annual Meeting
  September 14 - 17, 2018
  Anaheim Marriott
  Anaheim, CA
• Stay up to date with our Calendar of Events!
• Have you seen the new Twitter bird on our website? Check our Twitter feed by clicking on the 🦃 on the left-hand side of the screen at sdbp.org or follow us @sdpeds and @jdbp_online.

Announcements
The SDBP Communications Committee is searching for an e-librarian. The e-librarian would be responsible for checking the library once a month, noting gaps in content, and requesting that
members remember to post on the e-library by posting a monthly message on the discussion board. This position is estimated to take **no more than 20 minutes per month**; however, those who are interested are welcome to provide suggestions and feedback for improvements or work on initiatives to enhance the e-library as well. We would ask that the e-librarian agree to a **6 month position**. **We would acknowledge the e-librarian on the website and the newsletter.** Please email Lisa Campbell at lbcampbell@cmh.edu or Alyssa Schlenz at schlenz@musc.edu if you are interested.

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### Awareness Events

- **April**
  - Autism Awareness Month
  - Child Abuse Prevention Month
  - Month of the Military Child
  - Alcohol Awareness Month
  - Sexual Assault Awareness and Prevention Month
  - Stress Awareness Month
  - Youth Sports Safety Month
  - World Autism Awareness Day (April 2)
  - National Alcohol Screening Day (April 5)
  - International Children’s Book Day (April 2)
  - World Health Day (April 7)
  - RAINN Day (April 26)
  - Take Our Children to Work Day (April 26)
  - Screen-Free Week (April 30-May 6)

- **May**
  - Asthma and Allergy Awareness Month
  - Global Youth Traffic Safety Month
  - Huntington’s Disease Awareness Month
  - Mental Health Month
  - Military Appreciation Month
  - National Foster Care Month
  - National Mobility Awareness Month
  - Physical Fitness and Sports Month
  - Teen Pregnancy Prevention Month
  - National Children’s Mental Health Awareness Day (May 10)
  - International Nurses Day (May 12)
  - National Prevention Week by SAMHSA (May 13-19)
  - International Day of Families (May 15)
  - World Asthma Day (2nd Tuesday in May)
  - National Missing Children’s Day (May 25)
  - World No Tobacco Day (May 31)

- **June**
  - LGBT Pride Month
  - National Safety Month
  - Global Day of Parents (June 1)
  - International Children’s Day (June 1)
  - National Cancer Survivor’s Day (June 3)
  - Autistic Pride Day (June 18)
  - World Sickle Cell Day (June 19)
  - World Refugee Day (June 20)
  - World Vitiligo Day (June 25)

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Questions about submissions can be sent to Alyssa Schlenz: schlenz@musc.edu

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Society for Developmental and Behavioral Pediatrics