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Introduction

Réamhrá

Welcome to **Caring for Your Child: Six Months to Two Years Old**. This pack contains valuable information to help you care for yourself and your child over the next year and a half.

Caring for your young child is an exciting and challenging time for everyone involved. This information pack will help you deal with the everyday concerns of being a parent. It will also point you to people and services that offer further information and support.

This information in this booklet is also available on audio compact disc CD. Contact your local public health nurse if you wish to receive a copy of this CD.

We hope you enjoy reading and listening to this information pack and find it useful.

Here are some comments from parents who made good use of the first and third information packs.

“The information pack has allowed us to become very confident as first time parents. Thank you for your support and concern.”

“We really appreciate and value the information and research that went into this pack. The support and encouragement we got from it allows us to strengthen our relationships as parents, as a family and as part of our community.”

Caring for Your Baby:

Birth to Six Months Old

*Ag thabhairt aire dod' leanbh
Ó breith go sé mhí d'aois*

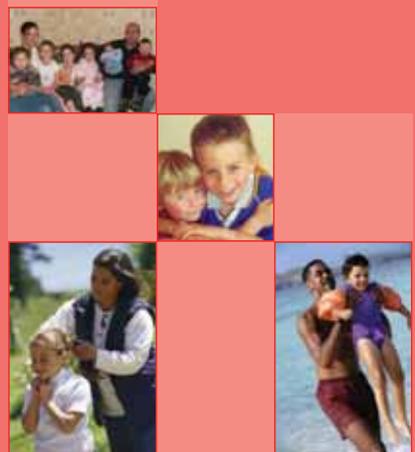


Contact your local public health nurse or health promotion office if you wish to get a copy of these two information packs.

Caring for Your Child:

Two to Five Years Old

*Ag thabhairt aire dod' páiste
Dhá go cialg bliain d'aois*



1. Taking care of yourself as a parent

Ag tabhairt aire duit féin mar thuismitheoir

Especially for Mams

Go h-áirithe le h-aghaidh máithreacha



Caring for a small child is rewarding, but it can be very tiring too. Let your partner or a family member help with the day-to-day housework, if you can. If you do not have a family member to turn to, see page 6 for details of extra sources of support. Then you can focus on your child and yourself until a pattern forms in your daily routine that you are able to manage.

You may also feel that you have very little time for yourself since your child was born. But it is important to look after your own needs so that you are better able to look after the needs of your family. Here are some tips to help you unwind.

- Ask your partner or a family member to look after your child while you have a short rest.
- Go for a walk or a swim.
- Call in on a friend for a chat over coffee.
- Treat yourself to little things such as a new hair do if you can afford it, or even a magazine to read.

Eating well

It can take your body up to nine months to recover fully after a pregnancy and delivery, especially if you had a caesarean section. To help you recover, follow a healthy eating plan and combine it with exercise. Look at the food pyramid to help you choose a balanced diet. And remember that going on a weight loss diet is not recommended just after you have given birth especially, if you are breastfeeding.



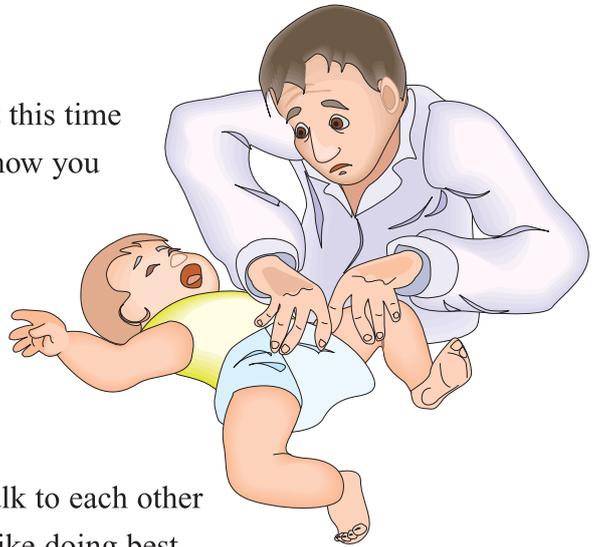
Especially for Dads

Go h-áirithe do Athair

Nothing prepares you for being a dad like the hands-on experience you get after your child is born. Being a father is the most special, rewarding and exhausting role you will ever have.

You and your partner need to support each other at this time more than ever before. This includes working out how you will share things like:

- getting up at night to feed your child;
- bathing and feeding your child; or
- discussing who is better able to take time off work to care for your child if he or she is sick.



The important thing is that you and your partner talk to each other about both of your needs and the things you both like doing best.

Perhaps you are better at cooking or washing up, or you may be better at settling your child down to bed at night.

As the months go by, your child settles into a pattern, including feeding and sleeping. Then your child begins teething at around 6–9 months old. Your sleepless nights may be back again. If you feel all of this is getting to be too much, or if it is affecting your ability to concentrate at work, then talk with your partner about ways you can both manage through this time.

Sometimes, you may not have a partner to turn to for support. Page 6 of this section has details on where you can get in touch with extra sources of support so that you can do the best for your child and yourself.

As your child grows and develops, he or she will become more alert. The most important thing you can give your growing child is your love. This includes spending time with your child and getting to know them by keeping actively involved in their routine. If you work outside the home, set aside some time when you come home. Play and read with your child, even though you may feel tired after a day's work. Remember that your partner is

also tired after a long day caring for your child or working, just like you. After you spend time with your child, spend time with your partner to chat and relax. You also need to care for yourself. Arrange some free time for yourself to relax. For example, meet up with friends or go to the gym.



For Mams and Dads

Do na Máthair agus Athair

Physical activity

Exercise is an important part of both parents' lives. It helps you to unwind and keeps you both healthy and alert. Here are some tips for keeping active and healthy.

- Go for a walk with your partner. Take your child in their pushchair (buggy).
- Go for a swim with your family.
- Play in the park with your child.



Going back to work

It can be stressful and exhausting if you are going back to work outside the home when your maternity or paternity leave is over.

- You may now have to send your child to a childminding service or have a childminder come to your home.
- You may also have older children to get ready for school.
- You will have to focus on your job as well.
- You have to do all this when you might feel tired as a result of adjusting to your child's sleeping, feeding and daily routines. But it is important to find the balance between your work needs, your family needs and your own needs. As your child grows, a daily routine will emerge. While it will not get any easier, you will get more used to the daily organising that is part of being a parent.



Looking after yourself and your close relationships

As a parent, you aim to do the best for your child and your family. You learn to do this as you go along, taking the tips you learned from your own upbringing, from other people and from the supports around you.

Remember that you are also a person as well as a parent. You need to look after yourself so that you can look after others around you. Take care of yourself and your close relationships in the ways listed below.

- Be realistic as a parent. Try not to expect too much of yourself or of others around you, but don't take yourself or others for granted either.
- Trust your instincts. You are doing a good job and learning new things every day in this important role.
- Reward yourself regularly by relaxing and doing something that makes you feel good, like taking some time out to go for a walk or go to the pictures or go out for a meal with your partner or a friend.
- If you make mistakes, then learn from the experience and move on. All parents make mistakes because nobody is perfect.

- Although you may not always agree with your partner, never argue in front of your child. Arguing upsets children. Discuss your feelings in private and work out a solution together.
- If you find that it is hard to cope, then do not be afraid to seek **extra support for parents**.

Getting extra supports for parents

Ag fáil breis tacaíochta do thuismitheoirí

There may be certain times as a parent when you need extra support to help your child and your family. You are not alone in looking for help. You will find that other parents need extra support at times too. Getting extra support is a smart thing to do – it clearly shows that you value your family. There is a wide range of services available to help you and your family when you need it. Here are some examples of supports.

Public health nurses are there to help you and your family. They are experienced in the area of child and family health and offer:

- information, health promotion and advice; and
- support to parents and carers of children.

For example, your public health nurse can give advice on feeding including breastfeeding; on your child's development, progress and well-being; and advice about children with special needs or long-term illness. Your public health nurse can also refer you to other sources of support in your local area such as:

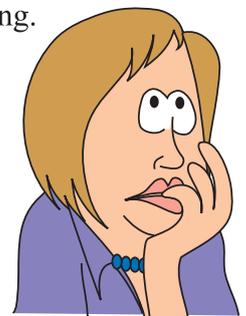
- a parent and baby or toddler group;
- the community mothers' programme;
- parenting classes; or
- support services offered by the Health Service Executive and other organisations.



Family Support Agency (FSA) is a resource for families and their well being.

If you or your partner are unhappy in your relationship, or if there is conflict and you argue in front of your children, seek professional advice. The Agency links with voluntary organisations around the country that offer:

- marriage counselling;
- child counselling;
- child bereavement (sadness) counselling and support; and
- family mediation. Family mediation is a free and confidential service that helps parents who have decided to separate or divorce. Mediation helps you look at and sort out the wide range of issues involved, such as future childcare or money issues.



The contact details for the FSA are on page 54 of this booklet.

You can access many other family support services through **Family Resource Centres** in your local area. These centres offer a variety of support services to many parents, such as lone parents and young parents. Other services offered by Family Resource Centres focus on women's health, Travellers, people with disabilities and so on. The Family Resource Centre Programme is supported by the Family Support Agency.



For more information on Family Resource Centres in your area ask your public health nurse.

Barnardos helps children and families who need extra support at times. Barnardos works to develop a family's ability to care for their children and build better prospects for the future for everyone. Their services include:

- family support in partnership with the Health Service Executive;
- bereavement counselling for children; and
- information, training and a range of leaflets and books for parents and people who work with children.

For more information on the range of services offered by Barnardos, phone them or log on to their website. Their contact details are on page 54.

Social work departments provide a wide range of preventative and child protection services. Social work services are for children and families who sometimes need extra support to cope and do their best for their family. Social workers work closely with parents and children to find out what their needs are and to develop a plan to meet those needs.

These five services are examples of what support is available to you. There are many other services, such as your family doctor and practice nurse. These services can also put you in touch with other sources of support that best suit you and your family.



Caring for twins or more

Ag déanamh cúram do cúpla nó níos mó

Caring for twins or even more children at one time is a joyful experience for you and your family. But the day-to-day reality also means more work and worry. There are also practical expenses to think of such as more space in your house or a bigger car to transport your growing family. If you are lucky, you have family and friends to help with the day-to-day jobs and childcare needs.



For more detailed information and advice about services and supports in your area, contact:

- the local public health nurse;
- the pre-school officer;
- a community welfare officer;
- your family doctor and practice nurse;
- the community mothers programme; or
- the Irish Multiple Births Association.

The contact details for these services are on page 54 of this booklet.

Ask your public health nurse.

Another issue for parents of twins or more is reminding your family and friends to treat all of your children as individuals and not as ‘the twins’ or ‘the triplets’. You can do this by:

- calling each child by his or her own name and not calling them ‘the twins’ and so on;
- making eye contact and talking to each of your children separately;
- making some special time with each child, for example by bringing one child with you when you go shopping; and
- encouraging each child’s uniqueness, for example in the way each child is dressed.



2. Feeding your young child

Ag tabhairt bia dod' páiste

Breastfeeding

Cothú Cíocha

We talked about breastfeeding in the booklet **Caring for Your Baby: Birth to Six Months Old**. The information included:

- the health benefits of breastfeeding for your child and yourself; and
- tips on breastfeeding.

If you do not have a copy of the first information pack, ask your local public health nurse or health promotion office for one.

How can I breastfeed outside the home?

You can continue to breastfeed your child for as long as you and your child feel happy to do so. You can do this by combining breastfeeding with a healthy balanced diet of solids for your child. When out and about remember you don't have to ask to breastfeed, you can breastfeed anywhere you and your baby want or need to. Breastfeeding is the normal and natural way to feed your baby and you should feel proud and confident in your decision to breastfeed. **The Equal Status Act (2000)** protects mums from being discriminated against or harassed because they are breastfeeding in a public area. For more information contact www.healthpromotion.ie/breastfeeding or the Equality Authority - see the back of this booklet.

For tips about breastfeeding when you return to work, read **Breastfeeding and Work**.

This useful booklet has guidelines on:

- how to mix breastfeeding and work; and
- entitlements and tips to help you continue to breastfeed your child.

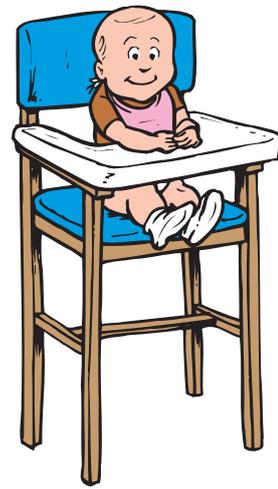
For a copy of the leaflet or booklet, contact your local health promotion office.

How do I wean my child from the breast?

You can wean your child when it suits both your child and you. Weaning from your breast should take place slowly. In this way, you avoid any difficulties with your supply of milk such as engorgement (swelling), which is when your breasts feel over-full and tender or sore because you have too much milk.

- Stop one breast feed every day for the first 4 days to 1 week. During the times you do not offer your child breast milk, give them a feed from a cup or bottle. If you stop breastfeeding before your child is 1 year old, you will need to give them formula feeds.

- After your child gets used to this new routine, stop another of the daily breastfeeds. Keep doing this until your supply of breast milk has stopped completely.
- If you are concerned about weaning your child, or about your own supply of milk, talk to your public health nurse, family doctor, practice nurse or local community breastfeeding support group.



Formula feeding

Cothú Formula

How long do I continue to give my child formula feeds?

You need to give formula feeds to your child until your child is 1 year old. This is because cow's milk is too concentrated in protein for young children. After 1 year, you can change to ordinary cow's milk as long as your child has a well-balanced diet.

Do I give my child 'follow on' formula milk?

Follow on formula milk is not necessary. By the age of 1 year, your child should have a well-balanced diet, including foods that are rich in iron. Iron is important for your child's development.

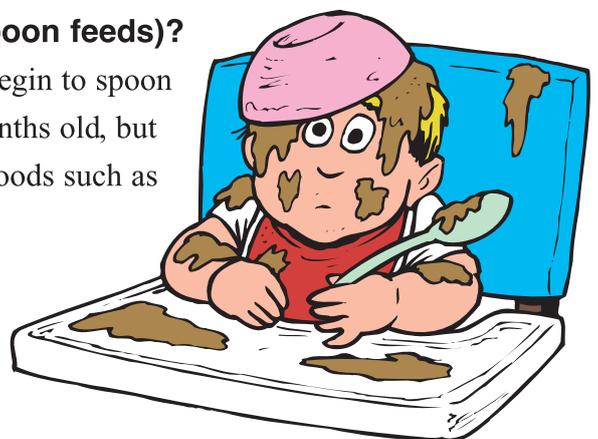
Ask your midwife, public health nurse, family doctor, practice nurse, community dietitian or local chemist for more advice on formula feeding your child.

Starting to spoonfeed your child

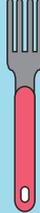
Ag tosú ar cothú spúnóige le do páiste

When do I start my child on solid foods (spoon feeds)?

- If you are formula feeding your child, you can begin to spoon feed (also called weaning to solids) at 4 to 6 months old, but not before this time. Start by using gluten-free foods such as baby rice.
- If you are breastfeeding your child, begin spoon feeding at 6 months old.



What foods are suitable to give my child?

Foods	Stage 1 From 4 - 6 months for bottle fed infants and 6 months for breastfed infants	Stage 2 From 6 - 9 months	Stage 3 9 - 12 months onwards
Suitable foods	<ul style="list-style-type: none"> ● Cereals such as baby rice, ● puréed meat, ● puréed fruit, such as eating apple or pear, ● puréed vegetables, such as carrot or turnip, ● puréed potato, or ● puréed peas and beans. 	<p>Use all the foods in the first column again, as well as:</p> <ul style="list-style-type: none"> ● well-cooked eggs, ● other breakfast cereals, ● bread and pasta, ● pasteurised cheese, such as grated cheddar, and ● yoghurt. 	<ul style="list-style-type: none"> ● Continue to add different foods to your child's diet. ● Most foods that your family eats are now suitable for your child.
Consistency 	<ul style="list-style-type: none"> ● Puréed to a soft consistency without lumps. ● Start with a thin purée and make this thicker as your child learns to take food from a spoon. 	<ul style="list-style-type: none"> ● Minced. ● Lumpy. ● Mashed. 	<ul style="list-style-type: none"> ● Chunky mashed texture. ● Chopped into bite-size pieces. ● Finger foods that can be picked up by your child to feed themselves.
Suitable drinks at mealtimes	<ul style="list-style-type: none"> ● Breast milk. ● Formula milk. ● Cooled boiled water. 	<ul style="list-style-type: none"> ● Breast milk. ● Formula milk. ● Cooled, boiled water. ● Diluted, unsweetened pure fruit juice. 	<ul style="list-style-type: none"> ● Breast milk. ● formula milk. ● Cooled, boiled water. ● Diluted, unsweetened pure fruit juice.
Number of breast/formula feeds per day	<p>Four breast or formula feeds a day.</p> <ul style="list-style-type: none"> ● On waking. ● Breakfast. ● Tea time. ● Night time. 	<p>Three breast or formula feeds a day.</p> <ul style="list-style-type: none"> ● On waking. ● Tea time. ● Night time. 	<p>Two breast or formula feeds a day.</p> <ul style="list-style-type: none"> ● On waking. ● Tea time. <p>These feeds are in addition to the drinks used at meal times and the milk used to make up spoon feeds.</p>

- From 1 year on, give your child a beaker of milk at the **three main meals** a day. This is 600mls (1 pint) of milk a day in total. Drinking more than this can reduce your child's appetite for solids.

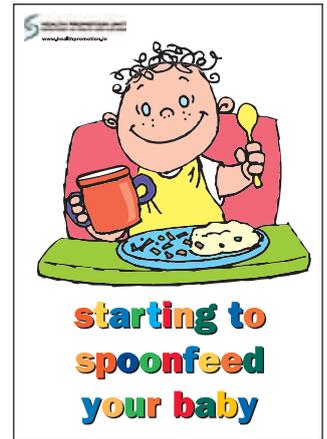
- **Purée** means to sieve or blend (liquidise) food to a soft, runny consistency. Purée food because your child is learning to chew instead of to suck.
- Chewing helps the development of jaw and tongue muscles that your child will use later for speech.
- Most children need snacks between main meals. These snacks can include yoghurt, fruit or bread.

- Do not add salt or sugar to your child's food.
- Never leave your child alone while they are eating in case they choke.
- Do not give nuts to children under five. Nuts might cause choking.
- Do not give low fat milk to children under 2 years old.
- Do not give skimmed milk to children under 5 years old.

For more information on feeding your child, read **Starting to spoonfeed your baby**. It contains useful information, such as:

- preparing food for your child;
- stage 1, 2 and 3 foods;
- recipes for each stage, like mince and cheese pasta;
- foods that have a lot of iron; and
- questions parents often ask.

Ask your public health nurse or local health promotion office for a copy.



What liquid can I use to soften and prepare my child's solid food?

Use:	Do not use:
<ul style="list-style-type: none"> ● breast milk or formula milk; ● water or stock from cooked vegetables; ● cooled boiled water; or ● cow's milk. 	<ul style="list-style-type: none"> ● gravy; ● stock cubes; or ● jars of sauce, as these contain a lot of salt.

How should I spoonfeed my child?

- Use a high chair with a suitable harness to strap in your child, or sit your child facing you on your lap and hold them securely with one hand while you spoonfeed them with your other hand.
- Give the solid food first. Then give milk.
- Organise meal times so that your child eats with your family whenever possible.
- To prevent your child from choking on food, cut the food into small bites.
- Homemade meals are often cheaper, more nutritious and tastier than jars of bought baby food.
- You can also spoonfeed your child using foods that are more traditional to your culture, such as pumpkin, yam or rice.



Always wash your hands before you prepare food.

From 6 months old, what other drinks can I give my child?

- Give your child cooled, boiled water in a cup at mealtimes or at snack times.
- Give small amounts of 'well diluted' (watered down) unsweetened fruit juice from a cup, not from a bottle. Well-diluted means 1 measure of juice to 4 or 5 measures of cooled, boiled water.

- Do not give your child tea or coffee. They make it difficult for iron to be absorbed.
- Do not give fizzy drinks to your child, as they have a lot of sugar and acid, which is harmful to teeth. Fizzy drinks also fill up your child's little tummy so they may not wish to eat their meals.
- Do not use bottled water to make up your child's drinks. Bottled water has large amounts of some salts that can be harmful to your child. If your tap water is not suitable for drinking even after boiling, you can use bottled water that contains **less** than 20 mg of sodium (salt) per litre.

When can my child start drinking from a beaker?

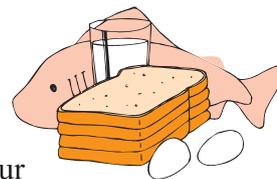
- From about 6 months old, your child can start drinking from a beaker or a cup.
- Use a plastic beaker with two handles but with no lid. Help your child to hold the beaker. In time, they will hold it steadily by themselves.
- By the time your child is 1 year old, they should be drinking only from a beaker or cup and not from a bottle.

A healthy, balanced diet for your child

Aiste bia sláintiúil, cothromúil dod' pháiste

Why is iron important for small children?

Your child is growing rapidly. Iron is important in your child's diet to maintain healthy blood and normal growth and development. For instance, iron helps make new red blood cells that carry oxygen from your child's lungs to their body. Most babies are born with stores of iron that last about six months. After this, your growing child needs to get iron from the foods that he or she eats.



What happens if my child does not get enough iron?

Your child may develop anaemia if he or she does not get enough iron in their diet. Anaemia is a lack of iron in the blood. Recent studies found that half of Irish 2 year-olds have low levels of iron, with almost 10% suffering from anaemia because of this. If your child has anaemia, they might seem:

- tired and pale with a poor appetite; and
- less able to fight infection.

What are the best sources of iron?

- Meat such as beef, lamb, pork, chicken and fish
- Black pudding, liver and tinned sardines



What are other good sources of iron?

- Eggs, beans, peas and lentils.
- Wholemeal brown bread.
- Green leafy vegetables such as spinach or cabbage.
- Breakfast cereals with iron added to them. Check the label to see if iron is added.
- Breast milk has iron that is easily absorbed by your child.
- Formula milk has iron added. Use formula milk until your child is at least one year old.

Vitamin C helps your child's body to make the best use of iron in these foods.

Red meat is the best source of iron. Give it to your child 3–4 times a week.

Common questions about food and children

Ceisteanna comónta fé bia agus páistí

What are fussy, faddy and picky eating habits?

Fussy, faddy and picky eating is a phase when your child doesn't eat well or

refuses to eat certain foods. Children's appetites differ greatly.

Don't be upset if they refuse to eat well on any one day. This

is a part of growing up, but it can be very worrying for you as a parent. If

this fussy eating continues, ask for advice from your family doctor, practice

nurse, public health nurse or chemist.



What can cause fussy eating?

Your child may be:

- unwell now or in the recent past;
- eating too many sugary snacks between meals;
- drinking too much milk or other drinks; or
- showing their independent streak!



What can I do to encourage my child to eat well?

- Offer a wide variety of foods and include your child's favourite foods regularly.
- Put small portions on a plate, as a large amount of food can be very off-putting.
- Let your child eat their food first at mealtime. Then give them the drink at the end of the meal.
- Give your child enough time to eat.
- Your child watches what you do, so sit down as a family at mealtimes to eat.





- Involve your child in preparing and cooking the food by telling them what you are doing.

If your child still refuses to eat, calmly take the food away after 10 minutes. They are unlikely to starve, but if you create a fuss, mealtimes can become a battleground.

- Do not force your child to eat, but be firm and praise your child when they do eat.
- Do not use food or sweets as a reward or a punishment.

What is constipation?

Constipation is a hard bowel motion. Normal bowel motions should be bulky and soft. For some children, normal means passing a bowel motion once a day or every second day. Your child may be constipated if they:

- are unable to empty their bowel fully when they go to the toilet; or
- do not go to the toilet as often as they normally do. If they don't go as often, the bowel motion becomes hard and painful to pass.

How could my child become constipated?

Your child could become constipated if they:

- do not have enough fluid to drink;
- are not eating enough foods that contain fibre;
- are not active enough for their age; or
- are ill or have a medical condition.



How can I prevent my child getting constipated?

Give your child plenty to drink, such as:	Give your child high fibre food as part of a well balanced diet, such as:
<ul style="list-style-type: none"> ● breast milk, ● water, ● diluted, unsweetened pure fruit juice, or ● formula milk. Make sure you make feeds correctly. 	<ul style="list-style-type: none"> ● whole grain breakfast cereals, bread, pasta and rice, ● fruit and vegetables, or ● baked beans.

Caring for your child's teeth

Ag déanamh cúram do fhiacla do pháiste

What are the signs that my child is teething?

Your child may:

- have red, flushed cheeks;
- dribble, which may lodge in the folds of the skin under your child's neck, causing moist irritation and chaffing;
- chew on their fists or on toys more than usual;
- have sore and tender gums; and
- have a nappy rash.



How can I help my child cope with teething?

- Try giving your child something to chew on such as a cool teething ring. Use teething rings that are big enough so your child will not choke on them.
- Keep a spare clean teething ring in the fridge.
- Massage your child's sore gums with a sugar-free teething gel.
- Use mild (sugar-free) pain relief if your child wakes at night and is irritable.

Contact your doctor or pharmacist for information on the safe use of gels and pain relief

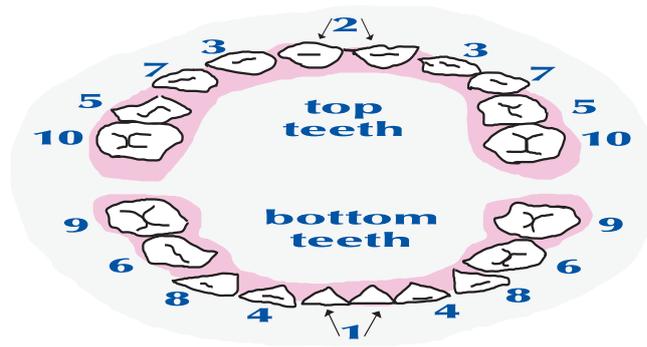
How many teeth will my small child have?

Every child is born with a complete set of 20 baby teeth growing under their gums. By about 6 to 7 months old, your child's first teeth may begin to appear. By about 2 to 2½ years old, your child will have the full set of 20 teeth - 10 teeth on the top and 10 teeth on the bottom. There are 10 teeth on the top gum and 10 on the bottom gum. These will be replaced by 32 permanent teeth around the time your child is 6 years old or more.

How do my child's teeth grow?

Your child's first 2 teeth usually come through on the bottom gum (see number 1 on the picture). One or two months later, the 2 top front teeth will break through the gums (see number 2 on the picture). The other teeth usually come through the gums in a pattern similar to the way they are numbered on the picture (see numbers 3-10 on the picture).

The way that your child's first teeth (milk teeth) usually grow

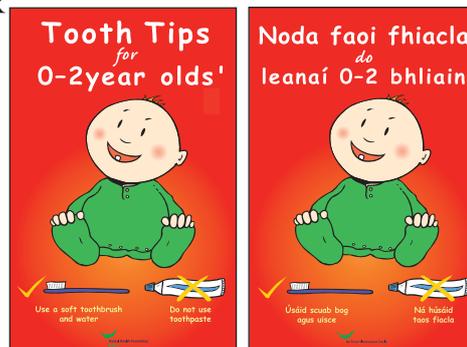


Why are baby teeth important?

Healthy teeth allow your child to chew their food comfortably. They are also important for speech and for your child's appearance and self-confidence. Baby teeth hold the space for the new permanent teeth to come into the mouth, when your child is older. Your child may be 12 years old or more before their last baby tooth falls out, so these teeth need to be kept healthy for a long time.

How can I care for my child's teeth?

- Milk and water are the most tooth-friendly drinks.
- Only give your child fluids such as milk, water or 'watered down', unsweetened, pure fruit juice to drink. Give cooled boiled water, only up to the age of one.
- Juices for babies contain sugar, which can damage teeth. Never put sweet drinks, including fruit juice, into the bottle. Never give fizzy drinks to your child.
- Start using a cup from 6 months old and wean your child off bottle feeding by 12 months.
- Only give your child a bottle or feeding cup at feed times. Do not allow your child to go around, for prolonged periods of time, with a bottle or feeding cup in their mouth. Do not allow your child to sleep or nap with a bottle or feeding cup in their mouth.
- Avoid the use of a soother (dummy or pacifier) if possible. If you give your child a soother, then make sure it is clean. Do not dip it in sugar, syrup, honey or anything sweet.
- Encourage your child to eat foods that have a lot of calcium such as milk, cheese and yoghurt. Calcium helps build strong teeth.
- Encourage your child to eat fruit as a healthy snack option instead of sugary treats.
- Read food labels carefully. Sugar may also be called sucrose, glucose, fructose or maltose on labels. 'Low sugar' or No Added sugar on the label does not mean that the food or drink is sugar-free
- Bring your child for a visit to their dentist on regular basis. Normal dental check-ups can help you to prevent and/or spot early, any dental problems that may arise.



Courtesy of the Dental Health Foundation, www.dentalhealth.ie

How do I clean my child's gums and teeth?

Tooth brushing needs to become part of your child's daily routine. Good habits started early will last a lifetime.

- Start brushing your child's teeth as soon as the first tooth appears using a small soft toothbrush and water only.
- If your child is under the age of 2, do not use toothpaste unless you have been advised to do so by a dentist.
- Brush your child's teeth twice a day, at bedtime and at one other time during the day. The night time brush is the most important routine to establish, as food left on the teeth over night can lead to decay.
- If your child resists having their teeth brushed, or wants to do it themselves, don't give up! You can try singing a song as you brush your child's teeth, or you can reward your child for letting you brush their teeth by allowing them to brush once you've finished. Use your imagination to make brushing fun.

What is tooth decay?

Tooth decay is also called dental decay or dental caries. Tooth decay is the most common ongoing disease of childhood, and can be difficult to treat in very young children. Teeth are at risk of decay from the time they appear in the mouth. Children with tooth decay are at risk of pain, infection and the early loss of their baby teeth. Food and drinks that contain sugar can cause decay if your child has them too often.

*Did you know? 1 tin of cola = 11 cubes (or 8 teaspoons) of sugar.
1 bottle of a sweet fizzy drink (500 mls) = 30 cubes of sugar.*

Injuries to Baby Teeth

Falls, bangs and bumps are part of daily life for your toddler, and injuries to the baby teeth can easily happen. A fall on the mouth can loosen, break or even knock out a baby tooth. This can cause damage to the developing adult (permanent teeth). If your child injures a tooth in a fall or accident, take him/her to their dentist to have their mouth and teeth checked. If your child knocks out a tooth, **do not** try to put the tooth back in. You could damage the adult (permanent) tooth that is developing in the gum. Take your child to the dentist to be checked.

Is it a problem if my child sucks their thumb?

Sucking their thumb soothes some small children. Some young children develop this habit around 18 months old and will stop it by 4 years old. Thumb sucking is only a problem if it continues beyond this age, because the sucking may affect the shape of the permanent front teeth. It is also important that you regularly wash your child's hands. Regular hand washing can help stop infections transferring from their hands to their mouths.

Ask your dentist, doctor, practice nurse or public health nurse for more advice about caring for your child's teeth or contact the dental health foundation of Ireland.

www.dentalhealth.ie 01 478 0466

3. Sleeping and crying

Ag codladh agus goil



Every child has different sleep patterns. If you are concerned that your child is not sleeping or that their sleep pattern is disturbed, contact your public health nurse, family doctor or practice nurse for more information and advice.

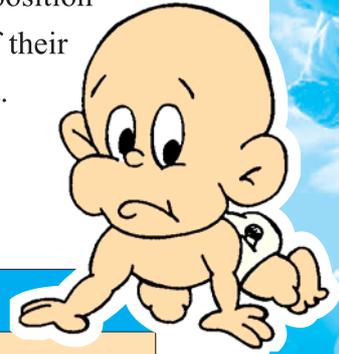
Where should my child usually sleep?

Cár cheart do mo leanbh codail de gnáth?

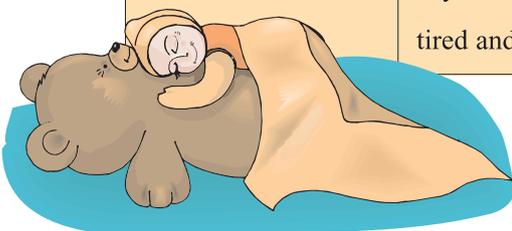
- From 6 months on, you can move your child into their own room to sleep, if you have the space.
- Most young children stay in a cot until they are between 2 and 3 years old. If your active child learns to climb out of the cot sooner than this, or if they grow too big for the cot, then change to a low bed to prevent accidents.
- From 6 months on, your child moves about during sleep and changes their position in the cot. Check if your child has kicked the blankets over their head or off their body as they move about. They may get into difficulty breathing or get cold.

How much sleep does my child need?

Cé mhéid codhladh a theastaíonn ó mo phaiste?

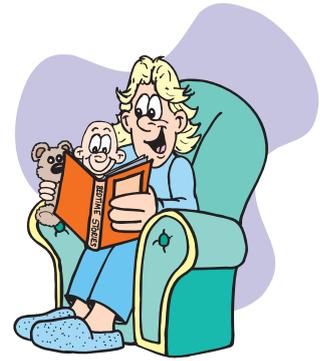


Your child's age	Your child:
By about 6 months	<ul style="list-style-type: none"> ● needs about 10–11 hours' sleep a night, ● needs 2 naps during daytime of about 2–3 hours each, and ● is less inclined to sleep during a feed.
By about 9 months	<ul style="list-style-type: none"> ● needs about 10–12 hours' sleep a night, ● may be at an age when they can go the whole night without a feed, and ● needs two naps during the daytime of about 1–2 hours each.
By about 1 year	<ul style="list-style-type: none"> ● needs about 10–12 hours' sleep a night, ● needs 2 naps during the daytime of about 1–2 hours each, and ● may begin to wake again during the night, especially if they are teething.
By about 18 months	<ul style="list-style-type: none"> ● needs about 11–12 hours' sleep a night, and ● needs 1 nap during the daytime of about 1–2 hours.
By about 2 years	<ul style="list-style-type: none"> ● needs about 11–12 hours' sleep a night, and ● needs 1 nap during the daytime of about a half an hour. <p>Try not to let your child nap beyond the mid-afternoon so they will be tired and ready for sleep again by night time.</p>



Are there tips to help my child sleep at night?

- Your child feels happy with a routine. Settle them for bed and get them up at a regular time each day.
- Avoid giving your child a very large meal or sugary snacks or drinks just before bedtime.
- Make sure your child is fed and has a clean nappy when they go to bed. They will be more comfortable.
- Read your child a short bedtime story. This helps them relax before sleep.
- Leave the door of your child's bedroom open so that they can still hear some soothing and familiar noises outside.
- Leave a night light on in your child's room so that they do not feel upset if they wake up in the dark. It also gives you some light to check on your child during the night.
- Some children like to bring a favourite toy or blanket with them as they settle down to sleep. Make sure it is clean and not a danger to them while they are sleeping.



What if I have more than one child to settle down to sleep at night?

Settling one child down to sleep can be hard work. If you have twins or more children, or if you have a baby and a toddler to put down to bed, it can be quite a challenge. The main tips are the same as above. Here is another idea.

- For multiple births such as twins, put them all to bed at the same time every night. If one child is constantly waking up the other child or children, you may have to consider separating them if you have the space.



Reducing the risk of cot death

Ag laghdú baol bás ciamháin

What is cot death?

Cot death is also called Sudden Infant Death Syndrome (SIDS). It is the sudden and unexpected death of a baby or young child who appeared to be quite healthy. Most cot deaths happen during the first year of life. Contact your public health nurse or Health Promotion Unit for a copy of this leaflet.

For more information on reducing the risk of cot death, re-read section 3 of the booklet **Caring for Your Baby: Birth to Six Months Old**. If you do not have a copy of that pack, ask your public health nurse or health promotion office for a copy.

Safe Sleep for your Baby
Reduce the Risk of Cot Death

Always place your baby on their back to sleep.
Don't smoke during pregnancy.
Don't smoke or allow anyone to smoke in the home or in the car.
The safest place for your baby to sleep at night is in a cot in your room.
Don't let your baby get too hot.
Place baby with their feet to the foot of the cot.
Make sure the baby's head stays uncovered when asleep.
Don't put quilts, duvets, bumper pads, pillows or toys in the cot.
Don't fall asleep in bed with your baby if you or your partner smoke or have taken alcohol, drugs or medication that makes you sleep more heavily. Don't fall asleep in bed with your baby if they are less than three months old, were born prematurely or had a low birth weight (less than 2.5kg or 5.5lbs when born).
Never fall asleep with your baby on a sofa or an armchair.
If your baby seems unwell, call the doctor quickly.

Why does my child cry?

Cad a dhéanfaidh mé má tá mo páiste ag gol?

Crying is one way that your young child tells you that they need something. For more information on why your child may cry and how to soothe them, re-read section 3 of the booklet called **Caring for Your Baby: Birth to Six Months Old**.



If my child is upset, can they comfort and soothe themselves?

Yes, your small child is able to calm themselves and manage their mood by self-calming. They do this by:

- bringing their hand to their mouth to suck it;
- touching and stroking their hands or feet; and
- making eye contact and touching you.

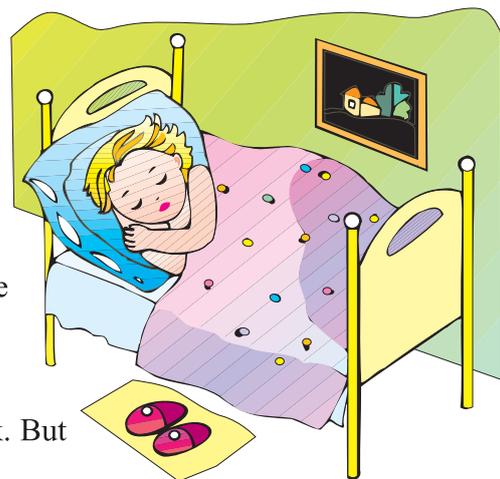
You can help to calm your child by holding them in your arms or stroking their back and talking soothingly to them.

What do I do if my child wakes up crying every night?

Sometimes your child may continue to cry at night. They may wish for your company, or they may be upset because you are training them to go without a night feed. You can encourage your child to develop a routine of going back to sleep.

- When your child wakes and cries do not leave them crying for longer than a few minutes.
- Re-settle and soothe them by talking softly and stroking their back.
- When you have re-settled your child, do not stay in their bedroom.
- If they wake again and cry, repeat the steps above.
- Do not feed or play with your child at this stage or let them get into your bed. In this way, you teach your child to soothe themselves and fall back to sleep.
- The following day, reward your child with praise for their efforts, however small.

This way of changing your child's sleep pattern is gradual and may take a week or two weeks to work. But if you continue, it will work.



4. Caring for your young child every day

Ag tabhairt cúram dod' páiste gach lá

Bathing your child

Ag tabhairt folcadh dod pháiste

Bath time is a fun time where you can both play. But you must always make sure that your child is safe. Serious accidents can happen at bath time, such as scalding or drowning. **Never** leave your child alone in the bath or the bathroom.

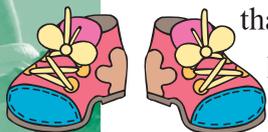


Dressing your child

Ag gléasadh do pháiste

Your child starts to move around more from six months on. They will need separate night clothes and several sets of day clothes. This is because they will spend less time in the cot or pram and more time on the go. They can get dirty very quickly from crawling and walking about. Bibs are also useful, as drooling caused by feeding or teething can make a mess.

Make dressing your child a game. Name your child's body parts and the clothes that cover them, like 'hat is for your head' or 'sock is for your foot'. Your child learns different words and recognises the link between the clothes and where they fit.



When your child is walking steadily, bring them to a shoe shop to be measured for shoes that are designed for growing feet. Every 3 or 4 months, go back to get the length and width of their feet re-measured. Children grow steadily and your child may need replacement shoes.

Preparing to toilet train

Ag réiteach chun traenáil leithrís

In general, do not begin toilet training until your child is around 2 years old and better able to communicate their needs to you. Your child's ability to control their bladder is slow to develop. By the age of 18 months to 2 years, they may be able to let you know that they wish to go to the toilet or that they have just gone to the toilet in their nappy.

Are there tips to help my child prepare for potty training?

- Each child develops at a different pace with their potty training routine.
- Leave a clean potty in the bathroom so your child gets used to seeing it.



- As you have noticed by now, you have very little privacy with a small child and they even come in with you when you go to the toilet. Watching you is actually preparing them for when they start to toilet train.
- Start dressing your child in clothes that will be easy to pull up and down during potty training.

Lifting and carrying your child

Ag árdú agus iompar dod' pháiste

It is important to support your own back and your child's head and back when you are lifting and carrying them. Here is some useful equipment for moving about with your child.

Slings

- A sling is suitable for babies. It supports their head and encourages bonding with you.
- Use the sling to carry your child while you put out the washing, do the dishes or walk to a friend's house.
- If you use a sling or are carrying your child, take care not to trip or fall when going up or down stairs or walking on uneven ground.



Prams or pushchairs

- A pram or a pushchair (also called a buggy or stroller) is useful for going out and about with your child. You can still use this when they are toddlers. Get one that can lower down so your small child can lie back to nap.
- Always use a five-point harness to strap your child into the pram or pushchair.



Back carriers

Back carriers are designed to hold your child from 6 months to 3 years or as soon as they can support their own neck. A back carrier is useful for carrying your child as you go on walks with your family. Try different models on your back to see which fits you and your child the best.

Baby walkers are **not** recommended for your child. Walkers encourage children to move before they are able to bear weight on their legs. In addition, baby walkers can cause small children to injure themselves if they tip over and fall out or crash into an object, especially if they are moving fast in the walker.



Immunisation

Imdhíonagh

What is immunisation?

Immunisation is a safe and effective way to protect your baby against certain diseases. These diseases can cause serious illness or even death. Immunisation works by causing your baby's immune system to make antibodies to fight the disease. Immunisations are free from most Doctors. Ask your General Practitioner.

When should I immunise my baby during the first six months?

When my baby is:	My baby should have:	Number of Injections
Birth or soon after	BCG	One
2 months	6 in 1 + PCV	Two
4 months	6 in 1 + Men C	Two
6 months	6 in 1 + Men C + PCV	Three
12 months	MMR + PCV	Two
13 months	Men C + Hib	Two

BCG = to prevent tuberculosis (TB)
Men C = to prevent meningococcal C, meningitis or blood poisoning
6 in 1 = to prevent diphtheria, tetanus, whooping cough (pertussis),
hib (haemophilus influenzae B), polio (poliomyelitis) and Hepatitis B
PCV = to prevent pneumococcal disease

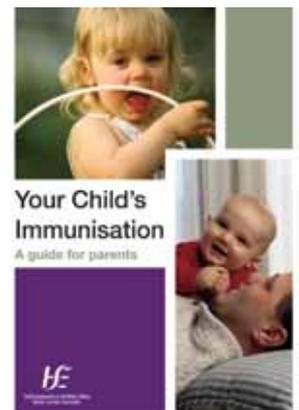
These are all the routine immunisations your child needs until they are 4 to 5 years old.

Minor reactions that may occur after an immunisation include:

- redness, soreness or swelling in the area where the injection was given;
- fever; or
- irritable behaviour.

If your baby is very unwell after an immunisation, there may be some other reason for the sickness. Talk to your doctor about this. For more written information about immunisation, and common questions parents ask read **Your Child's Immunisation: A guide for parents.**

An immunisation record can be found inside the back cover of this Immunisation Booklet or is available from your doctor or local health promotion centre. Please bring this record with you when you go to the doctor for your child's injections so they can record them for you. You can get more information from www.immunisation.ie or contact the National Immunisation Office, Manor Street, Dublin 7. Phone: 01 867 6108



Protect your child - immunise.

Common childhood illness

Breoi teach comón ta d'ogánaigh

Common childhood illness and things you can do to care for your child

Fever

(high temperature)



Fever means that your child's body temperature is higher than normal.

The **normal** temperature for a child is about **36.5° to 37.2°C**. Get advice from your doctor if your child has a temperature, especially if your child appears unwell or you are worried at all.

Follow these tips to help reduce your child's temperature.

- Remove their outer clothes. This allows extra heat to escape from their body.
- Sponge them down with **lukewarm** water and allow the skin to dry. This may reduce the temperature.
- Encourage your child to drink lots of fluids such as water or their regular milk feed.
- Give your child some temperature reducing medicine (analgesia) that your family doctor or chemist has recommended. Read the instructions on the medicine bottle.

Febrile convulsion (fits)

A **febrile convulsion** (or seizure) is a fit. It can happen if your child has a very high temperature.

During a febrile convulsion your child may:

- breathe heavily,
- drool,
- turn blue,
- roll back their eyes, or
- jerk their arms and legs but have a rigid body.

The febrile convulsion may last for several minutes. Afterwards, your child may be sleepy and limp.

To help your child:

- get medical help at once,
- turn your child's head to one side so any vomit or saliva can drain out,
- do not put anything in your child's mouth while the seizure lasts, and
- keep a note of how long the seizure lasted and tell your doctor.



<p>Croup</p> 	<p>Croup is inflammation of the voice box (larynx) and wind pipe (trachea). With croup, your child coughs, is hoarse, and has difficulty breathing.</p> <p>To help your child, you can:</p> <ul style="list-style-type: none"> ● keep your child warm, ● give them fluids to drink, such as their usual milk feed or water, ● contact your family doctor if your child finds it hard to breathe, and ● contact your family doctor if the croup does not go away.
<p>Ear infection</p> 	<p>An ear infection is an illness in the middle ear. It is usually caused by a virus.</p> <p>Signs that your child has an ear infection may include:</p> <ul style="list-style-type: none"> ● touching or pulling at the ear, ● an ear that looks red and feels hot, ● a temperature, ● no interest in feeding, and ● vomiting, diarrhoea or both. <p>To help your child:</p> <ul style="list-style-type: none"> ● do not use a cotton bud or anything else to poke inside their ear, as it may cause damage and pain, and ● take your child to your family doctor for advice and treatment.

What are meningitis and septicaemia?

- **Meningitis** is an inflammation of the lining of the brain and spinal cord. There are two main types of meningitis: bacterial and viral.
- **Septicaemia** is blood poisoning from bacterial meningitis.

What are the symptoms of meningitis or septicaemia?

You should be concerned if your child:

- is irritable when you pick them up and has a high pitched or moaning cry;
- has a tense or bulging soft spot on their head;
- has a stiff neck;
- is not able to tolerate bright light;
- has a high temperature;
- has a seizure or fit;
- has a very bad headache;

- is vomiting or refusing to feed;
- has pale or bluish skin;
- has cold hands and feet and shivering;
- has stomach, joint or muscle pain;
- has a stiff body with jerking movements or a floppy lifeless body; and
- has red, brown or purple pinprick rash marks or blotches on the skin. Use the **glass tumbler** test to check for a meningococcal septicaemia rash.

**Not every child has all these symptoms at one time.
Symptoms can occur in any order.
Septicaemia can occur with or without meningitis.**

How do I do the glass tumbler test?

Press the bottom or side of a clear glass tumbler (a drinking glass) firmly against the rash. If the rash does not fade under the pressure of the glass tumbler, then your child may have a meningococcal septicaemia rash and you should get medical help at once. The rash can be harder to see on darker skin, so check on the palms of the hands or the soles of the feet.



Courtesy of Meningitis Research Foundation, www.meningitis.org

- Trust your instincts. If you think your child is ill, get medical help at once.
- For more information on meningitis, contact the Meningitis Research Foundation. Their LoCall 24 hour helpline number is 1890 413 344, or log on to their website at www.meningitis.org.