

Caring for your

Child

**Six
Months
to 2
Years**



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Six Months to 2 Years

Your Public Health Nurse:

Your Health Centre:

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Foreword

This information pack is the second in a set of three packs for parents:

- Caring for Your Baby: Birth to Six Months
- Caring for Your Child: Six Months to Two Years
- Caring for Your Child: Two to Five Years

Each one contains information to help you to care for yourself and your child during your child's first five years. Before we produced this information pack, we asked parents what information they needed to care for themselves and their baby or toddler during this time. Parents said they wanted common-sense information and tips on the general care of their child; information about the growth and development of their child; advice about what to do if their child has a problem; and details of what people and services to get in touch with for more help and support.

The information in this pack is based on the most up-to-date, accurate information available within the Health Services, and on opinion from professionals in child health, support services, voluntary organisations and parent groups.

Each baby is special and for some of you, the details in this pack are only the beginning of your search for information on how to do the best for your baby and you. No booklet is a replacement for talking with someone who is trained to help you, so the useful web pages and phone numbers at the end of the pack will help you reach a wide range of trained professionals.

Sincere thanks to all the health professionals who helped in the development of this child health information pack, especially the parents.

Introduction



Welcome to **Caring for Your Child: Six Months to 2 years.**

This booklet 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.

We hope you enjoy reading it and find it useful.



For copies, contact your Public Health Nurse or see www.hse.ie/caringforyourbaby

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1 Taking care of yourself as a parent



Especially for Mams

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. Then you can focus on your child and yourself until a pattern forms in your daily routine that you are able to manage. If you do not have a family member to turn to, see page 7 for details of extra support.

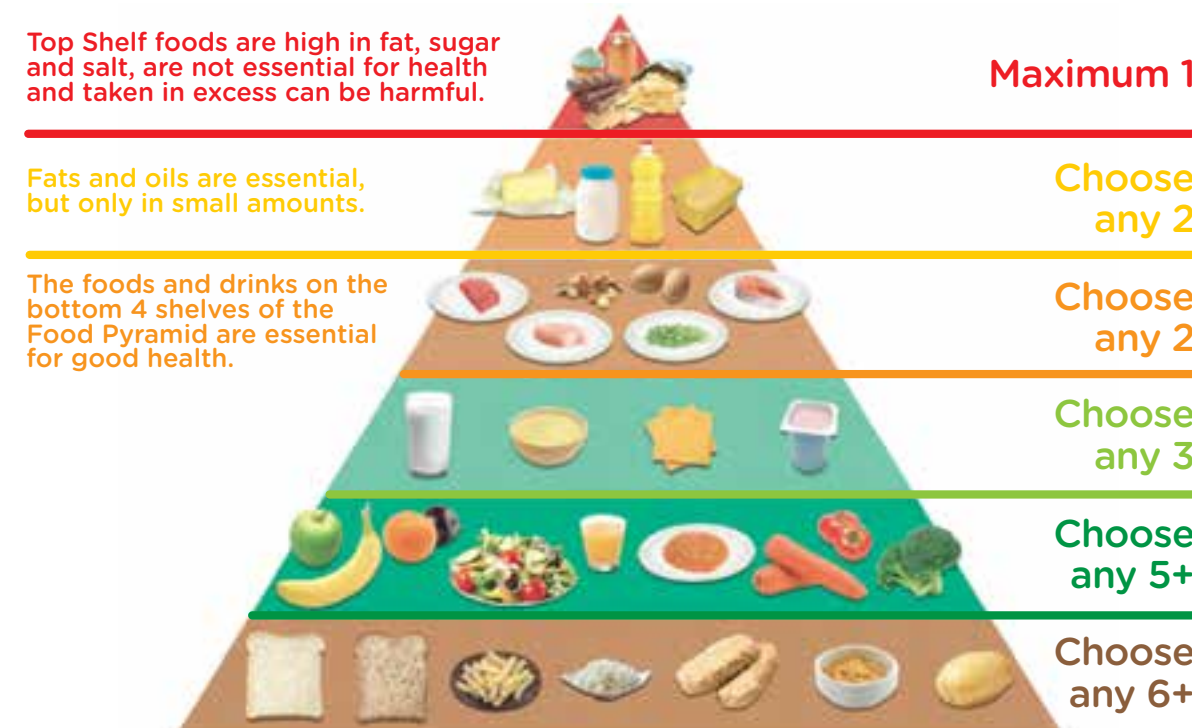
You may also feel that you have very little time for yourself since your child was born. It is important to look after your own needs so that you are better able to look after the needs of your family. Here are some tips to help you unwind.

- 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 trip to the hairdresser if you can afford it

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. Remember going on a weight loss diet is not recommended just after you have given birth especially, if you are breastfeeding.

Read our leaflet 'Your Guide to Healthy Eating using the Food Pyramid' available in the publications section on www.healthpromotion.ie



Especially for Dads

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.

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's 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. Talk to your doctor, the public health nurse or the Child and Family Agency and they may suggest ways you may get extra help.

For Mams and Dads

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 pram
- Go for a swim with your family
- Play in the park with your child

Check out the events section on **www.getirelandactive.ie** for sports in your area.

Smoking and drinking alcohol

If you gave up smoking during the pregnancy you gave your baby a great start. Try to stay off cigarettes as smoking around your baby can contribute to cot death. Help and support is available on **www.quit.ie** or talk to your doctor.

If you stopped drinking alcohol during your pregnancy now may be a good time to look at your drinking habits. Do you know your limits? Do you know what a standard drink is? Find out more at **www.yourdrinking.ie**

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. Juggling home, school, work and other routines can be stressful.

- 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 may 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. Try to reduce the stress by preparing for it by making packed lunches, and preparing older children's sports bags ahead of time. Get up 10 minutes earlier to give your family some breathing space in the morning. Plan meals in advance. 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 ask for extra help

Getting extra support for parents

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:

- Health promotion information and advice
- 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 wellbeing; 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
- Breastfeeding support groups
- Parenting classes
- Support services offered by the HSE and other organisations

The Child and Family Agency 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
- 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 Child and Family Agency provides support to families through their Family Resource Centres see **www.tusla.ie** or call 01 635 2854.

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 HSE
- Bereavement counselling for children
- Information, training and a range of leaflets and books for parents and people who work with children

For more information call 1850 222 300 or see **www.barnardos.ie**

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. Contact details for social workers are on **www.tusla.ie** or call 01 635 2854.

Local Psychology Services: Your doctor and other professionals can give you information on your local child, adolescent and family psychology service or make a referral for you if necessary.

These 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

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
- The Irish Multiple Births Association. See **www.imba.ie** or call 01 874 9056

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
- Encouraging each child's uniqueness, for example in the way each child is dressed



2 Feeding your Young Child



Breastfeeding

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

- Tips on breastfeeding
- The importance of breastfeeding for your child and yourself

If you don't have the first information pack, ask your Public Health Nurse or see www.hse.ie/caringforyourbaby

Your breastmilk continues to provide an important part of your baby's diet as he or she grows. From 6 months you can start your baby on solid foods and continue to breastfeed to 2 years or older.

Breastfeeding groups are helpful places to go to meet other mothers. Your public health nurse can give you the details of your nearest group or log on to www.breastfeeding.ie. These groups are run by public health nurses or mothers who are trained to support breastfeeding.

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 see www.healthpromotion.ie/breastfeeding

For tips about breastfeeding when you return to work, read our leaflet 'Breastfeeding and Work' available in the publications section of www.healthpromotion.ie



This useful booklet has guidelines on:

- How to mix breastfeeding and work
- Entitlements and tips to help you continue to breastfeed your child

How do I wean my child from the breast?

You can wean your child when it suits both your child and you. Many children will self wean. If you chose to wean before this, weaning from your breast should take place slowly. Stop one breastfeed every 2-3 days for the first few weeks. 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 your breasts feel hard and uncomfortable at any stage, try hand expressing a little milk, just enough so you feel comfortable
- If you are concerned about weaning your child, or about your own supply of milk, talk to your public health nurse, doctor, practice nurse or local community breastfeeding support group

Formula feeding

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 one year, change to ordinary cow's milk.

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, doctor, practice nurse, community dietitian or local chemist for more advice on formula feeding your child.

Starting to spoonfeed your child

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

The introduction of solid food to baby’s diet should take place at about 6 months’ of age. The recommendations for age of weaning are the same for both breastfed and formula fed babies. The exact timing to begin this process should be driven by the unique needs of the baby. Your baby should not be introduced to solid food before 4 months (17 weeks) and the start of weaning should not be delayed past 6 months (26 weeks) of age.

Signs that your baby is ready for solid food

- Does not seem satisfied after a milk feed
- Starts to demand feeds more frequently over a time period of more than one week
- Shows an interest in food, or may be reaching out for food
- Watches others with interest when they are eating
- Chews and dribbles more frequently
- Is able to sit up with support and can control their head movements

What foods are suitable to give my child?

The stages of weaning

The weaning process takes place in three stages, starting with the first spoon feeds when the infant is 4 – 6 months old and finishing at 12 months.



Stages of Weaning	Food textures appropriate during each stage of weaning	Skills learned through each stage of weaning
Stage 1 From about 6 months of age	First foods should be thin purées sieved or liquidised to a soft runny consistency which will increase in thickness as the infant grows. Some suitable Stage 1 weaning foods are on page 14.	<ul style="list-style-type: none">• Taking foods from a spoon• Moving food from the front to the back of the mouth for swallowing• Managing increasingly thicker purées
Stage 2 Between about 6-9 months of age	Move from thick purées to mashed foods to foods with soft lumps, and finally to soft finger foods. Infants should also start drinking from a cup. Some suitable Stage 2 weaning foods are on page 14.	<ul style="list-style-type: none">• Moving lumps around the mouth• Chewing lumps• Self-feeding bite-sized pieces food using hands and fingers
Stage 3 Between about 9-12 months of age	<p>Move to minced and chopped family foods. More textured finger foods should be offered.</p> <p>A non-lidded beaker should be used for all drinks other than breastfeeds.</p> <p>If an infant is being formula fed they should no longer use a bottle by age 12 months. Some suitable Stage 3 weaning foods are on page 15.</p>	<ul style="list-style-type: none">• Chewing minced and chopped foods• Self-feeding bite-sized pieces of food using hands and fingers• Learning to eat with a spoon• Drinking fluids from a cup

Suggestions for Stage 1 foods

- Gluten-free cereal e.g. baby rice
- Vegetables made into purée e.g. carrot, parsnip, turnip, broccoli, cauliflower, butternut squash, courgette. Purée means to sieve, blend or liquidise food to a soft, runny consistency. Purée food because your child is learning to chew instead of to suck.
- Fruit made into a purée, e.g. banana, stewed apple, pear, peaches, apricots, plums, melon
- Meat, poultry and fish purées, e.g. red meat such as lamb and beef

Suggestions for Stage 2 foods

Cereals, potatoes, pasta and rice

- Mashed potato, pasta, rice, bread

Meat, poultry, fish, eggs and beans

- Stewed/baked/steamed/boiled/grilled fish (remove bones), beef, mutton, lamb or pork
- Tinned fish – watch out for bones and mash well
- Minced meat and chicken
- Peas, beans and lentils

Milk, yogurt and cheese

- Full-fat pasturised soft cheese, e.g. cottage cheese, cheddar (grated), ricotta
- Yogurt

Fruit and vegetable

- Fruits, mashed or given as small and soft bite-size pieces when the infant is ready e.g. soft apple, pear, plum, banana etc.
- Mashed or cooked slices of vegetables e.g. carrot, turnip, parsnip, broccoli, peas etc.



Suitable snack foods during stage 3 of weaning

- Breads & pasta
- One finger of cheese or bread toasted
- 3-4 well cooked pasta shapes. E.g. bow-ties, shells
- One piece of chapati
- Small piece of a bread stick with cheese spread or hummus
- Small piece of naan bread or pitta bread with smooth peanut butter*
- 1-2 unsalted crackers
- Small portion of a plain scone
- 1 plain rice cake
- 1 small pancake

* Smooth peanut butter spread can be included in the diet of infants who have not been diagnosed with a peanut allergy and are more than 6 months of age.

Fruits & vegetables

- Fruit slices e.g. melon, banana, pear, apple, mango, orange, satsuma
- Chopped fruit, e.g. halved and deseeded grapes
- Diced soft pieces of fruit, e.g. apricots
- Soft cooked chunks of vegetables, e.g. carrot, parsnip, swede, sweet potato

Yogurt, milk and cheese

- Small pot of plain natural yoghurt with some chopped/ sliced fruit
- Cube/ triangle/ slice of firm cheese, e.g. cheddar cheese

Meat, poultry, fish, eggs and beans

- Strips of freshly cooked meat or chicken
- Eggs - scrambled, boiled or poached

At this stage the more foods the child is exposed to, the greater likelihood that the child will be eating a variety of nutritious foods when they are older.

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, blend or 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 yogurt, 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 see 'Feeding your baby: introducing family meals' in the publications section of www.healthpromotion.ie

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

Use:

- Breast milk or formula milk
- Water or stock from cooked vegetables
- Cooled boiled water
- Cow's milk

Do not use:

- Gravy
- Stock cubes
- Jars or packets of sauce, as these contain a lot of salt

How should I spoon feed 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
- Encourage your child to sit at the table or to sit still while eating. Children can choke on food if they are walking or running around while eating

Always wash your hands before you prepare food.

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

Cows milk should not be offered as the main milk drink until your child is 1 year old (or later for a premature baby). Small amounts of pasteurised full fat cows' milk can be used to prepare weaning foods from 6 months onwards.

- Breast milk should be used as the main drink for the first year of life. If breast milk is not available, standard infant formula should be used
- Cooled boiled water can be offered as extra fluid. Give your child cooled, boiled water in a cup at mealtimes or at snack times
- Fruit juices are not needed. Try to give cooled boiled water only until your child is 1 year old. If you choose to offer juices, only small amounts of well-diluted, unsweetened fruit juice (dilute 1 measure pure fruit juice to 8-10 measures cooled boiled water) should be given from a beaker only at mealtimes or with snacks and only from 1 year onwards.

From 6 months old what drinks are unsuitable for my child?

- Do not give your child tea or coffee. They make it difficult for iron to be absorbed and contain caffeine
- 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 6 months, your baby can start drinking from a beaker
- Fluids other than breastmilk can be offered from a lidded beaker with a non-valved, free-flowing spout
- Aim that by 12 months of age, a non-lidded beaker will be used for all drinks other than breastfeeds

A healthy, balanced diet for your child

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
- Less able to fight infection

What are the best sources of iron?

- Meat such as beef, lamb, pork, poultry
- Eggs (well-cooked), peas, beans, lentils, green leafy vegetables e.g. spinach, broccoli. Eating foods rich in vitamin C at the same time improves iron absorption. Fresh fruit and vegetables are good sources of vitamin C
- Liver is not recommended as it contains too much vitamin A

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

Common questions about food and children

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 public health nurse, doctor, practice nurse, or pharmacist.

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
- 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

Tummy Bugs

Tummy bugs are common in babies and young children. If they have a tummy bug, give them an oral rehydration solution such as dioralyte. It's available from the pharmacy and is a sachet of powder which you add water to. Give this drink freely to your child, as well as their normal milk feed, which should be continued and never stopped. Never give your child who has a tummy bug boiled or flat fizzy drinks

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
- 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
- Are ill or have a medical condition

How can I prevent my child getting constipated?

Give your child plenty to drink, such as:

- Breast milk
- Water
- Try to give cooled boiled water only until your child is 1 year old. If you choose to offer juices, only small amounts of well-diluted, unsweetened fruit juice should be given from a beaker only at mealtimes or with snacks and only from 1 year onwards. Dilute 1 measure of pure fruit juice to 8-10 measures of cooled boiled water
- Formula milk. Make sure you make feeds correctly

Give your child high fibre food as part of a well balanced diet, such as:

- Whole grain breakfast cereals, bread, pasta and rice
- Fruit and vegetables
- Baked beans

Caring for your child's teeth

What are the signs that my child is teething?

Your child may:

- Have red, flushed cheeks
- Dribble, which may lie in the skin folds on your baby's neck causing soreness



- Chew on their fists or on their toys more than usual
- Have sore and tender gums
- 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

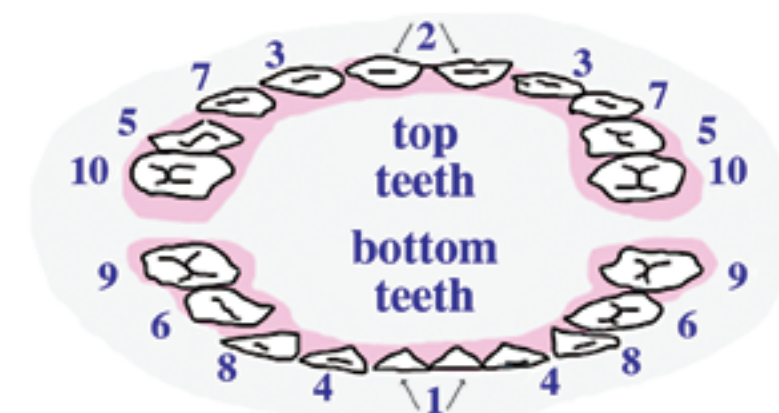
How many teeth will my small child have?

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. 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 or water. Try to give cooled boiled water only until your child is 1 year old
- 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 long 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 or spot any dental problems that may arise

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.

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, knock out or push a baby tooth up into the gum. 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 on 01 4780466.

www.dentalhealth.ie

3 Sleeping and crying



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, doctor or practice nurse for more information and advice.

Where should my child usually sleep?

- 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. At this stage baby will find his or her own sleep position. Always put your child down to sleep on their back, with feet to the foot of the cot and head and face uncovered. Check if your child has kicked the blankets over their head or off their body as they move about.



How much sleep does my child need?

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 • 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 • 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 • 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 • 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 • 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. Make bedtime routines as predictable and consistent as possible. Share bedtimes and storytelling between parents. By developing calm and affectionate bedtimes you can create a time in your child's day when they will share their feelings and the day's happenings with you into the future.

- 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

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. Read the Safe Sleep leaflet available in the publications section of www.healthpromotion.ie



How can I reduce the risk of cot death?

- Breastfeed your baby
- Always put your baby on his or her back to sleep in a face up, face clear position
- Do not smoke or allow anyone to smoke in your home or in your car
- The safest place for your baby to sleep at night is in a cot
- Place your baby's feet to the foot of the cot
- Make sure your baby's head stays uncovered when asleep
- Don't put quilt, duvets, bumper pads, pillows or toys in the cot
- Dress your baby for bed in a nappy, vest and babygro. In hot weather, your baby needs fewer clothes. Always remove the bib (dribbler) before you put your baby down to sleep
- Do not let your baby get too hot or too cold. To check how warm your baby is, feel his or her tummy. It should feel warm not hot. If your baby's tummy feels hot or if your baby is sweating anywhere, then your baby is too warm so remove some of the bedding.
- Make sure the room your baby sleeps in is not too warm. The ideal room temperature is between 16-20 degrees Celsius (62-68 degrees F). If the room feels too warm for you, it is too warm for your baby
- Don't fall asleep in bed with your baby if you or your partner smoke, have taken alcohol, drugs or medication that makes you sleep more heavily or if your baby is less than 3 months old, was born prematurely or had a low birth weight (less than 2.5kg or 5.5lbs)
- Never fall asleep with your baby on a sofa or an arm chair
- If your baby is unwell, call the doctor

Why does my child cry?

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 *Caring for your Baby: Birth to Six Months Old*, available on www.hse.ie/caringforyourbaby

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 and feet
- 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?

Sleeping routines are difficult to establish. Here are some techniques to try, that do work for lots of babies and young children. 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 sooth themselves and fall back asleep
- 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 to work. But if you continue, it will work.

If these techniques do not work for you, or if lack of sleep is getting you down contact your public health nurse.



4 Caring for your young child every day



Bathing your baby

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 children alone in the bath or the bathroom.



Dressing your child

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 have their feet measured correctly. Every 3 to 4 months, go back to get their feet re-measured. Children grow steadily and your child may need replacement shoes.

Preparing to toilet train

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
- Never get upset with your young child. Do not use language that shames, instead think of toileting as an important skill that you are encouraging in your child

Lifting and carrying your child

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. Slings can be handy for breastfeeding while out and about
- 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.

Car seats

Car seats should only be used to transport your child while travelling in a car. For more on car safety see Chapter 7.

Baby walkers

Baby walkers are not recommended for your child. Walkers encourage children to move before they are able to bear weight on their legs. 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. Baby walkers also allow babies to reach things they would not otherwise be able to reach. Babies using baby walkers are at higher risk of head injury, falls, burns, scalds and poisonings.

Immunisation

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. When your child is given a vaccine, their body responds by making antibodies to fight the disease. Immunisations recommended in the childhood schedule are free from your GP.

**PROTECT YOUR CHILD
- IMMUNISE.**



When should I immunise my baby during the first two years

When my baby is:	My baby should have:	Number of injections
Birth or soon after	BCG	1
2 months	6 in 1 + PCV	2
4 months	6 in 1 + Men C	2
6 months	6 in 1 + Men C* + PCV	3 or 2*
12 months	MMR + PCV	2
13 months	Men C + Hib	2

*Children born on or after 1st July 2015 only require two doses of MenC at 4 and 13 months of age

BCG = to prevent tuberculosis (TB)

6 in 1 = to prevent diphtheria, tetanus, whooping cough (pertussis), Hib (haemophilus influenza B), polio (poliomyelitis) and hepatitis B

PCV = to prevent pneumococcal disease

Men C = to prevent meningococcal C

MMR = to prevent measles, mumps and rubella

Hib = to prevent haemophilus influenza B

Minor reactions that may occur after an immunisation include:

- Redness, soreness or swelling in the area where the injection was given
- Fever
- Irritable behaviour

If your baby is very unwell after an immunisation, there may be some other reason for the sickness. Talk to your doctor.

Remember your child needs **FIVE** visits to your Doctor to complete their course of immunisations and be fully protected against serious diseases

For more information about immunisation read Your Child's Immunisation: A Guide for Parents which you should have received from your public health nurse. This Guide has an Immunisation Passport inside the back cover. Please bring this passport with you when you go to the doctor for your child's injections so they can record them for you. Copies of the Guide and passport are available at www.healthpromotion.ie. You can get more information from www.immunisation.ie or contact the National Immunisation Office Phone: 01 867 6108.

Common childhood illness

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

<p>Fever</p> <p>Follow these tips the help reduce your child's temperature:</p>	<p>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 degrees celsius. Get advice from your doctor if your child has a temperature, especially if your child appears unwell or you are worried at all.</p> <ul style="list-style-type: none"> • 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 doctor or chemist has recommended. Read the instructions on the medicine bottle
<p>Febrile convulsion</p> <p>The febrile convulsion may last for several minutes. Afterwards your child may be sleepy and limp.</p>	<p>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:</p> <ul style="list-style-type: none"> • Breathe heavily • Drool • Turn blue • Roll back their eyes • Jerk their arms and legs but have a rigid body <p>To help your child:</p> <ul style="list-style-type: none"> • 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 • 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 doctor if your child finds it hard to breath • Contact your 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. 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 • 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 • Take your child to the family doctor for advice and treatment
<p>Tummy Upsets (Gastroenteritis)</p>	<p>Most cases of gastroenteritis get better without specific treatment. If your child has vomiting or diarrhoea you should ensure that your child drinks plenty of fluids. If you are worried about your child or if there is blood in the diarrhoea, contact your doctor.</p> <p>VTEC (Verotoxigenic E. coli) is a serious type of gastroenteritis that can result in complications such as kidney failure. To prevent spread of infection children who have VTEC are not allowed attend crèches or other childminding facilities until they are free of infection.</p> <p>For more information see the VTEC factsheet on www.hpsc.ie</p>

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 a 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
- 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.

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



5 A guide to your child's growth and development



Posture and movement

Each child develops at their own rate. The information in this section is a guide only. What is important is the general trend of your child's development and not that your child reaches a stage at a fixed time. Do not push these developmental tasks ahead or too quickly. Each phase is important to your child's overall development. Spend time bonding and playing with your child as this is an important part of your child's development.



At 7-8 months, your child may:	At 9-10 months, your child may:	At 11-12 months, your child may:
<ul style="list-style-type: none">• Sit up without being held or supported• Twist around from side to side and lean forward while sitting• Shuffle and wiggle about on the floor while sitting on their bottom• Attempt to crawl on the floor• Put their feet into their mouth• Look to where a toy has fallen if it is close by	<ul style="list-style-type: none">• Pull themselves up into a standing position by holding on to something solid such as an armchair• Fall back down to the ground with a bump as they cannot lower themselves back down• Attempt walking anytime from 8-20 months• Use their index finger (next to the thumb) to jab and poke at small things like a dried raisin• Stretch forward and grasp a toy with both hands while sitting down without falling over• Show that they are annoyed about something by holding their body stiff or rigid when you pick them up	<ul style="list-style-type: none">• Walk around the furniture while holding on to it• Start walking without holding on to the furniture but with one hand holding on to your hand• Drop and pick up toys• Help with being dressed by holding out their arm or leg• Begin to stop drooling and putting objects into their mouth

At 13-18 months (1-1½ years), your child may:	At 19-24 months (1½-2 years), your child may:
<ul style="list-style-type: none"> • Walk about with their arms slightly out to balance themselves at first • Carry things like a toy while they are walking • Fall down when they learn to walk about • Crawl upstairs and come down backwards • Hold a crayon in their fist to scribble • Start to show a liking for using their right or left hand when holding and using a crayon • Throw toys and objects to the floor and watch where they fall • Put things in and out of boxes or plastic jars 	<ul style="list-style-type: none"> • Fall down less often when walking or running about • Push or pull toys along the floor • Squat down to pick up fallen toys • Enjoy climbing up on furniture, such as chairs or the table, as they explore and climb with no sense of danger • Walk upstairs with help and creep downstairs backwards or sit on their bottom and bump down step by step • Hold small objects like crayons more firmly in one hand when drawing and scribbling • Follow you around the house and enjoy helping with everyday chores

Your child's weight gain and growth

Growth measurements are only a guide. They help assess your child's overall development.

How much weight should my child gain from 6 months to 2 years old?

- Most children are about three times their birth weight by 1 year old, but this is only an average measurement.
- Other children gain most of their weight between 1 year and 3 years

Your child may gain weight slower or faster than this guide says they will. For example, if your child was premature, breast fed or sick and off feeds, they might not gain weight as readily as outlined above. Toddlers should have at least 3 hours of physical activity spread throughout the day. This can be anything that gets a toddler moving e.g. crawling, walking, moving around the house, dancing, playing outside and exploring.

What checks of their growth will my child get between 6 months old to 2 years old?

As your young child grows your public health nurse or doctor will check their growth and overall development. These checks take place either in:

- Your home
- Your local health centre
- Your doctors surgery

The checks include measuring your child's:

- Weight
- Head circumference (size)

The results of these growth checks are recorded on your child's Personal Health Record where it is available. This record plots the growth of your child from birth onwards and shows if there are any changes in the average growth of your child.

Your child’s eyes

What can my child see?

Your child’s age:	Your child may:
By about 6 months	<ul style="list-style-type: none">Look around them with interestNotice and reach out for small coloured blocks 2.5cm wide (1 inch) or other objects that are placed 30cm (1 foot) in front of themRecognise familiar toys and people that are about 2 to 3 metres away
By about 9 months	<ul style="list-style-type: none">Reach out to touch objects and toys that they see in front of themLook at small things such as crumbs of bread that are 30cm (1 foot) in front of themUse their hands and eyes to co-ordinate poking at the crumbsRecognise familiar people who are across the street
By about 1 year onwards	<ul style="list-style-type: none">Recognise and point to objects and toys that they wantNotice people, traffic or animals that are moving about outside and watch them with interest for a while

What do I do if I notice something wrong with my child’s eyes?

Some eye conditions are treatable if they are identified early. If you notice something wrong with the appearance of your child’s eyes or with their visual behaviour, contact your public health nurse, doctor, practice nurse or area medical officer. They can refer you to the specialist medical eye service. Your child’s eyes are also checked at the 7-9 month developmental check.

Your child’s hearing

What can my child hear?

Your child’s age:	Your child may:
By about 6-8 months	<ul style="list-style-type: none">Turn their head at once towards a parent or carer when they hear a familiar voiceTurn towards and locate very quiet sounds made at either side of them if they are not too distracted by what is going on in front of them
By about 9 -12 months afterwards	<ul style="list-style-type: none">Search for very quiet sounds, even though they cannot see the object or person making the soundListen to and repeat simple words they hearCopy some sounds they hear you making, like coughing or laughingShow pleasure in making babbling noises and hearing themselves making the sounds

What do I do if I notice something wrong with my child’s hearing?

Babies now have their hearing checked in the hospital. If your child was born before this newborn hearing screening began then their hearing will be checked at the 7 to 9 month developmental check. However, if you are concerned about your child’s hearing at any time, contact your public health nurse, doctor, practice nurse or area medical officer to talk about your concerns. For more see www.hse.ie/newbornhearingscreening

Your child’s speech and language development

What do the words ‘speech’ and ‘language’ mean for a young child?

Speech means your child makes sounds that are correct for their age.

Language means your child understands and uses words and sentences that are correct for their age.

Children begin to communicate from birth. It is important to realise that there are differences between the rate at which each child’s speech and language develops. As a parent, you know your child best. Here are some general guidelines you can look for in your child’s speech and language development. If you have any concerns, then contact your doctor or public health nurse for advice or a referral to a specialist speech and language therapist.

A general guide to your child’s speech and language development.

By 6-9 months, your child may:	By about 9-12 months, your child may:	By about 12-15 months your child may:
<ul style="list-style-type: none"> Make sing-song sounds in double syllables like ‘a-a’, ‘muh’, ‘goo’ Babble a long string of syllables aloud, such as ‘dad-dad’, ‘mam-ma-ma’ or ‘ag-aga’ Make several sounds such as ‘ba’, ‘da’ and ‘ma’ all in one breath 	<ul style="list-style-type: none"> Say ‘no’ and shake their head from side to side Try and sing along to a rhyming song using their own babbling sounds Point at a dog and say ‘bow-wow’ Recognise and respond to their own name 	<ul style="list-style-type: none"> Understand and respond to simple instructions, such as ‘do not touch’ or ‘give me the ball’ Let you know they want something by standing near it and pointing to it, using their own babble of words over and over again Recognise the names of any close family members

By about 15-18 months, your child may:	By about 18-24 months, your child may:
<ul style="list-style-type: none"> Say 6 to 20 recognisable words and understand even more words Practice the new words that they learn as well as sing tunefully to themselves during quiet times, such as when they are lying in bed Join up words now, such as ‘good-bye’ or ‘all gone’ Say ‘thank you’ if they hear you say it often to them 	<ul style="list-style-type: none"> Have a range of up to 50 recognisable phrases such as ‘dada gone’ or ‘more juice’ Say their own name Understand much of what you say and try hard to communicate back by talking to you Repeat the last word you said in a sentence Join in nursery rhymes and sing rhyming songs Let you know when they are hungry or thirsty by asking for food or drink



Are there any tips to help my child learn to speak and understand language?

- Crouch down to your child’s level and look at them when you are talking to them
- Remove distractions. Turn off the television and give your child all your attention
- Set aside 10-15 minutes of your time everyday to listen to what they have to say. Allow them to speak without rushing them. This allows them to feel important and it develops their confidence
- Keep your sentences short and simple
- Talk to your child about everyday things that you are doing and listen to their reply



- Play rhyme games with your child such as ‘This Little Piggy’. Wiggle each of your child’s toes as you say the rhyme. This encourages your child to concentrate on the touch and what to expect with each word.
- Do not talk baby talk to your child. Speak to them as you would to another grown up. A useful website which contains information sheets on early communication and on development of reading and writing from birth to 3 years is www.literacytrust.org.uk

What if we speak a language other than English at home?

Many children grow up in a family where more than one language is spoken every day. Young children adapt very well and pick up different languages quickly. The important thing is to speak to your child in the language that you feel at ease with. This might mean you use one language and your partner uses another language when you talk with your child. As your child grows, they will have a head start at school in two different languages.

Your child’s social, emotional and behavioural development

Your child’s social, emotional and behavioural development is influenced by the way you listen and respond to them and by the way they respond to you. This relationship between you and your child in the first 2 years of their life provides the foundation for good health and well-being throughout the rest of their lives.

- In your child's first year, it is important that you provide a safe, secure and nurturing environment for you and your child to develop. The ways you hold your child closely, make eye contact, speak with them, touch them and comfort them are all part of building this loving and trusting relationship between both of you
- As your child develops from baby to toddler, you will notice how they move from being dependant on you to developing a sense of independence on their own
- As a parent, it is important to know what to expect during these stages so that you can support your child and help them to grow to be as confident and secure as they can be. This also develops the relationship between you and your child

What should I expect in my child’s social, emotional and behavioural development?

Child’s age:	Your child may:
6-9 months	<ul style="list-style-type: none"> • Begin to show fear of things that did not bother them before this, such as heights or going for a bath • Get very attached to you and upset if you go away, for example when you leave them at your child-minding service or with your baby sitter
9-12 months	<ul style="list-style-type: none"> • Seek your attention and cry to get it • Become shy around other less familiar faces and be attached to you • Develop a close relationship with you and trust that their needs will be met by you • Show feelings of happiness by laughing and feelings of anger by screaming and feelings of hurt by crying • Be able to recognise these ranges of feelings in others. For example, they may get upset easily if they see and hear another small child crying
12-15 months	<ul style="list-style-type: none"> • Be easily frightened and cry if they are startled by a sound such as a door banging • Look for your attention and approval but not always do what you say • Have developed a safe and secure relationship with you • React to changes in their daily routine • Be able to sooth and comfort themselves for example by sucking their thumb as well as getting comfort from you

Child's age:	Your child may:
15-18 months	<ul style="list-style-type: none"> • Get upset when they do not get something they want • Be unwilling to share toys with other children • Enjoy and thrive on getting your personal attention and praise
18-24 months	<ul style="list-style-type: none"> • Like to have their own way by testing their limits • Have temper tantrums when they do not get their own way • Become less frightened than they were of things such as heights or people that they do not really know • Learn to deal with short separations from you • Not be anxious to go to bed at bedtime • Not like it if you are cross with them and they may cry • Show resentment of any attention you give to other small children • Develop a sense of themselves such as recognising their own face in a mirror

How can I guide my child's behaviour?

As a parent, you want the best for your child. You want to be able to teach them about good behaviour and give them a guide by setting limits on what is acceptable behaviour for their age. This is not punishment. It is an aspect of teaching your child what is right and wrong. Getting the balance right is not easy. As your child develops, they may misbehave by:

- saying 'no' a lot
- run away when you try to put on their coat or put them to bed
- have a temper tantrum

What should I do if my child misbehaves?

You will need a number of different responses and solutions to help your child if they misbehave.

- Stop and think before you do anything. Try and be aware of why your child is misbehaving. For example, are they looking for your attention or do they not want to share their toys with others?
- Understanding what is going on when they misbehave makes it much easier to know how best to help your child
- Stay as calm as you can and do not get upset or angry. Remember that this is all part of your child's normal growth and development. They are learning from your reaction to their misbehaviour
- Plan to avoid possible misbehaviour problems. For example, try not to bring your cranky child out shopping if they did not have an afternoon nap and are tired
- If your child or others are not being put at risk by the misbehaviour, it can safely be ignored. This means that you don't give the misbehaviour any attention, such as not getting cross with your child or even looking at them. In this way your child realises that this behaviour is not getting them any attention and they will not continue with it
- If you feel the misbehaviour is causing harm to themselves or others and cannot be ignored, make it clear that it is the misbehaviour that is wrong and not your child, as this may affect their self-esteem. For example, instead of saying, 'you are a naughty boy, why can't you be good', say 'James, pushing Andrea is not nice. It can hurt. Please don't push'
- It is also very important that you let your child know that you will take action, such as removing them from the play area if they choose to misbehave again
- Show your love and attention to your child whenever you can. Praise and encourage your child as soon as you see good behaviour. For example, if your child lets another child share their toys, say 'James, it's very nice the way you let Andrea play with your tractor. You are a kind boy'



What is a temper tantrum?

A temper tantrum is your growing child's way of expressing their feelings. For example, your child may become cross with temper if they cannot make you understand what they want, or you do not let them have their own way. During a temper tantrum, your child may:

- Shout
- Scream
- Kick
- Bite
- Throw things about
- Hold their breath
- Sometimes throw themselves on the floor

At what stage could my child show signs of a temper tantrum?

Your child may show signs of a temper tantrum from their second year of life. It gradually tails off by the time they are around three years old.

For many children, these tantrums may only occur a few times, if at all. For other children, these episodes of misbehaviour are more frequent but will ease off as they grow. Watching this temper tantrum taking place in your own home is upsetting enough, but sometimes it may happen out in a public place, such as in a shop or in the street, which can be very distressing for you both.

What can I do to manage my child's temper tantrum?

As your child begins to want more independence you need to manage their temper tantrums carefully. It's very important that you stay calm while managing your child's tantrum, as they will be watching to see how you react. Remember that this is all part of your child's growth and development so do not punish your child for this behaviour. The main tips are the same as "What should I do if my child misbehaves?" on page 49. Here are some other ideas:

- When you say 'no', say it firmly and calmly and offer your child another option. For example, encourage other good aspects of their behaviour, such as getting them to join in play with you and others. Remember, it is the tone of your voice and their understanding of the word 'NO' that is important to learn at an early age
- Sometimes children will test your limits despite you telling them not to do something. By giving in to this misbehaviour, your child may do it again to get other things they want

- It is important that your child understands that if they carry on with behaviour that harms themselves or others, such as pushing or throwing things, then you will take action, such as removing them from the area or taking the object off your child. This lets them know that you are doing this as a result of their unacceptable behaviour
- As they calm down, the temper tantrum will usually dissolve into tears. So, if possible, hold your child gently but firmly during the tantrum. If your child does not want to be held closely during the tantrum, don't insist on it. Just remove anything that might cause them harm or that they might break, and wait calmly, not too far away, for this tantrum to settle
- Have patience. If you find yourself becoming angry or upset with your child's behaviour, see if you can get another adult to take over minding them while you take some time out to unwind

Do not take your child's behaviour during a tantrum personally. They are trying to communicate something such as tiredness, thirst or a simple want. Instead try to figure out what they want. This doesn't have to mean they get what they want but this way you are more likely to know what to say.

What can I do if my child bites?

Sometimes children of the same age bite each other. Usually, the same child does the biting. The best way of dealing with biting is to remove the child who bites and give them the least attention. In this way, you make the biting seem unrewarding and not worth talking about.

Pick up the child who has received the bite. Give them a few minutes of your full and soothing attention. If the other child tries to join in, remind them to wait because their behaviour was unacceptable.



How can I cope with jealousy among my children?

It is normal for your older child or children to feel jealous at the arrival of a new brother or sister. Many young children:

- Go back to ‘baby’ behaviour, such as a child who is fully toilet trained wetting themselves again
- Have temper tantrums again

The time and love you give to your older child or children and the way you deal with their behaviour is important. It is also crucial to how they learn to deal with other emotions as they grow. Here are some tips to help your older child cope.

- The best way to deal with your older child’s misbehaviour is to be patient and understanding with them
- Try to keep the family routine as normal as possible for your older child
- Encourage your older child to become involved especially during times of play and reading
- Do not force your older child to be too involved. They may not want to help

For more advice about coping with your child’s developing behaviour, contact your

- Public health nurse
- Doctor and practice nurse
- You can also call Parentline on 1890 927 277



Health checks for your child

When is the health check?	What happens at this health check?
The 7-9 month developmental check	<ul style="list-style-type: none">• Your public health nurse or medical officer discusses your child’s and family’s health issues and concerns with you and your partner• They will also check your child’s general medical/physical health including<ul style="list-style-type: none">◦ Dental health◦ Developmental progress◦ Eyes, ears, hips, testes (for boys who have not been checked at other health checks) and growth <p>The results are checked against previous measurements to see that your child is growing and developing steadily.</p> <p>If you or your health professional are concerned about any part of the check, then you and your child will be: invited back for a re-check or referred to a specialist for further assessment.</p>
The 18-24 month developmental check	<ul style="list-style-type: none">• Your public health nurse discusses your child’s and family’s health and developmental issues and concerns with you and your partner• Your nurse also measures your child’s growth. The nurse then checks the measurement to make sure that your child is growing well <p>If you or your public health nurse are concerned about any part of your child’s check, then they may check them again or refer your child to a specialist.</p>

Possible signs that may suggest your child is not developing as expected:

If your child, aged 6-12 months:	If your child, aged 1-2 years:
<ul style="list-style-type: none"> Is very reluctant to start solid foods from about 6-7 months on Does not hold toys when offered to them Needs help sitting up Does not use both hands equally Is not crawling or moving forward in some way Does not smile or laugh out loud Does not make different sounds when they speak Does not turn towards you when you call their name Does not make eye contact with you Does not show pleasure when seeing you and other familiar people Is constantly irritable and unable to soothe themselves or gain comfort from you Has difficulty establishing a sleeping, waking and feeding pattern Fails to gain weight even though they seem healthy 	<ul style="list-style-type: none"> Is mainly silent when playing or does not babble a lot Is not able to point to objects and toys that you name Is not walking by 18 months or walks on their toes only Does not imitate actions or words Is not starting to speak at least 15 meaningful words by 18 months Does not follow simple instructions by 2 years old Does not listen when others are talking Does not show any anxiety or upset when they are separated from you Clings to you a lot and does not like changes in their routine Has difficulty interacting with you and other caregivers, including not making eye contact with you Is not responding to the limits you set and can be very stubborn or defiant in their contacts with you and others

If you are concerned about any aspect of your child’s development ask your public health nurse to perform an ages and stages questionnaire on your child. This will look at your child’s development in more detail.

Your child with special needs

As a parent, you may have many difficult choices to make to do the best for your family and your child. All of your family needs support at the assessment and planning of care. Here is a broad outline of services for families of children with special needs.

What services and entitlements may be available?	Who do I contact for more information?
<p>Early intervention team (pre-school developmental team). This team works with you, your child and your family to develop a package of care to suit your child’s individual needs. This team is made up of a range of professionals.</p> <p>A specialist public health nurse may visit you at home at different times, depending on your child’s and family’s needs. These visits are to listen and be supportive.</p>	<ul style="list-style-type: none"> Specialist public health nurses Local disability services Counsellor for children with special needs
<p>Pre-school services</p> <p>A specialist pre-school may be available in your local area. Support for your child in a community or private pre-school service may be provided based on your child’s assessed needs.</p>	<ul style="list-style-type: none"> Specialist public health nurse Pre-school services officer Your public health nurse Counsellor for children with special needs
<p>Respite Services</p> <p>Respite is a break in your routine of caring for your child with special needs. Respite is also a social opportunity for your child with their peer group. Respite services are provided by:</p> <ul style="list-style-type: none"> The Health Service Executive The voluntary sector Private organisations <p>The length of time your child stays in respite and the frequency of respite services may depend on:</p> <ul style="list-style-type: none"> Your child’s needs Your family circumstances The type of service available in your area 	<ul style="list-style-type: none"> Specialist public health nurse Doctor Local disability service Your public health nurse Counsellor for children with special needs

What services and entitlements may be available?	Who do I contact for more information?
<p>Equipment, aids and home support</p> <p>The equipment, aids and home support services that are available to you may depend on:</p> <ul style="list-style-type: none"> • Your child's needs • Your family circumstances • Having a medical card or long-term illness card 	<ul style="list-style-type: none"> • Specialist public health nurse • Occupational therapist • Social worker • Counsellor for children with special needs
<p>Financial support and assistance</p> <p>You may need information about your rights and entitlements for yourself and your family, including:</p> <ul style="list-style-type: none"> • Department of Social Protection allowances, including Domicillary Care Allowance • HSE supports including medical card and long-term illness card 	<ul style="list-style-type: none"> • Specialist public health nurse • Social worker • Community welfare officer • Citizens information centre • Counsellor for children with special needs

There are also a number of specialist voluntary support groups that provide information and support. Contact your public health nurse or disability services for more information on the supports in your area.



6 Playing and learning



What is play?

Play is a natural and active process in which your child's thinking, feeling, doing and learning can develop within a safe and secure relationship with you. You can see the quality of your child's play when you see them relax and become absorbed in what they are doing.

As my child plays, how do they learn and develop?

Your child has a natural ability for learning and developing that is present at birth.

Learning and developing happens in many ways as children grow and express themselves.

Babies need to be physically active several times a day especially through floor based interactive play including tummy time. Children under 6 years that are walking need to be active for at least 3 hours every day. This includes light activities such as building blocks and playing on the floor and more vigorous activities like running and jumping. It is also important that the amount of time that your child is not active or in restricted positions is limited to no more than 1 hour except when sleeping. Watching television is not recommended for children under 2. More information on active play can be found in the HSE resource 'Active Play Every Day' and on www.getirelandactive.ie



Development area	What does my child learn to do?
Physical	<ul style="list-style-type: none">• During their first year, they use their whole body and their 5 senses to play and learn• As they become more mobile in their second year, they stretch and grasp things by using their eye and hand movements together, and balance as they move. This movement includes going up and down, pushing and pulling, moving in and out and playing hide and seek
Intellectual	<ul style="list-style-type: none">• They begin to experiment and test out their developing thinking, reasoning and memory skills. For example, they explore a soft toy as they play with it to discover what will happen if they squeeze it, taste it or drop it
Emotional and Behavioural	<ul style="list-style-type: none">• They express their feelings by laughing, smiling and crying• They use play to express themselves. For example, during 'peek-a-boo' they are interacting with you and learning that you are there even when they cannot see your face• They respond to the warmth of your praise and your cuddles
Social	<ul style="list-style-type: none">• They play with you and others, as well as play happily on their own while you are near <p>Encourage your child to mix with other children by visiting a parent and baby/toddler group.</p>

Learning through the senses

You can help your child to develop and learn about themselves and the world around them by encouraging them to play and use their senses to explore different things.

Sense	Your child learns by:
Sight	<ul style="list-style-type: none">Seeing the different colours of playthingsSeeing people or toys as they move aboutNoticing if things are big or small, long or short and shiny or dull looking
Smell	<ul style="list-style-type: none">Smelling different odours such as perfume on mammy, the smell of dinner cooking, or the smell of freshly cut grass
Sound	<ul style="list-style-type: none">Hearing loud and soft noises, laughter and voices, ringing bells, banging drumsListening to you read to them out loud every day <p>Go to a busy place such as the town centre with your child to hear the sound of traffic moving and horns making noise.</p>
Taste	<ul style="list-style-type: none">Using their mouth to explore and recognise things such as tasting new foods or putting a toy up to their mouth to explore itMaking funny faces when they taste sweet or sour things
Touch	<ul style="list-style-type: none">Touching the smoothness of a rubber toy, the coolness of a mirror or the roughness of a furry floor rugFeeling the wind on their face <p>Encourage your child to touch your face, grasp your hair and clutch your finger.</p>

If your child has difficulty using one of their senses, such as hearing or sight, their other senses help them continue to learn and develop through play.

Developing through play

My child's age	What should I do with my child?	How does my child respond and learn?
6-12 months	<ul style="list-style-type: none">Give your child a few large blocks and toys with wheels to play withShow your child their image in a mirrorSit down, talk and read with your childSpend time holding and cuddling your child. You can do this during daily routines such as nappy changingPoint to your body parts, such as your eyes and ears and say each name out loudPraise your child and give them lots of your attentionMake different funny faces when you play with your child	<ul style="list-style-type: none">Your child likes to pick up things and shake them listening to the sounds they make, especially when they drop themYour child likes to touch and kiss their image in the mirrorThis helps your child to understand speech and languageYour child is also soothed on hearing your voice and is able to tell if you are happy by the way you look at them and speakYour child loves being close to you on your lap and touching the colourful pictures on the bookThey get excited when they see pictures of other babies in books or photosYour child feels secure and bonded to youYour child shows interest in what you are doing with them. You can see this in their eye contact with you and their smiles and babblingListening and watching you point to your eyes and ears helps your child understand the parts of their bodyYour child loves to be praised for the things they do and may clap their hands to show their happinessPraise and love builds their self-esteem and confidenceYour child laughs at your funny faces and tries to copy them

Developing through play

My child's age	What should I do with my child?	How does my child respond and learn?
12-18 months	<ul style="list-style-type: none">Hide a toy in front of your child while they are watching you do itGently throw a soft ball towards your childIntroduce different things for your child to play and learn with, such as a cardigan with a large zip to encourage your child to grasp small objectsPlay a game of chase with your childPlay with blocks that stack on top of one anotherAllow your child some time to play alone while you are nearPlay a game of peek a boo with your child	<ul style="list-style-type: none">Your child enjoys the game and will quickly find the hidden toyYour child tries to copy you by picking up the ball and throwing it back while they are sitting or standingYour child may be able to unzip a large zipper using their thumb and index finger to hold the zipYour child loves you to chase after them and will laugh and squeal with pleasure as they move about with you following themYour child will stack up a few blocks after you show them how to do it a few times. They learn to use their hands and eyes together to build the blocksYour child learns to play contentedly on their own for a while, knowing that you are nearbyThey will show great enjoyment by giggling and smiling and making eye contact with you

My child's age	What should I do with my child?	How does my child respond and learn?
18-24 months	<ul style="list-style-type: none">Play football with your child using a soft ballPlay with a tricycle to help your child's movementDivide your child's toys into two different boxes and switch the boxes around each weekUse an old shoebox and tea towel as a bed for your child's teddy or dollMake a game out of doing routine things like washing and drying your child's hands before mealtimesSit your child on your lap and read stories to themEncourage your child to mix with other children of their own age by visiting a parent and toddler group	<ul style="list-style-type: none">Your child learns to balance on one foot while they try to kick the ball with the other footYou child can sit on a small tricycle and move about by pushing their feet forward on the floor but they cannot use the pedals yetYour child stays interested in the range of toys in the two different boxesYour child likes to copy what they see and hear you do with them, such as putting their toy into the bed, fixing the blankets and singing a song to the teddy or dollYour child likes routines and will recognise that washing hands happens before eating. They also learn to do things for themselves like drying their hands with a little help from youYour child may be able to turn over the page to continue the story you are reading to themIf you turn the picture book upside down, they may recognise this and try to turn it upright againAt this stage your child plays happily on their own while in the company of other childrenThey are not yet ready to share their toys with other children

Playing with toys

Here is a mix of toys and everyday household items that encourage your child's development as they grow. Only use a few toys at a time so your child has time to explore each one. What is important is that you and your child work together during the play. Make sure toys are age appropriate and in good condition, throw out broken toys. Check for the CE quality mark on the toy or on the packaging. When not in use, toys should be stored away to avoid accidents. Store toys where children do not need to climb to reach them.

Suitable toys from 6 months to 1 year old

- Toys with different textures such as crinkle foil or rough and smooth materials
- Rattles and other toys that make a range of noises and tunes
- Mobiles (toys that safely hang over your child's cot). They enjoy reaching and grasping at these toys
- Soft colourful balls and toys to push, roll and catch
- A soft blanket or activity mat with mirrors for your child to touch and toys that make sounds and move about
- Colourful books with thick pages that have everyday pictures such as faces, cars, tractors or animals
- CDs of gentle relaxing music, stories or nursery rhymes
- Blocks that stack on top of one another, or small shapes that fit into a larger box
- Make sure the block or toy is large enough so your child does not accidentally choke on it. Do not give your child a block or toy that can fit through the centre of a toilet roll as the toy is too small

Suitable toys from 1 to 2 years old

- Empty toilet rolls or large spools or thread tied together to make a pull along snake
- Simple insert puzzles and duplo or stickle blocks
- Chunky non-toxic crayons and blank pages for your child to draw and scribble on
- Play-dough to let your child mould and create things
- Books with thick cardboard pages with short stories made up of a sentence on each page
- Toys for pretend play, such as a plastic tea set, or an old hat and shoes for playing dress up
- Big wheeled toys that move about on the floor and can be pushed or pulled along
- Household things such as a saucepan to place smaller shapes into and a wooden spoon to bang on it
- A low-sided box that has some everyday things or treasures such as a lemon, a natural sponge and a soft hairbrush. Make sure the objects in the box are safe before you give them to your child
- Plastic jugs and a basin for pouring, filling and emptying sand and water

You or another adult must watch your child all the time while they play



7 Keep your child safe



How to keep your child safe

Watch your child at all times as they are not aware of danger. When your child starts crawling and moving about, they will begin to explore around them. To protect your child from danger, follow these tips.

- Get down on your own hands and knees and look around each room in your house from your child's level. This will help you to see any potential risks that your child may discover
- Fit childproof locks on doors and cupboards that contain cleaning liquids, medicines and other harmful materials
- Fit childproof socket covers on electrical sockets that your child can reach
- Move glasses and breakable cups, saucers and plates up to higher cupboards in the kitchen
- Move pot plants off the floor, unless you like a messy floor
- Fit stair gates at the top and bottom of stairs and make sure they are correctly fitted and always closed
- Secure all windows with window restrictors that don't need tools for opening
- Never let a small child play or sleep on the top bunk of a bed, in case they accidentally fall down
- Cover or fence off garden ponds or exposed slurry pits on a farm to stop your child falling in. Children can drown in seconds and in total silence in a very small amount of water
- Close the front and back gates to prevent your child getting out on the street or road
- Make sure your child cannot squeeze through the bars on the gate and get out
- Blind and curtain cords are a serious strangulation risk to children. Secure the cords out of your child's reach and sight
- Ensure that your baby cannot fit through gaps in stair railings or balcony railings
- Make it hard for children to climb onto window ledges or to reach a curtain or blind cord. Don't place furniture, beds, cots, toy boxes near windows
- Don't place anything children could climb on near balcony railings. This includes items such as outdoor furniture, plant pots or boxes

- Make sure your child cannot get out onto a balcony without your supervision
- Store your handbag out of reach of children. Coins, cosmetics and keys can be dangerous to young children

For more Safety information and advice see Chapter 7 in Caring for your Baby 0-6 months www.hse.ie/caringforyourbaby.ie or www.hse.ie/childsafety. Read our booklets Keeping your baby safe and Play it safe, available in the publications section of www.healthpromotion.ie



How can I keep my child safe in the sun?

Always protect your child from the harmful rays of the sun. They may get sunburn or sunstroke.

- Keep your child out of the mid day sun and in the shade if possible, especially on very sunny days. For example, shade them under a tree and attach a sun shade cover over their pram or pushchair (buggy)
- Use a layer of sunblock on the exposed areas of your child's skin, such as their face, arms and legs
- Use a sun hat on your child's head and cover their body with a t-shirt
- Protect your child's eyes with sunglasses that have a coating on them to protect against the rays of the sun
- Drink plenty of fluids

What should I do if my child has an accident?

The best advice we can give you is to keep a first aid kit in your home. Also, learn basic first aid skills so that you know what to do in an emergency. It could make the difference between life and death. For more information on first aid courses in your local area, contact the organisations that are listed on page 76.

If the accident looks serious, do not waste any time.

- Phone 999 or 112 and ask for an ambulance, fire brigade or Gardaí
- Let the service know if your child is conscious or unconscious. They will advise you what to do while you wait for them to arrive
- Do not move your child unless you have to

How can I keep my child safe outside the home?

- Make sure an adult you trust always watches over your child when they are out and about
- Let your childminder or service know the names of the people who can collect your child if you can't make it
- Never leave your child on their own in a car
- Never leave your child unattended in a pram or pushchair outside a shop
- Be alert and keep your child close by your side while you are in a public place such as shopping centres, food outlets, public parks or football stadiums

Travelling in a car with your child

What type of car seat should I choose?

Choose a car seat that:

- Conforms to a recognised safety standard mark (check label on the seat)
- Is suitable for your child's weight and height
- Is a suitable fit for your car and
- Is correctly fitted into the car according to the manufacturers instructions

How can I keep my child safe in the car?

- Drive carefully
- The back seat of the car is a safer place for your child to travel
- Never put a rear-facing baby car seat into a front passenger seat where a passenger air bag is fitted
- Secure your child in their correct car seat every time they go into the car, no matter how short the journey

What are the types of car seats for my child's weight and age?

Type of child car seat:	Your child's weight:	Your child's age:
Group 0: Rear facing baby seat	For babies up to 10kgs (22lbs)	Birth to 6-9 months
Group 0+: Rear facing baby seat	For babies up to 13kg (20lbs)	Birth to 12-15 months
Group 1: Forward facing child seat	9-18kgs (20-40lbs)	9 months to 4 years

For more information about fitting your child's seat and keeping your child safe in the car, see the Road Safety for Kids section on the Road Safety Authority website www.rsa.ie

Remember car seats are designed to keep babies safe while travelling, not as a main sleeping place. Take frequent breaks on long journeys to get the baby out of the seat, even if this involves waking the baby up. Stop your baby from scrunching up and over and keep an eye on their neckline. Babies travelling in a car seat should be watched by a responsible adult.

Watch your child at all times as children do not understand danger. For more child safety information see www.hse.ie/childsafety



8 Childcare arrangements



We discussed good childcare arrangements in the booklet **Caring for your baby: Birth to Six Months Old**. The information included:

- Childcare options
- What to look for before you make good childcare arrangements

The advice on choosing childcare in that booklet is still relevant if you ever need to change your childcare arrangements, or if you are now thinking of choosing a babysitter. Advice on choosing a childminder or preschool is at www.tusla.ie and Identifying Quality Childcare on www.barnardos.ie

Babysitting arrangements

Choosing a babysitter to care for your child now and then, is as important as choosing a day care service. You want a good babysitter who will put the safety and welfare of your child first. Think about it and discuss the options with your family and other people you trust.

Are there any tips to help me choose a good babysitter?

- Consider a babysitter's level of experience, sense of responsibility and ability to care for your child
- Meet with other parents in your area to see what babysitters they have and how they went about making that suitable choice
- Some parents that you trust may have teenagers and younger children. The teenagers will be used to minding younger sisters and brothers. They may be interested in babysitting for you
- Find out the local rate for babysitting before you hire someone. Discuss pay with your sitter so that you are both comfortable with the payment beforehand
- Have a reserve babysitter in case your usual person is unable to make it
- You know you have chosen a good babysitter when your child looks forward to seeing them and appears comfortable and relaxed with them

What points should I discuss with my babysitter?

- Chat about your child's night time routine so your babysitter is familiar with it. This includes looking in on your sleeping baby about every half-hour and an older child every hour
- Show your babysitter the layout of your home including:
 - Where the fire exits and door keys are
 - Where first aid equipment is kept
 - How equipment such as cookers and the heating system works
- Discuss security issues with your babysitter so that they know what to do if:
 - The telephone rings when you are out
 - Someone calls to the door

What should I expect of my babysitter?

Discuss with your babysitter what you expect of them. For example, you may not want the babysitter to:

- Leave the house at any time while you are away
- Let other people into your home, unless you are aware of it and approve
- Smoke or drink alcohol in your home
- Fall asleep while babysitting unless they are staying over for the night
- Have loud music or wear headphones that would prevent them from hearing your child crying
- Use the telephone, unless you are aware of it, and approve

What should I prepare for my babysitter before I go out?

- Let your babysitter know to the nearest half hour when you are due to come home
- Write down the following numbers and give them to your babysitter:
 - Emergency telephone numbers such as 999 and Gardaí
 - Your mobile telephone number
 - The address and telephone number of where you are going
 - Another contact number, such as a local member of your family, or a local friend, in case your babysitter cannot contact you in an emergency

9 Your benefits and leave entitlements



Children in Ireland are dependants of their parents and so have the same entitlement to health services as their parents. This means that if you have a medical card, your children are included as dependants on that card and are entitled to the same range of services as you.

There is also a range of services specifically for children and certain services are provided free of charge for children even if their parents do not have a medical card. These services are generally provided as part of maternity and infant welfare services, health services for preschool children and school health services. Children are also entitled to vaccination and immunisation services free of charge.

There are various state benefits and leave entitlements for pregnant women and parents. There may also be extra supports and entitlements, for example if your child has special needs. The facts below were correct at the time of going to print but may change in the future.

Health Service Schemes

The HSE provides benefits and services to thousands of families and individuals in Ireland, including schemes provided for in law to make the cost of health and medical care more affordable. Some schemes are means tested, some are based on age groups and some are available to all residents. For example:

- Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, prescription medicine costs, hospital care and a range of other benefits free of charge
- GP Visit Cards allow individuals and families in Ireland to visit their family doctor for free
- The Drugs Payment Scheme ensures that any individual or family in Ireland only has to pay a fixed maximum amount each month for approved prescribed drugs
- European Health Insurance Cards ensure that all Irish residents can access healthcare while traveling to other EU and EEA member states.

See www.hse.ie/benefits to see if you and your family should be registered for these schemes.

Adoptive Benefit

- Adoptive Benefit is a payment to an adopting mother or to a single adoptive father from the date your child is placed with you

- It is available to both employed and self-employed people

Adoptive Leave What is it?

- You must tell your employer in writing at least 4 weeks before you start your leave
- You are entitled to time off without loss of pay for antenatal and postnatal medical visits
You must inform your employer 2 weeks in advance
- You must inform your employer in writing 4 weeks before you start your leave
- You are also entitled to a further 16 weeks unpaid leave after the end of your adoptive leave

Paternity leave

There is no legal entitlement to paternity leave in Ireland. Check if your employer has a policy on paternity leave.

Parental leave for mothers and fathers What is it?

This is unpaid leave for each parent. It must be taken before your child is 8 years old or up to 16 years for children with a long-term illness. This leave can be transferred from one parent to the other if both parents are employed by the same employer, subject to agreement. This leave can be taken in one block or divided into sections, with agreement from your employer.

How long is it?

18 weeks

Who do I contact?

- Your employer
- Your local Citizens Information Centre 0761 07 4000 www.citizensinformation.ie

Child Benefit

Child Benefit (previously known as Children's Allowance) is payable to the parents or guardians of children under 16 years of age, or under 18 years of age if the child is in full-time education, Youthreach training or has a disability. Child Benefit is not paid on behalf of 18-year olds. For the most up to day information on the rates see

www.citizensinformation.ie

When to apply?

Apply for Child Benefit within 12 months of:

- The birth of your baby
- The month the child became a member of your family
- The month the family came to live in Ireland

Who do I contact?

- Your local Citizens Information Centre, 0761 07 4000
www.citizensinformation.ie
- Social Welfare Services (Child Benefit section) LoCall 1890 400 400,
www.welfare.ie

One-Parent Family Benefit

One-Parent Family Payment (OFP) is a payment for men and women under 66 who are bringing children up without the support of a partner. To get this payment you must meet certain conditions and you must satisfy a means test.

More information is available from your local Social Welfare Office LoCall 1890 50 00
www.welfare.ie

Other benefits you may qualify for

You may also apply for some of the following:

- Back to Work Allowance
- Back to Education Allowance
- Disability Payment
- Domiciliary Care Allowance
- Exceptional Needs Payment
- Family Income Supplement
- Medical Card

- Mortgage Interest Supplement
- Rent Supplement
- Supplementary Welfare Allowance
- Supplement for special diet
- Unemployment payments

Who do I contact?

- Your local Citizens Information Centre,
0761 07 4000
www.citizensinformation.ie
- Your local Social Welfare Office,
LoCall 1890 50 00
www.welfare.ie



10 Useful web pages and phone numbers



Information on:

Accident prevention and safety

Road Safety Authority
www.rsa.ie
1890 50 60 80

Irish Sudden Infant Death Association
www.isida.ie
locall 1850 391 391

Child Safety – Preventing unintentional injuries
www.hse.ie/childsafety

Breastfeeding support

Breastfeeding Support Network
www.breastfeeding.ie

Cuidiú, Irish Childbirth Trust
www.cuidiu-ict.ie

La Leche League
www.lalecheleague.org

Child health information

Food Safety Authority of Ireland (information on food safety and hygiene)
www.fsai.ie
(01) 817 1300

Safe Food
www.safefood.eu
1890 33 66 77

Heath Promotion Unit
www.healthpromotion.ie
1850 24 1850

Health Protection Surveillance Centre
www.hpsc.ie
(01) 876 5300

National Immunisation Office
www.immunisation.ie
(01) 867 6108

Meningitis Research Foundation (information and support on meningitis)
www.meningitis.org
1890 413 344

Family planning information

Irish Family Planning Association:
www.ifpa.ie
1850 49 50 51
Available in 8 centres around the country

Social welfare and services information

Citizens Information
www.citizensinformation.ie
1890 777 121

Social welfare information
www.welfare.ie
1890 928 400

Parent Support Information:

Aware (support for depression)
www.aware.ie
1890 303 302

Adoption: International Adoption Assoc of Ireland
www.iaaireland.org
01 4992206

Barnardos (working with children and families)
www.barnardos.ie
1850 222 300

Cairde (challenging the health inequalities of ethnic minorities)
www.cairde.ie
(01) 855 2111

Childminding Ireland (for registered childminders in your area)
www.childminding.ie
(040464007)

The Equality Authority
www.equality.ie
1890 245 545

Fathers direct (information for fatherhood)
www.fathersdirect.com

Family Support Agency (a resource for families and family well being)
www.fsa.ie
(01) 611 4100
Irish Multiple Births Association
www.imba.ie
(01) 874 9056

Irish Society for the Prevention of Cruelty to Children
www.ispcc.ie
(01) 676 7960

Irish Refugee Council
www.irishrefugeecouncil.ie
(01) 764 5854

Lifestart: Home-based education and support programme for parents
www.lifestart.org
(071) 9151114

National Centre for Inherited Metabolic Disorders
www.ncimd.ie

National Disability Authority (and links to Irish disability organisations)
www.ndale
(01) 608 0400

National Immunisation Office
www.immunisation.ie
(01) 867 6108

One Parent Family (voice, support and action for one parent family)
www.onefamily.ie
1890 662 212

Parentline (for parents under stress)
www.parentline.ie
1890 927 277

Pavee Point (Traveller development and support centre)
www.paveepoint.ie
(01) 878 0255

Treoir (national information service for unmarried parents and their children)
www.treoir.ie
1890 252 084

References

The information in this booklet came from the organizations mentioned in the booklet, the websites listed in section 10 and the following books and reports.

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Health Education Board for Scotland (2002). Ready, Steady, Baby: A guide to pregnancy, birth and early parenthood (2nd edition) Edinburgh: Health Education Board for Scotland.

HSE (2005) Child Safety Awareness Programme (CSAP).

National Core Child Health Programme Review Group (2005) Best Health for Children Revisited. Report from the National Core Child Health Programme Review Group to the HSE. Dublin: Programme of Action for Children

Sheridan, M (2008) From Birth to Five Years: Children's Developmental Progress (Revised and updated by Ajay Sharma and Helen Cockerill) New York; Routledge.

These websites and phone numbers were correct at the time of going to print.

