## The first 4 years (0-4)

#### Dear parents,

Congratulations on the birth of your baby! You have one of the volumes of The Growth Guide in your hands. The Growth Guide consists of seven practical booklets and a collection box.

This volume of the Growth Guide contains a lot of information on the development, health and safe upbringing of your child during the various phases of his life. You will also find practical advice for the difficult situations you will sometimes encounter when raising your child. The Growth Guide can also serve as a guidebook for the many major and minor doubts or concerns which all parents face every day. The conveniently arranged list of contents and index make it easy to find the subject you want to know more about.



It is essential to us that the information included in this Growth Guide is reliable. To achieve that goal, we have entered into an agreement with Opvoeden.nl. Our publications are reviewed and validated by the national knowledge institutes. For more information, see the Colophon (page 134).

In every Growth Guide volume, there is space at the back for your own notes and information, so that you will always have these close at hand.

#### We wish you happy reading!

Download the GroeiApp or go to www.groeigids.nl to make a lasting record of your child's development, with all his growth curves, vaccinations, milestones, photographs etcetera.



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Child health care centre	e (consultatiebureau):
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Telephone/regular visit/weight check:

Date	from	till
Our Child health care nurse:		
Our Child health care doctor:		
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**Appointments** 

date	time	notes

If for any reason you are unable to make your appointment, please let the Child health care centre know as soon as possible.



Our doctor/general practitioner (GP):

Parenting support centre (Opvoedsteunpunt):

Child day care centre (Kinderdagverblijf):

Nursery school/pre-school:

Group leader:

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#### Your own notes

This booklet allows you to make notes, to store vaccination documents and messages as well as notes or reports from other institutions involved with your child. This will help you to keep a valuable record of your child's development, right from the start.

On www.groeigids.nl (in Dutch) you can make your digital booklet, including your own photographs. Or you can use the GroeiApp (Growth App). To make sure that the Growth Guide is easy to read we have decided to use 'he' when referring to your child. We will therefore consistently refer to a child as 'he' and 'him' whether it is a boy or a girl. Needless to say, we mean both boys and girsl.

#### Together with you

The Child Health Care Centre (Consultatiebureau) forms part of the Youth and Family Centre (CJG). Here, staff from Youth Health Services monitor, with you, the child's growth and development. Data are kept for you at the back of this booklet.

Together with the School Health Service, the Child Health Care Centre makes up the Youth Health Service (JGZ).

From birth to the age of 19, your child's growth and development are monitored by the Youth Health Service.

Most CJG's have a website of their own with information on training courses, opening hours and local news.

Look for: www.cjg.nl

Mother			
height	weight	photo	
Colour of hair	Colour of eyes		

Immediate ancestors of photo

Father		
height	weight	photo
Colour of hair	Colour of eyes	

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Grandmother	

		-	
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Grandmother		
height	weight	 photo
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Grandfather		
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# Baby, infant, toddler, child

Your baby has arrived! You and your child have probably become used to each other. As the baby grows, you will get to know each other better and better. The little sounds he makes and the way he behaves will indicate his moods and his needs, although a baby cannot yet use words to express his feelings. Even if everything is going well, every parent worries sometimes. Why is my child crying? Is he in pain? Is he growing enough? Is he developing normally? In this section of the Growth Guide we will provide you with an answer to many questions and give you advice on how to look after your child.

From time to time, this booklet will mention the partner as a source of support. However, many children are raised by single parents and these children have the same development possibilities as those who are being reared in traditional two-parent families. For a single parent, there is no partner to share the responsibilities. It can be important to have family or friends to fall back on for support.

If you encounter a problem, call the CJG for advice. If necessary, they will refer you for appropriate advice or help. It is often not even necessary to make an appointment for a visit or for a weighing. You can make a note of the opening hours and telephone numbers on the first pages of this Growth Guide.

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#### Not always perfect bliss

A new baby is not always a totally happy event. There may be medical problems, your child may be premature and/or too small. After a difficult delivery it may take you a while to recognise and feel the bliss. Having a baby is a major event with a heavy burden of responsibility. You do not have to be happy all the time. Feelings of sadness, the so-called baby blues, need to be allowed, just like those notorious moments of tearfulness. Do not carry on in silence, talk to your partner about your feelings, or to your gynaecologist, maternity nurse or doctor. Especially if you are suffering from post-natal depression, you will certainly need help (and possibly medication).

Or go to www.groeigids.nl and look for postpartum depression.



#### Bringing up together

Bringing up children may be a lot easier if and when parents are able to support each other positively. Caring for a baby demands a great deal of time and effort. At times you will feel as if you no longer have any time for yourself or your partner, or to find comfort in those pleasant and comfortable feelings. Many parents like to split their educational responsibilities and to look for solutions to problems together. This will make you feel like a team. You will have the best chance of coming up with a solution if you find a quiet moment and stay calm during these discussions. More information is to be found on www.groeigids.nl. Look for 'Ouderschap' (Parenthood).

#### Make sure you get the support you need

Everybody needs support. Who are your primary supporters? It may be your partner, a grandmother or a neighbour. Are you sure you have enough support, with these people around you? If not, maybe you can think of other persons you would like to involve in your life. Or you could talk to someone from the Youth Health Service. They can provide you with information about the possibilities in your neighbourhood.

#### Look after yourself

It is not just children who will need a compliment or a pat on the back from time to time. Adults have the same need. As a parent, you should sometimes stop and think about what you are doing right. "I managed to stay calm when my baby went on crying". It may be very pleasant to pay your partner a compliment, or to get a compliment in return. Compliments make you feel good and build confidence, in yourself and your partner! Take the time to talk about upbringing and family matters. For instance when your child is asleep. Stop and think about what is going well and about things you might want to do differently or which you find difficult.

#### Back to work or studies

After their parental leave period, many parents go back to work or studies. This could well be a major change. Often they will share the work involved in caring for the baby. It is important that both parents should have the opportunity to do so.

Day care for children is available for parents who work or study. It is vital to find a stable situation for the child, where he feels safe and secure. Make sure that you are in constant touch with the babysitter or the day care group leader. Keeping notes on sleeping, eating, and moods etcetera may be useful. More information is to be found on www./groeigids.nl. Look for 'Werk en kinderen' (Work and children).

#### How to combine working and breastfeeding?

Up to the age of 9 months, you have the right to use a quarter of your working hours to feed your child. If your child is at a day care centre near you, you could go there to feed him. Or you can use a breast-pump at work, in which case there has to be a space where you can pump without being disturbed. For more information about preparing for breast-feeding and about how to keep breast milk, read the Growth Guide booklet on Breast-feeding, go to your local CJG website or to groeigids.nl.

Until the age of 8 years, both parents have the right to take a period of parental leave. For more information visit the website of the Ministry of Social Affairs and Employment: www.szw.nl

#### Getting used to the nursery or the babysitter

Well before you (both) return to work, you should start the process of helping the baby get accustomed to the leader of the day care centre or the babysitter. Child day care centres usually have a protocol, based on a gradual approach. It is advisable to start before you return to work, so that you will be available if needed. If you are considering other possibilities, such as placing your child with a host family or an in-house baby-sitter, the gradual approach is also the most suitable.

# Your baby: the first three months

#### Your baby's development in the first three months

Young children discover themselves and the people around them. They get to know the outside world, they learn to communicate and they begin to understand how things work. Every child has his own way of learning, as well as his own order of learning. It may be interesting to watch and record how your child starts this process. On one of the next pages in this booklet, you can fill out a list of your child's development in the first three months.

#### Your baby's feelings

What is going inside that little head? For a start, a child will learn to recognise his parents very quickly. Inside the womb, he has got used to your voices. At birth, your child's brain is not yet fully developed. The first years are important, because your child will acquire a great deal of experience and his brain is developing quickly. That is when you develop your own emotional ties with your child. It is essential that you take enough time for that: it is good for you too.

Look at your child, talk to him, touch him and hold him. This will give your baby a feeling of warmth and safety. Watch your child and listen to him carefully, to get ever closer to him. In the first few weeks of his life, the baby will not be able to concentrate on that contact for very long. He may look away.

Babies love repetition, it makes their world predictable. Small variations help to make life more interesting for your child.

#### Parents know their child best

As you are the person who sees him most often, you will be the first to discover how to explain things to your child. So keep trying to get to know him better!

Some questions:

- How is your baby communicating with you? Babbling? Staring at you intensely?
- How does he show that he recognises you? Does he laugh, wave his arms, stamp excitedly, or blink his eyes contentedly?
- How do you notice that he is relaxed? In what position is he lying then? How do his hands look? How does he feel?
- How can you tell that he is curious? Does he lift his head, or start making noises?

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#### Crying

Crying is normal for babies and children and it is a form of communication. In the second week, babies will cry for an average of one hour a day. The amount of crying increases until approximately six weeks when the average crying time is three hours a day. From then on the crying will often start to decrease, even if you do nothing special. But remember, the amount of crying and crying times differ a lot from baby to baby. Researchers have not yet been able to determine why babies cry more in the first weeks, but it is the same all over the world. Current scientific opinion is that it has to do with the development of the central nervous system. The most common times for crying are late afternoon or early evening and it is thought that babies use crying to discharge the tension they have built up during the day. The number of daily crying sessions cannot always be reduced by good care, but it may be possible to reduce the crying time by reacting adequately. Hold and comfort your baby when he is inconsolable.

If you are not sure that there is no other reason for the baby crying, make sure to consult the Child Health Care nurse or doctor. They will check your child to see if there is any medical reason for crying and they will offer you support at this difficult time.

#### Consoling and soothing your baby

It is perfectly all right for you to pick up a baby when he is crying inconsolably and to hold him safely against you. Talk to him softly, sing a lullaby, or cradle him gently. He will hear your voice and heartbeat, he will feel your movement, which will make it easier for him to calm down. A sling is ideal in these situations. When selecting a sling, go for one with a wide seat, as it gives better hip support. A well-tied sling gives the best 'seat'. The baby feels comfortable, with his head well supported. In a way, it resembles the cover provided by the warm and familiar womb. Your body heat will provide extra warmth, so make sure the baby is not wearing too many layers of clothing or he may overheat. Holding a crying baby to your chest and soothing him is a good thing, but think of yourself. Make sure you get enough rest. The Child Health Care Centre will be able to advise you on this.

#### Spoiling?

Crying and consolation are part of a baby's life. Contrary to what was thought in the past, it is impossible to spoil a baby in his first weeks. Babies have to absorb a great number of new impressions and their parents' support is indispensable.

#### Sometimes, it's just too much

There may be moments when a baby demands more from you than you can give. For instance, if your child cries a lot. It is not easy to see and hear that he is unhappy. As a result, you may feel very frustrated and possibly even angry. Perhaps relatives or friends will be able to lend a hand, so that you can get some rest.

#### What can you do if it is too much?

- Put your baby in a safe place, like his bed or the pen.
- Leave the room.
- Do not go back to your baby until you have calmed down.
- Talk to family, friends, the Child Health Care Centre, your doctor or the gynaecologist.



#### Why is it dangerous to shake a baby?

A baby's head is large and heavy in comparison to the rest of his body. If the head is not supported, it will shake to and fro, because the neck muscles are not strong enough to keep it in position. Shaking the baby exerts serious pressure on the head and may cause tiny blood vessels in the head to burst, possibly leading to blindness, deafness, epilepsy, learning difficulties, brain damage or even death. This is called 'shaken baby syndrome'.

If your baby cries a lot, it may be hard for you. There are many ways to get help. Talk to your GP or Child Health Care Centre They can check your baby for possible medical reasons for crying or be of assistance to you in these tough times.



### Seven ways to prevent prolonged crying and make your baby sleep better

If your baby cries a lot or is very upset, you will probably have found a way yourself to calm him down. If you need more advice, the following seven methods are quite practical. They will introduce an element of restful routine into his life, which will be especially useful for easily stimulated babies. If this does not work sufficiently against prolonged crying, ask the Child Health Care Centre about other methods.

#### 1. Steady daily routine

Babies love routines. A baby will cry less if he knows, more or less, what is going to happen. The same daily sequence of activities will make him feel at ease: sleeping, waking up, feeding, hugging or 'talking'. A baby may appear sleepy after being fed, but sometime he just needs to recover. He does not have to be put to bed then.

#### 2. Sleepy?

How does he show he is tired? Does he close his eyes, or look away? Maybe he starts pulling his ear, or rubbing his fists against his head?

#### 3. Put the baby to bed when he is tired, but still awake

If a child is used to falling asleep by himself, he will sleep as much as necessary and will awake refreshed. A child needing help to get to sleep, will wake up at every unexpected sound, or if he makes an involuntary movement. It may take a baby 5 to 20 minutes, during which time he may cry or whine, before he suddenly drops off to sleep

#### 4. Predictable activities

A baby should sleep in a quiet place, such as a cradle, bed, pram or cot, or in a sling. Young babies will sleep anywhere, preferably in a quiet room. It is good for your baby to learn to sleep in his own bed (see page 32: Sleeping well).

#### 5. Avoid too much outside distraction

You can do this by making sure the radio and TV are not switched on all day, by not putting a baby aged less than 3 months under the baby gym all the time and by not putting him in front of the TV. Try to limit visits during his sleeping hours.

#### 6. Rest

Give him a healthy mix of sleeping and being awake, quiet surroundings and not more than one outdoor activity per day.

#### 6. A tightly made up bed

A baby often sleeps better when his arms and legs cannot move in all directions. You can make up the bed so that the blanket reaches up to the baby's shoulders while his feet touch the bottom end of the bed. Tuck the blanket in snugly and your child will be comfortable. If there are no medical objections, you may wrap your baby in a special swaddle. Ask the Youth Health Care Centre for advice.

### Nutrition

#### Breastfeeding as required

Breast-feeding is unique: it always has the right composition. It always has the right temperature. The quantity is automatically adapted to the age of the child. For instance, milk for a two-week-old child is different from the milk for a new-born baby. From the age of 4 to 6 months, breastfeeding can be supplemented with small portions of extra food. The Growth Guide on 'Breastfeeding' contains detailed information. Or go to www.groeigids.nl, www.borstvoeding.nl or www.voedingscentrum.nl

In some older houses or apartments, lead piping is still used. If this is the case, you should avoid using tap water for bottle-feeding as it can cause lead poisoning. During the first three months, drinking water in newly built houses also contains too much lead. You should then use bottled water (still, not fizzy) to prepare the formula food.

#### Formula food

Maybe you are unable or unwilling to breastfeed. In that case there are many different kinds of prepared formula milk for bottle-feeding. The maternity assistant ('kraamverzorgster') or the Youth Health Service will help you select the most appropriate food for your baby. It is wise to take advice on this, because frequent changes can unsettle a child. When preparing formula, make sure you use the right quantities of water and milk powder. Tap water in the Netherlands is safe, so there is no need to boil it first. Do not reheat leftover milk, as there is a risk of bacterial infection. Wash the bottle immediately after use. This is best done as follows:

- Immediately after use, rinse the bottle and the dummy in cold water;
- After every feeding, wash the bottle and the dummy in a dishwasher at not less than 55°C. Or use a special bottle brush to clean the bottle and dummy in hot water and soap;







- Let the bottle and dummy dry upside down on a dry, clean cloth.
- Boiling is only necessary the first time, with a new bottle.

#### Spitting

Sometimes, when burping, a baby will spit out a little milk. This is called a 'mouthful' and may be caused by the stomach entrance not closing properly yet. If you hold the child against you in an upright position, he can burp and let the food go down smoothly. Drinking too much can also lead to spitting. Watch your child carefully when he is drinking and do not force him to drink when he no longer wants to.

If a baby spits a lot, or cries when spitting, or if the food is vomited with some force (in an arc), check with the Youth Health Service or with your GP.



#### Vitamin K

During the first three months, Vitamin K is needed to allow the baby's blood to coagulate. From week 1 (day 8) until they reach the age of three months, breast-fed babies need 150 mcg of Vitamin K per day. Once formula food exceeds 500 ml per day, there is no more need for Vitamin K-drops.

#### Vitamin D

10 mcg of Vitamin D, given daily for the first four years of his life, is good for the baby's teeth and bones. Vitamin D is needed as an addition to breast-feeding or formula milk. Giving your child the vitamins at the same time every day (for instance, at breakfast) will make it easier for you to remember. If your child is dark (skinned), he will need Vitamin D throughout his life.





#### Intestinal aches and cramps

Is your baby crying inconsolably? Is he restless and jerking his legs? In that case, he may be having intestinal cramps. This usually starts during and after feeding and may get worse during the day. Cramps usually start two weeks after birth. They become less intense after four months; at 6 months, most babies will have got over them.

If you bottle-feed your child, the cramps may occur if the baby gulps down the food too greedily or if the mix of water and powder is not in line with the instruction. Shops sell drops to alleviate these cramps, but make sure to consult the Youth Health Care Centre first. And if you think there is something more to it, always consult the nurse or doctor at the Youth Health Care Centre.

When it is warm, a baby will sweat more and may need some extra fluids. If you are breast-feeding, offering the breast will do the trick. If your baby is getting formula, some extra water will be welcome.



The following may be useful in the event of cramps:

- Stop feeding if your child starts to cry. The intestines will calm down more easily.
- Put your baby in a somewhat upright position when feeding him.
- Take enough time for a burp after the feeding.
- Use a teat with a smaller hole, forcing your child to take more time to empty the bottle and reducing the amount of air coming in with the food.
- Hold you child close to your body. Even if he does not stop crying, that will comfort him.
- Sucking a little finger or a dummy may also help to calm him down.
- Get some warmth on his stomach, for instance in a bath.
- Lull your child gently: this will often make the pain go away. The best



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way to do this is by resting his stomach on your hand and lower arm, leaving the legs to dangle either side of your hand

#### Food allergy

Sometimes, your baby does not react well to his food. He may develop skin problems, or intestinal trouble. Your child may sleep badly, cry a lot or be very unsettled. Sometimes, it is obvious that these complaints get worse immediately after feeding, at other times it is not. If there is a history of allergy or asthma in the family (father, mother or older sibling) then there is an increased risk of the baby developing an allergy too. You should discuss this with the Youth Health Service. The only way to be certain is by trying out a diet, under the guidance of the Youth Health Service, your own GP or a dietician.

#### Thrush: pain in the mouth

Is your baby crying and refusing to drink? It may be because of thrush. This looks like a white deposit or white patches on the tongue, the palate or the inside of the cheeks. You cannot wipe it off with gauze. Thrush is an uncomfortable and painful fungal inflammation affecting the skin and membranes of the mouth. It usually goes away after a few days.

If your child continues to drink fitfully or even cries as he is being fed, you may use medication, to be prescribed by your doctor.

After a few days the infection may make its way through the intestines and cause a nappy rash. In the event of thrush, take extra care to wash your hands, to clean breast pads more often and to boil the bottle-teats every day.

If you are breast-feeding your baby, you may pass on thrush to each other. To prevent the contagion, you too should get thrush treatment.

#### Thumb or dummy?

Many babies will want to go on sucking after they have been fed. Sucking is important to them. That is why, at a certain moment, they will stick their own thumb or fingers in their mouth and suck. Sucking the thumb negatively affects the shape of the mouth. That effect is less if a dummy is used. After a year, you can start taking your child off the dummy.

It is easier for a child to learn not to suck on a dummy than not to suck on his thumb. You can decide if and when you give your child a dummy and when you take it away again, for example when he is playing or has fallen asleep. That way, you can prevent dummy sucking from becoming a habit. The ability of a child to produce sounds is important for developing his speech.

The instinctive sucking, and the need to suck, will gradually decrease. Then you can start phasing out the use of the dummy, only allowing it at bedtime. To end its use altogether, see p 68.

A good dummy is solid and flat and the tip points slightly upwards. The mouth guard should have holes in it.





## Caring for your baby

#### The baby takes a bath

It is nice to splash about in the bath. That is the way most babies see it. For parents too, a splash in the bath is one of their favourite moments in the day for being together. The exact time of your baby's bath is not so important. Be careful with the temperature of the bath water. Use a thermometer, or your own elbow, to check it. The ideal temperature is 37°C. Adding a little baby bath oil to the water is best for your baby's sensitive skin. Soap and shampoo will dry it out. If your child has dry, rough skin we advise you to bathe him every other day. Never leave your child alone for a second when he is splashing about in the bath, not even when he can sit up straight.

#### Defecation

The number of times a breast-fed baby defecates can vary. At the age of one week, one to three times a day is quite normal. At the age of six weeks, that may change (but it is not certain that it will). Some babies do not defecate for two weeks. There is no need to worry, this is a normal pattern for a breast-fed baby. If he is being given formula food, a baby may defecate every day or three times a week. The defecated substance may be more solid than in the case of breast-feeding.

#### Solid faeces?

If your child is trying to defecate, his face may turn red. This normally indicates exertion (pushing), rather than constipation. If he has trouble pushing out the faeces, a warm, relaxing bath may help. Rubbing his stomach (clock wise) or gently moving his legs in a pedalling motion, while he is on his back, may give relief. Occasionally, the baby will be bothered by a small, painful fissure around his anus. You can apply some vaseline. If the baby's faeces is solid and hard every time, please consult the Youth Health Care nurse.



#### Diarrhea

Diarrhea can happen to all children. It usually goes away by itself. Young children have a (greater) risk of dehydration, especially if they spit or do not want to drink. A breast-fed baby's poopy diapers sometimes look like diarrhea. But this is only the case if your child defecates far more often than normal or if the defecation is watery and/or smelly. If your child is on formula, we call it diarrhea if he has three or more nappies with watery faeces per day. In the event of diarrhea, make sure to give your child extra fluids (either breast or formula) and if necessary complement this with a solution of salt or sugar. Contact your doctor if your child not only has diarrhea, but also vomits, does not want to drink or is running a fever.

#### **Defecation colour**

The colour of your child's defecation may vary significantly. It depends on his age and the nutrition he is getting. For the first few days, it will be very dark, and subsequently it will vary between yellow and green. Discoloured (white or pale yellow) defecation may indicate a disorder. That is why you should regularly check the colour of your child's defecation: if in doubt, contact your doctor.

#### **Sleeping well**

A great part of the first months of a baby's life is spent sleeping and this is necessary. On average, a baby will sleep about 16 hours per day. But there are active children who can get by on 12 hours and sleepy ones who need more than 20 hours. A baby recognises sounds in the house. Most of those he has already heard in the womb. That is the world he knows and trusts and where he feels safe. Before falling asleep, the baby may cry or babble a bit. When he is awake, he likes to look around. Therefore, a bed with bars is better for him than a closed bed (More on this in the section on p 122). Check the colour of your child's defecation from the third week on. If you want to know which colours are normal, go to www.babyzietgeel.nl.

#### Smoke free surroundings

Your child is best off if there is no smoking in the house. Passive smoking is even more dangerous for babies and young children, because their bodies are not strong enough yet to build up resistance against all the harmful ingredients in tobacco. Passive smoking leads to an increased risk of cot death, being short of breath, ear infections and smarting red eyes. Go to www.rokeninfo.nl for more information.

#### **Sleeping position**

The safest sleeping position for a baby is on his back. You do not need to be afraid that he will choke when spitting lightly, because he will automatically turn his head to the side. When lying on his side he can roll over onto his stomach: lying on his back he cannot. Sleeping on the stomach increases the risk of cot death. For more information, go to www.veiligslapen.info.

#### Preventing a preferred position

Some babies prefer to keep their head turned to the right, others to the left and some others like to keep it in the middle. A strong preference for one side or the other may, in the first six months, temporarily slow down your baby's development. The skull, which is still quite soft, may be flattened in the area where it rests most often. This usually passes gradually, but sometimes it does not, or not entirely. This is not serious, although it does not look pretty. Here are three tips to help your child develop symmetrically and to prevent any one position becoming too dominant. If this does not work, consult the Youth Health Service.

#### Tip 1. When he is awake

When your baby is awake and being watched, put him on his tummy at least three times a day. In the first weeks, for instance when you are changing a nappy, do this three to five times for one to five minutes. Increase this to five times 15 minutes or three times 30 minutes per day at the age of three months.

#### Tip 2. Feeding

When holding your baby for feeding, alternate between your right and left arm. Or put him on your legs, straight in front of you.

#### Tip 3. Sleeping

3

Do not let your child sleep on his side or on his tummy, as this increases the risk of cot death. Always put your baby on his back and turn his head to the left and right, alternating frequently.

#### Sleeping in his own bed

To avoid any risk, it is better not to let the baby sleep in bed with you. If one of the parents is a sound sleeper, there is a chance that he or she will turn over onto the baby without noticing. The bedclothes in the parental bed are another potential danger, as the baby may get entangled or overheated, which may lead to cot death. It is better to have the baby in a bed or a cot alongside your own bed. The baby is very near you, so you can watch him closely and feed him easily at night. For more information, go to www.veiligslapen.info.

#### Day and night rhythm

The short sleeping periods immediately after birth gradually change into longer periods of sleeping and being awake. The baby will start to sleep longer at night. The less you react to his first little cry, the better he will learn to sleep. If sleeping does not come automatically, you can darken the room at night and leave the curtains open by day. Try and take your time putting him to bed, undressing and washing him. Most babies adore being massaged gently. They find it very relaxing.

#### Watery eye

Occasionally, a baby's eyes may produce a watery discharge. This is usually caused by a narrow tear duct: tear ducts are not completely open in the first months. They can become infected, as the bacteria cannot yet be fully forced out. You can wash the eye several times a day with a gauze and lukewarm water, wiping gently from the outside of the eye to the inside. Unfortunately, a watery eye does not disappear quickly. If the eye turns red or the baby appears to be in pain, have the eyes checked by your doctor.

#### **Fontanels**

The baby has two soft spots on his head: the small and the large fontanel. These are places where the skull bone has not yet fully grown together. There is nothing wrong with that.

At birth, parts of the skull overlapped slightly to enable the baby to pass through the birth channel. The fontanels will gradually close. The large fontanel will not be fully closed until the second year.

#### The baby sees yellow

Sometimes, a baby's skin and the white part of his eye may turn yellow a few days after birth. This is caused by a substance called bilirubin entering into the baby's blood and skin. Most new-born babies see yellow for a while. The liver breaks down the bilirubin and excretes it. After birth, more bilirubin is formed than the liver can excrete. It is essential that the baby drinks enough so that these breakdown products can leave the body via defecation. During their routine checks, the nurse and the doctor will always check the colour of the baby. The yellow colour will usually disappear within two weeks. Some babies retain their yellow colour for more than three weeks. The cause may be the mother's milk: in very rare cases it may be a liver disease. If a baby stays yellow for more than three weeks, regardless of whether he is being breast-fed or is drinking follow-up milk, or if there is discoloured defecation (white or pale yellow), then you should go to your Youth Health Service doctor to check whether a blood test is needed. See: www.babyzietgeel.nl.

#### 'Cradle cap'

Occasionally, a baby will develop a flaky layer on his head. The flakes appear because they are being generated more quickly than they can be rejected. The mound of flakes is called 'cradle cap'. If there is a lot of it, rub some vaseline or baby oil on the area before the baby goes to sleep and leave it there overnight. Cradle cap is harmless and will disappear after a while.

#### Lip sores (fever blisters)

In the first month, a lip sore can be dangerous. A new-born baby risks a serious herpes infection. If you have such an infection, make sure not to pass it on to your baby.

Kissing and cuddling is only allowed after the skin has healed.

This applies to all visitors. A maternity nurse will follow a strict protocol and wear a mouth cap.

#### Nappy rash

If your baby has a nappy rash, this can be painful. Some children are more sensitive to it than others. As long as he wears nappies, the skin may become irritated or even damaged by urine and faeces. It helps if you apply a thin layer of baby zinc ointment to the baby's clean, dry buttocks. Nappy rash can be very persistent. Consult the Youth Health Service for advice. Or see Thrush on page 28.

#### Genitals

A boy's foreskin is usually stuck to the penis. Do not try to roll it back and only clean the places you can reach. Before the age of 7, the foreskin will normally come unstuck. With girls, the labia may be partially stuck together. Do not try to do anything about this either. They will gradually come apart.

Male circumcision in the Netherlands is discouraged, as it increases the risk of infection and complications. Female circumcision, in any form, is legally forbidden in the Netherlands and punishable by law.

#### What should he wear?

When dressing your baby, you are best off by looking at what you are wearing yourself. The baby will keep warm with the same number of clothes as you are wearing. When you take him outside, have him wear a cap or hat because a lot of body heat is lost through the head. If your baby's hair is wet from sweat, he is too warm and can develop red spots and even a 'heat rash', small red bumps.



Don't make your child wear too many clothes. Too warm is not good!

#### In the sun?

A baby's skin is very delicate and sensitive to sunburn. This may even cause real burns. Children who have experienced sunburn at an early age are more at risk of developing skin cancer later in life. A young child should be kept in the shade as much as possible. If you can, put him under a sunshade. A pram, even with the hood up, gets too hot far too quickly. A thin T-shirt and a sun hat will offer protection, but be careful with the uncovered arms and neck. It is best to apply a factor 30 sunscreen lotion every 2 hours. That offers better protection than one single dose of the highest factor sunscreen. A child can get burned even in the shade. So whenever the sun is out, always use a suntan lotion.

#### In the playpen

If you start using a playpen, put it in a quiet corner. It is a safe place to put the baby down if you need to have your hands free. And the playpen is above all the baby's own place, where he gets the opportunity to play by himself. Pets and other children do not have easy access to him. Do not pack the box with toys because it becomes hard for a child to choose, which is unsettling. It is better to put something new from your toy supply in the pen once every few days. That will stimulate him to investigate and undertake new activities.

Do not leave your child alone with a pet. No matter how sweet and cuddly the pet is.



#### Your baby is now three months old

### He has learnt so much!

There is room on page 43 to make a note of the first time your child laughed, or held your finger, or lifted his head, etcetera.

Laughing and recognising: a milestone! Somewhere in the first three months (usually around week 5 or 6) all of a sudden there will be a big first smile. The baby's laugh is above all a reaction to what is being said to him. He will laugh when you look at him with a happy face. He will imitate you more and more. Toys may be fun, but in the first three months real people are a much better source of fun.

**Looking:** at the age of three months your baby's (long and short) vision is much better than at birth. He has discovered his hands and will keep looking at them, sometimes in utmost amazement. As soon as he opens his eyes, the baby will start to peer around and try to discover where all the sounds are coming from. He will turn his head in that direction. If you talk to the baby and sing to him or laugh, he will fix his gaze on your face. By the time he is three months old he will recognise his parents, not just by their voices and smell, but also by their faces.

**Hearing:** Babies love to listen to jingling toys, songs, rhymes and music. But you are the real favourite. He will recognise your voice as soon as you start talking to him, make funny noises or sing songs. As small as he is, he can listen very attentively. He understands perfectly well that those words are meant especially for him and will try to imitate you right away. Did you know that this is one of the first speech exercises?

When you point out objects and events near to him, your baby will learn a lot, even if he cannot say those words himself yet. He is thrilled when you give him words to help him on his way in the world: "Mummy is putting on her coat now. What a lovely rattle you have! Now I am going to wash your feet. Look who's here, it's daddy!" Everything is new, and the world will become more trusted with every new name.

#### **Grabbing and holding**

The baby can hold on to your finger for a while. If he gets hold of your hair, your glasses, or something else, he will pull – with some force! He will stick everything into his mouth. The mouth is very sensitive and ideal for exploring the world. As the months go by, he will learn to use his eyes and hands and will use his mouth less.

#### Movement

The baby can lift his head. When, during the day, the child is on his tummy, he will have to lift his head to be able to see. In that way, he exercises neck and back muscles for the next development step. To be safe, always stay near the baby when he is exercising on his stomach.

#### Making contact

From birth, babies will try different methods to communicate their needs. See for yourself: he moves his arms, legs, head, tries to direct his eyes and pouts his lips. From day one, babies use facial expressions and body positions to express themselves. If parents study their baby's body language, they will understand better what he is trying to communicate. Your child is a fast learner!

He also starts to make his own sounds and to play with his voice. This is his way of establishing contact with you, but he is also exercising his lips, tongue and mouth muscles. By laughing and chattering he shows that he is happy and contented, or that he wants a hug from you. If you react, he will understand that this is another way of catching your attention. If he looks away, he is probably getting tired.

#### Playing and hugging

Your child is thrilled when you make faces at him and make jokes. He senses your humour and good spirits. Your child will learn a lot from playing and hugging together. And it strengthens the bond between you and your child. Hiding a rag or a toy animal is a fun little game. You pull it out of sight, and let it appear again. Fun! Then you may see him 'thinking'. He wants to imitate you and react. If you give him time, he will realise you are listening to him and trying to understand him. This is a great feeling for a baby. Being held close and caressed gives a baby confidence: "They love me!" He also develops a sense of touch and gets to know his own body. All this makes him feel relaxed and comfortable.

#### Saying goodbye

Many parents find it difficult to leave their child with a babysitter or at the day care centre. It is even more difficult if the child starts crying just when you want to say goodbye. Do not be tempted to leave unnoticed. It is important for a child to learn that his mother or father may leave, but will also return. So give a short and clear goodbye kiss and tell him when you will be back. A last wave through the window and that's it. When you talk to the babysitter or group leader afterwards, you will no doubt hear that the tears dried up quickly.

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## Pages for your own baby

0 to 3 months: What can	(name of your baby) do?
	(date)
Lifting his head	on
First smile/laugh at	on
Makes noises to	on
Makes holses to	011
Looks at his own hands	on
Holds on tightly to	on

Download the GroeiApp or go to www.groeigids.nl to make a lasting record of your child's development, with all his growth curves, vaccinations, milestones, photographs etcetera.





## Your baby is growing fast: 4 months to 1 year

#### What does your baby eat?

Before he reaches the age of 6 months, your baby does not really need any supplement to breast or bottle-feeding, which contains everything he needs. From the age of 4 months your child may begin to feel the need for some extra food and by the time he reaches the age of 6 months, supplementary feeding is necessary. Some children will hungrily try to get hold of the spoon you are putting in your mouth. The transition to solid food (between 4 and 6 months) is gradual and will vary per child. Take your time and make it fun.

#### Getting used to a spoon

A major upheaval for the baby! Instead of sucking on a soft nipple or teat, he is now served solid food. Practice is needed and, certainly in the beginning, there will be lot of spilling and sneezing. The baby will like the idea of playing with the spoon. After all, he explores all toys with his mouth. A soft, round spoon with rounded sides will be easier for him than one made of metal.

By putting the spoon at the front of his mouth and on his lower lip, you allow the baby to slurp up the mashed fruit or vegetables. The motion resembles sucking and helps the development of the upper lip. To teach him to bite, you can move the spoon back a bit and push the tongue down gently and slowly. What is also helpful is looking your child in the eye and opening your mouth yourself.



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#### Supplementary feeding

The first supplementary food your child gets is 'extra's', not yet replacing breast- or bottle-feeding. The Youth Health Service will help you decide the right time of the day to start. They usually recommend a small quantity of mashed fruit or vegetables before a regular feeding. Enjoy the different faces your child will pull when tasting so many different flavours. Suitable vegetables: cauliflower, broccoli, carrots, green beans, string beans, pumpkins, courgettes (zucchini) and chicory. What babies like most is soft fruit, without an acidic or sour taste: bananas, melons, peaches or mangos. Try all these out one by one. You do not have to liquidise the food entirely because you should help your child to learn to bite. You can also offer your child small pieces of boiled vegetable, which he can pick up and put into his mouth himself. Increase the quantity slowly. Gradually, the milk feedings should decrease.

Don't give your child honey before his first birthday. Honey may be infected with bacteria that can make your child very sick. These bacteria are harmless past the age of 1.



#### **Baby cereal**

From the age of 4 to 6 months, you may also introduce baby cereals or porridge to solidify the food. Shops offer several ready-made cereal mixes. If you have a choice, go for the whole grain variety without sugar additives. Add warm follow-up formula-milk or pumped breast milk, stir and serve.

Until the age of one, do not give your child cereal with 'normal' milk: cow's milk contains too much protein and salt and not enough iron. Always start with a baby cereal based on rice flour and then gradually move on to other varieties. Baby cereals should be given with a spoon. Do not be tempted by the never-ending stream of new baby food products available in the shops. They contain a multitude of added flavours, sugars and vitamins. Babies do not need all these products.

#### Eating bread

Many children enjoy sucking on a bread crust: it is a good introduction to bread. Then it is time for small pieces of bread. It is best to start with light brown bread, gradually moving up to whole wheat bread. If you give your child a slice of bread, apply a thin layer of margarine. Cut the bread into little pieces.

You can add a spread, but you don't have to. Start with an easy spread, such as jam, mashed fruit, or occasionally cheese or liver spread. Slices of (lean) cheese and cold meats are allowed too.

#### A hot meal

The next milestone is reached when your baby joins you for a meal. Cook some vegetables in a little water until they are well done. If that goes well, you can prepare a small hot meal with some potatoes, rice or noodles and vegetables. Then you can add some meat (or a meat substitute), chicken, fish or eggs. You can use jars of ready-made food or cook yourself. Both are good, but fresh food is more varied. You can cook or stew meat, fish or chicken. Eggs must be hard- boiled.

Mash the food less and less. Prepare pieces of well-cooked vegetables for your child. He is inquisitive and will pick them up. Observing others is a good way for children to learn about eating and sitting at the table. Sitting at the table and sharing a meal is an interesting and fun experience. This is true of all meals.

Baby food should not contain salt or spicy ingredients, even if adults prefer that. Add a bit of margarine or some oil to make the meal creamy. This is important because young children need a bit more fat. It is best



to use soft margarine from a tub or a bottle, as this contains the most unsaturated fats. After a while, there may be room for a dessert. Yoghurt or fruit is very suitable; try blending yoghurt and a few spoonfuls of mashed fruit.

#### Good?

Tasting has to be learned and one must get used to tastes. Babies know only one taste: milk. So it is logical that they will only gradually accept new tastes. The only way that will be successful is by trying over and over again. Try giving the same taste for a few days in a row. That way the baby will get used to it quickly. Forcing down food will only increase the likelihood of rejection. We advise offering one or two small bites each time, without tension, disappointment or frustration. However small he is, your baby will recognise your mood without fail.

Pay attention to your child when he tastes new things or when he is trying to eat from the spoon. Stroke his head, laugh at him and tell him what he is doing well "You're such a good eater".

#### A good diet

The recommended daily diet for children between the ages of 6 months and 1 year is:

#### Children aged 4 – 6 months

• From the age of 4 months, your child may start practicing with solid food in addition to full milk feeding.

#### Children aged 6 to 7 months

- breast- or formula, as much as needed. If needed: one portion of cereals with follow-up milk
- fresh fruit, mashed
- crusts or pieces of light brown bread, with soft margarine
- 1 hot meal: vegetables with potatoes, pasta or rice.

#### Children aged 8 to 9 months

From the age of 8 months, supplementary feeding will gradually replace milk

- Breast- or bottle feeding, as much as needed. If needed, porridge (wheat or cereal based) with follow-up milk once a day. Serve the cereal from a plate, not from a bottle. Instead of porridge, you can also give bread
- light brown bread, with a bit of margarine and spread,
- mashed fresh fruit,
- a hot meal, with gradual additions of meat (meat substitute), chicken, fish or egg. Spoon food can be progressively less mashed.
- some low-fat yoghurt.

#### Children from the age of 10 months

- Breast- or bottle feeding, about twice a day
- 2 bread meals (or 1 porridge meal and 1 bread meal)
- (for snacks) mashed fruit, with a cracker or a rice wafer
- a hot meal (a bit more every time)
- water or lukewarm tea as a snack. Do not worry if your child drinks only a little, it means he is simply not thirsty.

For more menu ideas and information about food, go to www.voedingscentrum.nl

#### Not yet allowed before the age of 1:

- More than 1 or 2 sandwiches with sausage (spread) per week (because of Vitamin A)
- More than 1 or 2 sandwiches with cheese spread per week (because of the salt)
- Products or dishes containing raw meat, raw eggs, raw fish or raw shellfish
- Ready-made meat substitutes (because of the salt)
- Salt
- Honey
- Normal milk or yoghurt, when completely replacing breastfeeding or follow-up milk





#### Mouth and first teeth

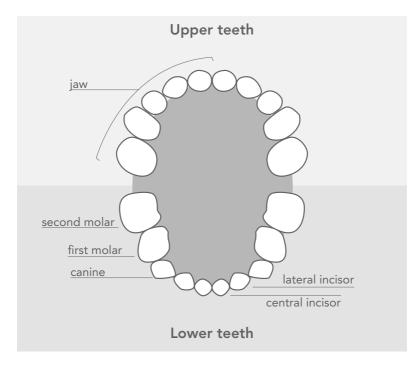
From the moment of birth, a baby will use his mouth to suck and drink. After three months, he will start using it to feel. He will use it to touch anything he can lay his hands on. Great to see! But be careful: there is the risk of choking if he gets hold of small objects and puts them into his mouth. On average, the first teeth will appear between 6 months and one year. Usually the lower front incisors appear first. Swollen gums announce their arrival. Many babies will feel the need to gnaw, for instance on a teether or a solid bread crust. They will often have more saliva than usual. On page 52 or in the GroeiApp, you can make a note of when teeth and molars first appear.

Is your baby starting to dribble all of a sudden? It could be an indication that the salivary glands are starting to develop. It is not necessarily a sign of teething. It just shows that your child still has to learn to swallow his saliva.



#### Teeth and molars

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First tooth on

First molar on \_\_\_\_\_

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#### **Cleaning the teeth**

Teeth must be taken care of, from the moment they appear. Bacteria will stick to them and to the surrounding gums. This may cause bleeding. Clean the teeth as soon as the first tooth has appeared. Do this at least once a day, preferably in the evening before your child goes to bed. Cleaning teeth is not an easy job with a child. Let him get used to the toothbrush in a playful way by letting him play with it. Do not stop cleaning his teeth because he will need time to get used to the routine. From the start, use children's toothpaste with fluoride and without a special flavour. The amount of toothpaste on the brush does not have to be more than pea-sized. The fluoride level is based on the fact that children swallow part of the toothpaste. It is best to use a small toothbrush; use it to gently rub the gums where no teeth have appeared yet.

#### Drinking from a cup

From the age of 7 months, the baby can learn to drink from a normal, plastic cup without a spout. Start as soon as possible. Water and tea (without sugar) are suitable drinks. Teeth may start to point outward as a result of prolonged use of bottles and cups with spouts. If you do not want the messiness, using a sealable cup with a straw may be a good alternative. It's best not to give a bottle at all at night, in bed, as it may cause cavities, especially in the upper front teeth. Even taking a bottle of breast-milk to bed will lead to cavities.

#### Breathing through the nose

Breathing through the nose helps to prevent colds and diseases. Viruses and bacteria enter



the body less easily through the nose than through the mouth. A child breathing primarily through the mouth may develop a lisp, catch a cold or an ear infection more easily. If the baby has a cold and his nose is blocked, you can use a nasal spray containing a physiological salt solution. If he has got used to breathing through the mouth, you can gently press his lips together or lift his chin when he is relaxed. If your child has been unable to breathe through the nose for some time and his nose remains blocked while eating and drinking, it is advisable to check with your doctor.

#### Moving and turning

Once he has found his own hands, a child will start to develop his fine motor skills. He finds his fingers fit into holes of all sizes. And with two fingers he can get hold of all kinds of objects. The next trick is rolling over. All of a sudden he finds out how he can roll over from his back. Encourage him, tell him how well he is doing, but make sure he does not fall. Give him room to move, for instance on a rug on the floor, or in the pen. In a rocking chair or a car seat, your child is restricted in his freedom to move.



Nasal spray for babies is available from the pharmacy.

#### Games

Playing games with your baby is simple, as well as essential for his development. Babies love singing, especially if it involves all kinds of exciting (to him) sounds and movements. There are lots of books and CD's with simple lullabies and nursery rhymes.

Games you invent yourself may be even more fun. Babies love to hold

a soft cuddly teddy bear. Make sure no parts of the cuddly toy can come loose. You can rub it gently across his cheeks while you explain to him what the cuddly bear does. At this age, babies like firm toys too: a rattle, wooden toys. They want to wave them around, suck on them and make a noise with them. Babies love tearing up old magazines.

#### Crawling, sitting, standing

At first, babies are flat on their tummy. Then, they will learn to crawl and sit. Once your child discovers that he can pull up his legs under his tummy and that this is the way to get up, he will try to sit. Crawling on his knees is a next step he will learn quickly. From then on, many children will develop at an amazing speed. Others slide along the floor with their stomach or go backwards first. To be able to sit up, the back and neck muscles must be strong enough and your child has to be able to keep his balance. To be able to sit up by himself, the child needs strong arm and back muscles. Well done! Keep checking on his progress and lower the bottom of his bed and playpen on time. Otherwise, there is a risk that he may fall out. Do not put the baby in a bouncer or a walker. These are very unsafe and do not contribute to the development of motor skills.

#### Safe and stimulating surroundings

Crawling babies can find a lot to get their hands on. So it's time to move potentially dangerous objects, or objects you do not want damaged, out of his reach. This will often save you from having to say 'no', from watching over him and sometimes even from quarrelling. It will allow your child to experiment and learn in a quiet and pleasant way. Of course you want to teach your child that certain things are not allowed: pulling the cat's tail or grabbing the flowers. At this age, he will have difficulty understanding if you try to forbid certain behaviour. Distracting him or offering him something else may be effective at this age. If your child is about to tear up the newspaper, you can distract him by



pointing at something else, for instance: "See what a pretty ball I have here". As your baby grows older, you can start teaching him to listen. And he will begin to understand you better.

#### Making contact and shyness

Your child is discovering more ways of making contact all the time. Successful endeavours are repeated over and over again. The first time he will accidentally throw a toy out of the playpen. As soon as he notices that his parents pick it up and return it to him, a new game has been born. He carefully throws the toy out of the playpen and, sure thing, father does it again. That's a good laugh.

You can pick up the toy yourself and return it to him. It stimulates his confidence when he notices that you keep repeating the same game with him. Babies between the ages of 6 and 12 months may look with some distrust at somebody they do not see every day. Many children will go through a period of shyness. When you leave, he will be nervous and perhaps he will cry. Too bad if, around this time, he does not want to sit on his grandmother's or grandfather's lap. Do not force him! After a while the shyness will disappear automatically.

#### Paying attention to your child

Your child enjoys receiving attention. It makes him feel worthwhile and reassures him that you are there for him. It makes him feel safe. Attention is more about shorter moments of being together rather than about major activities. When your child seeks your attention by trying to show or tell you something, it is best to interrupt your own activities. Give your child the attention he is asking for. In most cases, that will be enough to allow you to resume your activities. Children will stop pestering you for attention. As your child gets older, you can ask him to wait a while. That will be all the more possible if the child has learnt at an early age that you are there for him.

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#### You can help him with games

Around the age of 7 months babies develop an interest in the 'disappearing game'. You hide something under a rug or a cushion and the baby watches you as you get it out again. After a few times he will pull the rug off himself. Or, you leave the room and a few seconds later you put your head around the door again: "Here I am!" See if he understands where you are if you hold something in front of your face or put a rag over your head, or his head. Will he pull it off? Peekaboo! The baby is learning that something continues to exist even if he does not see it.



If you have had enough of the game, indicate this clearly and always do it with the same words and in the same way.

#### Speech development

Every baby has his own way of learning to talk. Sometimes the first word is hidden in a babble: 'bababa ball!' At first, the baby will use his own gestures and facial expressions to clarify what he means. From the age of 9 months on, a baby can use conscious movement to communicate. He can use gestures to explain what he wants even before he can actually talk. Would you like to know more? Go to www.babygebaren. com (also in English). Being understood is very important for the healthy psychological development of the child. The way parents speak to a baby influences the way in which their child will use language. Intonation is important: babies love being spoken to intimately in a sympathetic voice. He becomes more active when you speak to him in a shrill voice and you will console and calm him by speaking to him in a low voice. See how happy he is when you react to his words and sounds, when you answer him. Language allows you to improve your contact with your baby. He discovers how he can attract your attention. Looking at books together helps to start talking. You look at pictures and explain what is to be seen there. Tell the Child Health Care Centre when your baby has stopped babbling, or has stopped saying a word he used to say. More information on www.kindertaal.nl and www.groeigids/spraak- en taalontwikkeling bij baby's.

#### **Talking together**

Suddenly, you will understand what he says: "wasda?" or "da-dada". 'Wasda' means he wants to know, and 'da-da' is what he wants to have. Around the age of 1 a child may utter a first word. You should always react to his utterances. Mealtimes are a good opportunity. Do not use baby words yourself, but speak as you would normally do. If he says: "Gon", you will say "Yes, daddy has gone away on his bike". That way, he will keep learning new words. It is important that your child notices that you understand him and that you are happy to be able to use speech to be in contact with him.

#### Sleeping and waking up: going to sleep

Now that your baby is growing up, he may not want to go to sleep immediately in the evening. He can't say goodbye to the day. It helps if he can calm down just before going to bed. Don't be in a rush when undressing and washing the baby. Follow the same bedtime ritual every evening. For instance, a song, reading a book, saying goodnight to the cuddly toys, a kiss from his brothers or sisters, playing the music box. You cannot force him to go to sleep, but you can make it clear that this is what is expected now. You can do this by leaving after the goodnight hug. He may protest, but do not get him out of bed again right away. Offer consolation, say goodbye again and leave the room. Of course he can play in bed, babble or sing until he falls asleep. If your child gets really upset and continues to feel unhappy, you could try a different bedtime ritual. If the problem continues, go to the Youth Health Service or a Parenting Support Centre ('opvoedsteunpunt'), if there is one near you.

#### (Scary) dreams

Compared to adults, babies dream a lot. The day's experiences are processed during sleep. Sometimes a child will wake up crying and in panic because of a bad dream. That can be very distressing. Try to console him in his bed, without turning on the light. If your child is very upset, hold him for a while, but stay in his own room or near his bed. Tell your baby what you think is the matter. When your baby has calmed down, put him back to bed, give him a cuddly toy and tell him it is time to go back to sleep. If you think your child is thirsty, give him something to drink. Do not get your baby out of bed at night for every small matter. It helps you to prevent your child getting into a habit of 'asking' to be taken out of bed at night.

#### Your baby between the ages of 4 months and 1 year

### He has learned a lot!

- Your child is attentive to small parts and details and looks for hidden objects or faces.
- He just loves to play Peekaboo.
- He recognises objects and faces and loves to touch everything with his mouth.
- He discovers what he can do with his hands and plays with his feet.
- He may even say a few words.

On the next page you can write down when he did something for the first time.

Download the GroeiApp or go to www.groeigids.nl to make a lasting record of your child's development, with all his growth curves, vaccinations, milestones, photographs etcetera.





AGES 0 - 4

# Pages for your own baby

4 months to 1 year: See what	has learned to do!
Putting a toy in his mouth	on
Making sounds deliberately	on
Consciously seeking contact	on
Grabbing the hand of	on
Reacting to his own name	on
Rolling over on his tummy	on
Sitting up	on
Using the thumb and index finger to hold	
	on

Drinking from a cup	on
Singing and talking 'along' with	
	on
Sliding along the floor on his stomach	on
Eating bread	on
Crawling	on
Pulling himself up to stand	on
Waving goodbye	on
Saying Mummy or Daddy	on

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## A person in his own right: 1 to 2½ years

#### To grow: eat well, and move a lot

On his first birthday, your child will be three times as heavy as at birth. He has grown quickly. After this first spurt he will gradually start to eat less. No need to worry, it is normal. From the age of 1 and especially around the age of 2 your child will show that he has a will of his own. He can say "No!" As a parent, you can get cross and you may well be taken aback by this crossness. You need to able to handle not only your child's behaviour, but also your own feelings. At the end of this period, he will start to call himself 'I". Increasingly, he is aware of being an independent person, he is developing his self-consciousness. He can do things without mummy or daddy. Not always easy, but a very important development!

From the age of 1 on you can often put your child's name down for the nursery school or pre-school. More information on this subject in 'The toddler period: ages  $2\frac{1}{2}$  to 4'.



#### What sort of food is needed at this age?

Some days, or weeks, toddlers may eat more than other days or weeks. That is not a problem. They usually eat enough to grow. Children have a natural sense of how much they need to eat and a child is perfectly capable of knowing when he has had enough. Children will not starve themselves. Occasionally, their weight may be ahead, or behind, the average. This difference usually disappears eventually.

#### Breakfast

Whole wheat bread is the healthiest choice. It contains lots of fibres, needed for efficient digestion and bowel movement. Spread some soft margarine onto the bread and put on something savoury or sweet. You can vary the bread with whole-wheat crackers or breakfast cereals without sugar additives. For instance, porridge for children aged 12 months or more, oatmeal or muesli.



Having breakfast together gives children a good start to the day.

#### Lunch

Bread or a small hot meal.

#### Dinner

Variation is important, for instance with vegetables, potatoes, brown rice and whole grain noodles. Make sure too vary between different meats, fish and meat substitutes. On a daily basis, your child's plate should contain (approximately):

- 1 to 2 tablespoonfuls of vegetables (50-100 grams)
- 1 to 2 tablespoonfuls of potatoes, couscous, whole grain noodles, brown rice or legumes, such as peas, beans, lentils (50- 100 grams)
- a piece of meat, fish or meat substitute (50 60 grams, including sandwich meat)
- 1 spoonful of the right sort of unsaturated fat, such as baking or frying fat from a squeeze bottle, oil or a small quantity of soft margarine from a tub

Try eating together as a family as much as possible. Having fun at the table will make eating more fun.

#### Snacks

Good, non-fat snacks are: fruit, rice wafers, (soup) crackers, a box of raisins, a piece of cucumber, tomato, red pepper or carrot. To go with it, you can give him water, which is easy, good and cheap and does not contain any calories. If you give snacks at a regular moment during the day, not more than 4 times a day, and stick to it, your child will learn that it does not help to nag at other times. Sugary drinks are counted as snacks.

#### Vegetables

Some toddlers have great trouble eating vegetables. They do not like them and the veggies feel 'funny' in their mouth. They have to grow accustomed to vegetables. So keep offering them to your child. Do not force him to eat them, that will not work. But do not give up. It may take up to 10 or 20 attempts before a new vegetable is accepted, even if it is only a minimal quantity, served on a teaspoon. If you as a parent give the right example, your child will eventually follow. Patience will be rewarded.

#### Fats

Small children need some fat, as a source of energy. Always spread a thin layer of tub margarine on the bread, even when you are going to be spreading something else afterwards. Use some liquid margarine or oil to prepare a hot mail.

#### Milk products

At the age of 1, some babies are still enjoying the benefits of breastfeeding. If your baby is drinking follow-up milk, you can gradually move on to skimmed or low-fat milk (300 ml per day is sufficient).

#### Drinking

If your child is thirsty, you can give him water or lukewarm, sugarless tea. Both are excellent thirst quenchers. A small mug of fruit juice, lemonade, concentrated fruit juice or yoghurt drinks contains an



average of 3 lumps of sugar. This means they should be seen as snacks. They may reduce your child's appetite for the healthy main meal. You can now practice with a mug, possibly even with a straw. If the drink is sweet, try to make your child drink it in one go. This is better than sip by sip, because of the effect on the teeth.

#### Going off the bottle and the dummy

Using a dummy (pacifier) may impair the swallowing function as well as being bad for the development of the muscles round the mouth, which in turn will have a negative impact on speech (development), growth of the jaw bone, the position of the teeth and overall oral health. For that reason, it is wise to end using the bottle and dummy from around the age of 1. Start by reducing the use of the dummy by day, by giving the dummy less often, and for shorter periods. As soon as the dummy is no longer used by day, you can start to reduce its nighttime use.

#### Vitamin D

Keep up the daily 10 gram ration of Vitamin D, as tablets or drops. If your child has a dark or coloured skin, continue giving him the Vitamin D after his fourth birthday.

#### **Nutrition centre**

The Nutrition Centre's website (www.voedingscentrum.nl, also in English) will give you several menu suggestions for different ages. It will show you images of toddler meals including healthy product choices.

#### Candy

It is so tempting to console your child with a piece of candy. But if you are not careful, that will soon be a habit, which may be difficult to kick. Your child will be just as happy if you play, romp, dance or play hide and seek with him. At this age, you can still easily distract his attention. Eating candy is not good for your child: it causes cavities and leads to obesity.

#### **Eating tips**

- Announce that dinner is ready, so your child knows he cannot go on playing. He may even help you lay the table
- Make sure your child is not too tired by the time you are going to have dinner.
- Give your child the food that is on the table and nothing else. If he does not want to eat, do not force him. Be happy with what he does eat and praise him for it. Pay as little attention as possible to the fact that he does not want to eat, however difficult that may be. Give him his dessert, but do not make him feel less hungry by giving him more of what he does like.
- Switch the TV off during dinner: it only distracts
- Create a family atmosphere at the dinner table, so that eating becomes fun. Children like to imitate their parents, so make sure you give the right example by having fun at dinner
- Use a small(er) plate. Do not put too much on it. Your child may be able to serve himself.
- Agree on the rules with your partner. Think about how much time you want to spend at table with your child. A toddler will notice immediately if one of you is you more lenient than the other and he will make use of it.

### **Physical development**

#### Walking, climbing and playing outdoors

Once your child has mastered the art of standing up and sitting down, it will not be long before he starts taking steps holding on to the edge of the chair or the table, or maybe with the help of his push cart. How 'big' he looks now! The next step requires courage. If he dares to let go of what he is holding on to, another milestone will have been reached: your child is walking independently. A bit more practice and you will not be able to keep up with him. After the first uncertain steps, he will guickly take to running. Amazing what speed and dexterity he is showing. That is natural, because he wants to explore everything. He will adore games that involve having to walk somewhere, fetching something, pushing a cart, a pram or a tricycle, a walk to the ducks in the park, helping to push the supermarket cart or his own stroller. Occasionally, children will walk on their toes or their legs will be in an Oor X-position. In general, this will disappear by the time they are 6 years old. For obese children, X-legs may be permanent. Playing outdoors is very good for developing the child's motoric skills. Now he can learn to climb and will start to play with other children. Keep him in your sight so that he does not undertake any dangerous activities.

#### More exercise

Children may become overweight if they do not get enough exercise. It is good for a young child to get used to walking at an early age. Do not always put him in the stroller, but go shopping together on foot. Let him climb the stairs while you are right behind him, so as to avoid accidents. Almost all children have a natural desire for walking and running. Sometimes, parents are too nervous. As regards traffic, they are right. You should therefore take your child(ren) to places where it is safe to run, play, dance, jump, climb, crawl and romp around.

#### **Buying shoes**

A child needs shoes from the moment he goes outside. Before that time, it is better for his development if he goes barefooted, or wears anti-skid socks, when inside. On grass or on sand he can go on bare feet.

Good shoes come in different sizes, not just for length, but also for width (four or five different widths). The instep is another important criterion for choosing the right shoes. Have your child's feet measured every three months. Children's feet are very flexible, so your child will not immediately let you know that his shoes are too small. But he can grow three sizes per year. Feet need room to develop well.

#### **Playing and toys**

A toddler plays all day long. He can stay concentrated on his games for longer periods. Playing with other children is still a bit of a problem, just as sharing toys is. That will only work when he gets to the age of 2. But playing near other children is great fun. That is the start of playing together.

Young toddlers like big toys: a push car, a dump cart they can shovel sand into, a doll pram, a wheelbarrow. Outside in the sand pit: buckets and spades, a watering can. Messing about with water and sand is very important for the development of their sense of touch, feeling and creativity. Slightly older children like playing with plastic tableware. They enjoy imitating you! They do not need expensive toys to do that. A bowl and wooden spoons are just as good as a complete kitchen. Banging the drums or a xylophone is another interesting activity. They enjoy all things that make a noise. From the age of 2 on, you can see fantasy games developing. A few chairs are transformed into a train. If, at that moment, you join the game and talk to your child, he will love it and at the same time you will greatly enhance his speech development.

#### Other children

Playing with other children teaches a child to behave socially: giving and taking, this is yours and this is mine.

Because they cannot yet express themselves in words if they are disappointed or angry, toddlers will often express themselves by hitting, kicking, biting or squeezing. No parent is happy when his child does this. Nevertheless, it is not good to 'retaliate' by hitting back, to make the child feel what it is like to be hit. A toddler would draw the conclusion that such behaviour is allowed if you are bigger or stronger. It is better to tell him to stop physical violence and to explain that it hurts. If the child does not stop, it is best to take him aside so that he will understand that it is not allowed.



If you see children playing, sharing toys or working together, make them a compliment. Talk to your children and ask them what they are doing.

#### Media savvy?

Children's programmes on TV, videos on YouTube, playing with the tablet: media are fun, as well as educational. But make sure you only switch on the TV at regular times and to allow the use of the tablet only when agreed. For very young children, watching a screen for half an hour a day is enough. Children play better when the TV is not constantly on in the background or the tablet is not permanently available. Watching TV and playing tablet games together is fun and strengthens the bond with your child. And you can explain what is going on. But how can you tell which apps are educational? And how long should your child be allowed to watch TV? The digital world is changing at lightning speed. It may help you to pay a regular visit

to sites that assess and rate apps. You can try www.digidreumes.nl. Always try out the apps yourself first and stay with your child when he is trying the app for the first time. Just a few fun apps is more than enough for your child. Protect your tablet with a pin code, so that only you can start up the tablet. Or set up your child's own user account, or a separate folder with his apps. Use an Applock, with a password, to protect your own apps.

There are many more tips like this for safe use tablet use by children. Find some of them on www.digidreumes.nl/nl/site/kindvriendelijkeinstellingen/117.

#### Setting the right example

Of course it is important to give the right example. So do not check your Whatsapp when you and the family are having dinner. And don't answer the phone when it keeps calling your attention just when you are playing with your child.

What could be interesting is to show your child how to handle the media in a fun way. For instance by putting together a digital booklet, using the GrowthGuide app. Make selfies of you together, laughing, having fun, pulling faces: print them and hang them on the wall.

#### More and more teeth and molars

From the age of 2 on, we advise you to take your child for a check-up at the dentist every six months. At the age of 2½, his milk teeth are complete with 20 teeth and molars. Once your child starts to eat more and has more teeth and molars, cleaning should be done twice a day: after breakfast and before going to bed in the evening. A toddler is too young to know how to do this well. We advise you to do a follow-up session, after he has done it himself, up to the age of 10. Go to groterworden.nl for a video on cleaning the teeth. Do not give him any more food or drink after the evening cleaning session, only cold water.





#### **Head lice**

Head lice can affect anyone, even a baby. Lice do not jump from person to person: they crawl across. They like clean hair and a clean skin. Lice may cross over from one child to another via the hair. Nobody can prevent an infection all the time. Regular lice checks are advisable, particularly for children who go to day care centres and come in frequent contact with other children.

Lice prick the scalp to suck up blood and that causes an itchy irritation. After a couple of days, the female louse will lay eggs (nits) that she attaches to the hair. Nits are not easily visible, but if you look carefully you will see them. They come out of the egg after 7 to 10 days. The recommended treatment consists of combing out the hair with a nit comb for as long 14 days, because that is how long it takes for the last nit to turn into a louse. If the infection is serious, there are head lotions to wash the hair. Mothers giving breast-feeding are advised to check the lotion with the Youth Health Service. Not every lotion is safe for young children. Do not forget to check yourself and other members of the family, to comb if necessary and to (vacuum) clean your house.

Go to www.groeigids.nl for a video on head lice and how to treat it.

If your child has head lice, do not keep it a secret. If your child has it, other children in his vicinity are sure to have it too. They will all need to be treated, or you'll never get rid of it.

#### **Emotional development**

#### That's me!

A toddler will get to know himself better all the time and become more conscious of who he is. For instance, you will notice that he no longer reaches out to his mirror image. He is no longer seeing something strange there: it is his own head.

#### Importance of language

Not only do children grow very quickly, they are learning social skills just as fast. Using language is an increasingly important part of those skills. The more you talk to him in a simple way about the things that happen in normal daily life, the quicker he will understand: putting his coat on, eating bread, going outside. Reading to him as he sits on your lap and looks at a picture book, or singing songs together, is first of all intimate and cosy. An added benefit is that your child learns and remembers a lot. The library has plenty of books that can be read aloud. Make sure to read the Theme chapter on speaking and language, on page 116.

#### Afraid

For quite a long time, your child will continue to cling to you when saying goodbye. He feels separation anxiety, realising how important you are to him and not wanting to lose you! Usually, the grief disappears quickly once you have left. Just watch, without him noticing, how happily he will be playing at the day care centre after only a few minutes, or even a few seconds.

#### Learning to listen

Repetition is important when learning to listen. If your child is doing something that is not allowed, make it clear to him what he should stop:



"Don't pull the cat's tail, that hurts". Give him an alternative. Tell him what he is allowed to do and show him how. "Look, this is how you can stroke the cat". If you keep correcting your child in this way you will see, at a certain moment, that your child is beginning to understand guite clearly what is expected of him. He sticks out his hand in the direction of the cat's tail while looking at you to see if you will forbid it again. Not to tease you, but to check whether he has correctly understood your instructions and whether they still apply. Some rules only apply temporarily and others are permanent, 'for always'. Your child finds out the difference by making his behaviour pose the guestion. Sometimes your child will correct himself by imitating you and shaking his head or saying 'No', while doing something all the same. He knows it is not allowed, but he cannot restrain himself. A tap on the fingers is not really necessary. Stay calm and repeat what is allowed and what is not. That way, your child will learn how far you are prepared to let him go. If he listens to you, pay him a compliment or reward him with a cuddle or a caress.

#### A new brother or sister

The arrival of a new baby changes your toddler's world. He is no longer the youngest, which is something he must get used to. Most children like the new baby, but are angry with mother. She is primarily occupied with the newcomer and less available for him. Let your older child go his own way and do not force him to 'help' with the baby. He may if he wants to, but there is no obligation. And if you take the time to do something special with him alone, without the baby, from time to time, he will quickly understand that you still love him. He is allowed to do things that the little baby won't be able to do for a long time yet. The new situation will remain clear if you stick to the same daily routine and apply the same rituals and rules.

#### Are you thinking of having another baby?

Even before you get pregnant, you can consult the gynaecologist with all your questions about genetics and heredity, personal health and life style. And... do not forget to take folic acid.

#### On the potty

Children become toilet-trained at different ages, usually between the ages of 2 and 4. Some children learn quickly, others get there much later. At first, you may notice that his nappies are dry. Only when a child is aware of the fact that he is peeing or pooing does it make sense to put him on a potty regularly. A special toilet seat or stool under his feet may serve the purpose too. First he learns to hold up his urine or faeces, and then he learns to do this on the toilet. Hug and praise him when he has peed or pooed in his own little potty.

At the start there will be accidents. Nothing to get cross about: that would only be counterproductive. If he is playing busily, he does not feel what is coming. You can remind him.

Most children will be dry at night from between the ages of 3 and 6; but quite a few will take longer to get there. Do not be tempted to give your child less to drink in the afternoon. That would be wrong. Besides, with an empty bladder your child will not learn to tell when it is time to pee.

Don't worry if many children near you manage without their nappies before your child does. He cannot force himself to retain his pee. His body needs to be ready for it. For more information, go to www.groeigids.nl and look for 'potje-training' (potty training).



## Pages for your own child

#### What has your child ...... achieved so far?

It is a big change. Not so long ago, your baby was sitting quietly in his playpen. But now he is moving through the house independently and you need to have eyes in the back of your head. Out of sight for one second and he is halfway up the stairs. If he can stand up then you should make sure you remove dangerous and fragile items from his reach. All of a sudden, you have to say "No" a lot more often and sometimes you have to explain why certain things are not allowed. At the age of 1, he does not understand everything, but by the age of 2½ he generally understands very well what you mean.

#### Ages 1 to 11/2

#### He looks as you point

Your toddler is playing on the floor and you point at the window: "Look, there is mummy!" He follows the direction of your finger, and sure enough, there's mummy getting off her bike.

(name of child) looks in the direction indicated

on

#### **Giving and taking**

You give him a toy and he gives it back. A game he will keep up longer than you!

(name child) gives toys back

on

#### Talking

Your child keeps repeating the same sounds, and maybe even some clear words, for eating, sleeping, toys, animals, close relatives. He will say "mummy" or "daddy" quite clearly when he means no one but you! What other words is your child saying at this age?

#### Crawling

At this age, most children are very good at crawling. Some skip this stage, because they are capable of high speed slides along the floor, on their belly.

(name child) is crawling with his stomach off the floor

on

#### Walking

Supported at first by a table, a chair or a sofa, they will make their first steps. About 3 or 4 months later, your toddler will be walking through the room without any support.

(name child) walks supported by furniture

on	
	(name child) walks without support
on	

#### Between the ages of 1½ and 2½:

#### Imitates

You find out you are a role model for your child: he imitates you. When you are cleaning, he wants to clean. When you are vacuum cleaning, ironing or just doing odd jobs, he wants to do the same. It will take time, but it is great fun and a very good opportunity to talk to him about all his activities.

Your child imitates everything:

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#### Talks in short phrases

He knows more and more words and now says them, after each other. Two words to start with, a few more later on. He learns quickly if you react to his talking. If he does not want something, he will say so.

First phrase: \_

#### Can undress himself

He now begins to undress himself. If he has just been outside with you, your child will take off his hat and scarf or loosen his coat. If he needs the potty, he will pull his trousers down.

Your child starts to do that on: \_\_\_

Are you short of sleep because your child wakes up very early every morning? Try to move his routine by feeding and putting him to bed later. Give him a toy or a book in bed, so that he can keep himself busy when he wakes up. In the afternoon, wake him from his sleep. Hopefully, he will make up for lost time by sleeping longer at night. If that does not work, take turns to get up early to avoid both parents being exhausted. Having your child stay the night with a friend or a relative is another way to catch up on your sleep.

#### Discovering the world

### Between 2<sup>1</sup>/<sub>2</sub> and 4

Your toddler is becoming more daring, as well as more capable. He explores how the world around him works. Meanwhile, he will talk all the time. Most of all, he prefers to do everything independently. Your enterprising child would prefer to make his discovery voyage alone. Some things he can indeed do without help. Stay nearby and keep an eye on your child's playing. Even if you have told him countless times that he may not open the garden gate, he will be off as soon as something exciting happens outside that gate. He is not being deliberately disobedient. He just cannot remember your instructions. You will have to intervene often, reminding him time and again about what you had agreed: stay on the pavement, never cross the road alone.

Every now and then you will notice you have to change the rules because your child needs less and less help. And bit-by-bit you allow your child more independence. For example, your child no longer needs help on the slide. Or he no longer needs to hold your hand when walking outside together. A child learns a lot every day. But you are the one to decide what is possible.

#### Talking and learning: over and over again

No child is capable of putting into practice immediately what he has learned. By reminding him continuously and explaining what is and is not allowed, he will learn to understand the meaning. It all comes down to repeating, and repeating again.

#### Sharing is learning together

Playing with other children stimulates a toddler's social development. It starts by just playing, near other children. Then they start sharing toys. The next step is when they start playing together. 'That is yours and this is mine'. Difficult, but once you get the hang of it you have made great social progress! Playing with another child is a lot more fun than playing on your own. Tinkering together with paper, paint and glue is different from playing with mother or father. Playing together stimulates such things as imagination, creativity, empathy, humour etcetera.

#### Use your toys well

At this age, your child learns to ride a tricycle, a scooter or a bike with side wheels. He can play football, he can climb, crawl, jump and throw a ball. All that moving around teaches him about his own body, his energy and skills, as well as lots of games. In a playful way, he learns such important things as estimating distances, judging whether something is high or low, hard or soft. He can coordinate eye and foot movement. His gross motor skills improve vastly in this period, as do his fine motor skills. It is an excellent preparation for what he is about to learn at school. It would be good if he had his own place to play. In a corner of the room, however small, he will be less easily disturbed when he's busy. He can keep his toys there. Toys that are too easy are not interesting. You know he has a good toy when you see him practicing new skills with it or trying to find out how the toy works.

More often than not, children like to play with toys that allow them to discover new possibilities. A doll that you can dress and undress, put to bed or bathe, offers more possibilities for play than a beautifully dressed doll that you cannot undress or that has eyes that break easily. Simple things give a lot of pleasure: paper and chalk, paint, dressing-up clothes, a ball, children's scissors, old birthday cards to cut up, gluestick, kitchen utensils, clothes' pegs, things that fit into each other, water, sand and clay. Sometimes children make their own toys. A rope



will be a snake, a playpen becomes a car or a doll's bed, a plastic bowl will serve as a helmet, a sheet over a chair is a tent. What wonderful imagination!

#### Active children

Some children wait to see what happens, whereas others are more active. The quiet children need encouragement from time to time to try something new. Playing with another child is often very stimulating. The very active children may need some restraining, because toddlers can go too far. There is so much they like and enjoy. They simply cannot stop. Give them the opportunity to play outdoors as much as they want, because that is where they get rid of their energy. Very active children benefit from simple rules, a limited level of excitement and a positive approach. See p 132.

#### Sleeping, dreaming and 'there is something under my bed'

After another busy day, it is difficult for a toddler to go to bed and fall asleep calmly and peacefully. There is so much more to do outside the bedroom. You can help your child to calm down by sticking to the same fixed ritual every time you put him to bed. For instance: saying goodnight to everybody, washing, brushing his teeth, drawing the curtains, going to bed with his favourite cuddly toy, singing a quiet song, telling the same story every night, a big kiss from mother or father, lights out and off to sleep. During the day children absorb so many new experiences, which they process while sleeping and dreaming. That may be scary and most children will wake up in a fright from time to time. Because they cannot yet distinguish fantasy and reality, they really are scared of a crocodile under their bed, or a witch behind the cupboard door. Take it seriously and help your child to chase the scary monster from the room or speak to the witch so severely that she will not dare to ever come back!

#### **Tablets and smartphones**

Most children enjoy playing games on a tablet or a smartphone. Young children are amazingly adept at 'swiping'. Several educational and enjoyable apps are available for them. The advice is the same as for watching TV: not too long and at set times. That way it will remain fun. For more information, go to www.mediaukkies.nl/mediaopvoeding

#### Swimming for toddlers

Toddlers and children of pre-school age can start swimming. They will not be able to get their certificate yet, because they are still too young. If he starts swimming lessons at an early age, your child will become familiar with the dangers of water and he will be determined to get that certificate later.

From the age of 4 or 5, children can start learning and preparing for the Zwem ABC (ABC of swimming). For more information, go to www.groeigids.nl onder peuter/motoriek/leren zwemmen.

#### Top 10 tips for positive parenting

#### Tip 1

If your child wants to show you something, stop whatever you are doing and switch your attention to your child. It is important to be together often for short periods and to do things that you and your child both enjoy.

#### Tip 2

Show your affection by hugging your child as often as possible. Most children like being hugged or holding your hand.

#### Tip 3

Talk to the child about things he is interested in and tell him what you have done that day.

#### Tip 4

Give your child specific praise when he does something that you would like him to do again, like: "You have put away your toys, wonderful!"

#### Tip 5

It is natural for children to be unpleasant when they are bored. See to it that there are enough materials and activities in- and outside the house, for instance: bread clay, coloured pencils, colouring books, empty boxes, dress-up clothes, a hut or a tent.

#### Tip 6

Teach your child new skills by demonstrating them first and then give your child the chance to do it himself. For instance, at home speak to each other in a polite manner and encourage your child to speak politely, for example by saying "please" and "thank you". Compliment him when he does his best to do this.

#### Tip 7

Make it clear that there are limits to what you will accept from your child. Take the time to discuss the house rules with the whole family. Make it clear to your child what the consequences are of crossing the line.

#### Tip 8

If children are disobedient or naughty, stay calm and make it clear that this behaviour will have to stop. Tell them what you want, for instance: "Stop quarrelling, go out and play together". Give them a compliment if they do. If, on the other hand, they go on quarrelling, apply the punishment, which will naturally have to be in proportion to what they did wrong.

#### Tip 9

Be realistic when it comes to what you expect from your child. All children will be disobedient or naughty from time to time and, inevitably, discipline will cause problems. Constantly trying to be the perfect parent can only lead to frustration and disappointment.

#### Tip 10

Take good care of yourself. It is difficult to be calm and relaxed as a parent when you are tense, worried or depressed. Try to take time off every week to relax or do things that you enjoy.

#### Listening

By and large, rewarding will produce better results than punishing. A child that is rewarded by his parent(s) will feel good about himself. Your child should be in no doubt as to what is allowed and what is seen as positive behaviour. You can lay down a number of house rules and discuss these together, using simple words and formulating positively. For instance: we eat at table and we do not run in the house. Your child can follow these rules, earning lots of compliments from you. It increases his confidence. The higher the number of rules you lay down, the less likely it is your child will obey them. It is better to start with a



few rules when your child is still young and to add more rules as he grows older and is better able to handle them. It goes without saying that your child will occasionally break the rules. That is part of growing up, children learn from it. Especially if their parents correct them calmly and do not punish them severely. Tell your child where to stop and what you expect from him. Give him five seconds to react. Do not go on warning if there is no reaction. If your child does not listen within five seconds, there will have to be a consequence. Choose a sanction that fits in with the situation. For instance: "You haven't stopped throwing your food around, I am going to take it away from you. In two minutes, you can try again to eat properly". Help your child to get started again after two minutes and praise him if he does it well. Physical punishment, becoming abusive or shouting do not help and may harm the child. Not just physically, but more especially his self- respect and confidence. If you tend to punish a lot and find it difficult to stay calm, it could be an idea to talk about it with somebody in your environment or in the Youth Health Care Centre. It is possible that they can help find a solution.

#### Sadness may be inevitable

You would like to keep sadness away from your child, but one cannot always determine the course of life. Even young children will encounter sadness. For instance the death of a grandfather or grandmother, a pet, if parents divorce, or if a friend, a brother or sister is seriously ill. Rather than being secretive about those things, it is better to tell the child, in a way that he understands, what is going on. It is not that grandmother has been asleep for a long time: she is not coming back because she has died. If your child notices you are not telling the truth, he will feel unsafe. You will win his trust with open and honest answers to his questions and by consoling and comforting him. Children often express sadness by sleeping badly, by irritating behaviour or by relapsing to a younger behaviour level. A lot of feeling is absorbed in their play and they are not sad continuously. What is important is that they have people near them that they can trust. There is no reason why you should



not show your child that you are sad. You can talk about it. Your child will learn from it. But make sure your child does not start worrying about you. A child can learn a lot from the way his parents handle sadness. He learns that you can be sad and talk about it together. The normal daily routine should be disturbed as little as possible. At the CJG, or in the library, you will find several books on handling sadness and grief.

#### Vision test

When your child is about three years old, the Child Health Centre (Consultatiebureau) will check his eyesight. It will also check for 'lazy' eyes. Go to www.groeigids.nl for further information.

#### Early discovery is essential

It is important to discover and treat a lazy eye as soon as possible. Preferably before the child reaches the age of 7. The earlier the discovery, the better the treatment result will be in most cases. That is why the eyes are checked regularly. If the lazy eye runs in your family, extra attention is called for.

The child sits on your lap and looks at a big chart with pictures hanging on the wall. Covering one of the child's eyes with special glasses, the doctor or nurse will point at one of the pictures. Your child has to say which picture it is or point it out on a model chart. Both eyes are tested in this way. Before the age of four, your child undergoes the same test again. Now a different chart, with circles open at one side, is used. Your child is expected to say which side of the circle is open.

If there is reason to doubt his eyesight, your child will be referred to the eye doctor or the orthoptist (eye care professional).







AGES 0 - 4

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[Source: Stichting TOV (Tijdig Onderkennen van Visuele Stoornissen)]

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#### Keeping the teeth in good shape

Even though they will fall out eventually, baby teeth need cleaning. Baby teeth make it possible for your child's jaw to make enough space for the permanent teeth. That is why it is important to keep them in good shape. Bad teeth are very painful for a child and do not look nice.

- From the age of 2 on: clean the teeth in the morning, preferably after breakfast, and in the evening, before going to bed. You still have to help your child with that task, or finish off the cleaning. Eating and drinking cause dental plaque that has to be removed. Cleaning the teeth while standing up may be a difficult operation. You can let the child lie down. This is often easier and you can reach all the vital parts! From now on, take your toddler for half-yearly check-ups at the dentist. Your child will see what is happening and notice that you find it normal. When his turn comes eventually, he will probably be less afraid.
- From the age of 3 on: you can gradually teach your toddler to clean his own teeth. Place him in front of the mirror, while you are behind him, and demonstrate the right way to clean the teeth. Remember IOT: Inside, Outside, Top. You will need to keep helping him until he is 10 years old and do a final check-up brush, preferably before your child goes to bed.

#### Sexual development

Your toddler is increasingly aware of his own body. He loves the sun on his skin, the sand between his toes, playing in warm water, crawling through the grass etcetera. It is important for his development that he gets the chance, in a relaxed and friendly atmosphere, to lie with his bare skin against your bare skin. In the summer this is very easy if you are in swimming shorts, a summer dress or a bathing costume. A child needs to feel good in his own body in order to feel confidence. Boys



and girls will discover that their bodies are different. Sometimes they will play with their private parts. It is only curiosity, but the feeling is not unpleasant. You can teach your child that there is nothing wrong with enjoying your body, but that we don't do that in front of other people. You must not forbid it, but it is good to draw a line. Toddlers feel their body and do not distinguish between sexual and other feelings. Boys may get an erection and girls may like to rub a soft toy or a cushion between their legs. At this age, curiosity will sometimes drive children to play 'nude' games. But it is the child's body and he will decide whether somebody else can touch him or not. Explain to him that he can say: "No, I don't want that".

#### **Genital hygiene**

Even if you cannot roll back your baby son's foreskin far enough, it is advisable to wash his penis in water every day. As the years go by, the foreskin will loosen progressively. Your son can learn to roll it back himself while washing. For girls it is important that you wipe their vagina and buttocks, from front to back, after every visit to the toilet. That way, defecation bacteria will not end up in their vagina. Teach girls to clean themselves in this way. Washing with water should be done in the same way. Do not use soap or ointments, as they may cause an itchy irritation.

#### Nursery

At the day nursery, your child will get every opportunity to develop, to discover and to meet other people and children. The children are supervised by well-trained group leaders and can play with other children of their age.

From the age of 2½ (sometimes 2) on, they will be admitted to a nursery school and more often than not, they will be allowed to drop by a few times before that date, to get used to the new environment. A nursery school has a large supply of toys, which all children can use. That way, toddlers learn they may have to wait until another child has

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finished playing with the toy that they want. They discover how nice it is to play together and how to maintain their own personality in a group. The leaders regularly read to the children, they sing with them and each day there is a group discussion. All the children will relate their experiences and listen to what other children have to say. This is very good for the development of language skills. There is a lot of handicraft activity and children learn skills in preparation for primary school.

Ask the group leaders regularly what activities your child has undertaken. Sometimes your child will find it difficult to tell you him self.



A good start in life is of prime importance. And it starts with a good school education. The pre-school (voorschool) is a nursery or day care centre for toddlers from the age of 2. The pre-school usually operates in combination with the two youngest primary school groups. Pre-schools offer a comprehensive programme for pre- and early school education (VVE). Several child-care centres offer a VVE (early pre-school education) programme. All toddlers may join.

The VVE locations are manned by specially trained teachers/leaders who assist the children in their development and prepare them in such a way that they will not be behind when they first go to primary school. Such a learning gap may occur if Dutch is not spoken in the home. But there may be other circumstances that lead to a child requiring more attention.

The Youth Health Care Centre decides which children need pre-school support and refers them to a VVE. These children belong to the VVE target group. Their parents may be entitled to financial support. Your own municipality can give you more information.



VVE children will be part of groups of not more than 16 children. These groups may also include children without a VVE-reference. VVE pre-schools offer a special VVE-programme, with increased attention for language and for social, physical and creative development. The children draw, sing, play outside, listen to stories and talk to each other. Classrooms and designated playing areas are decorated attractively, with different background themes. Pre-schools often use the same teaching methods as the primary schools do for the first couple of years. This makes it easier for all children to move on to the 'real' primary school. The VVE-referred children go to pre-school for a minimum of 10 hours a week. The child's progress is regularly discussed with the parents. It is important for the parents to play an active role in their child's development. For instance by talking about subjects discussed at preschool or by drawing, singing and talking with the child.

#### **Primary school**

Children between the ages of 5 and 16 are subject to compulsory school attendance. In practice, most children start their school career at the age of 4, in group 1 of primary school. Many nursery schools and pre-schools have joined up with primary schools or are part of them. That means it is wise for you to start looking early for a suitable school for your child (and for yourself).

#### **Choosing a school**

Make sure you get the right information: school plays an important role in the upbringing and development of your child.

#### Public and special education

There are public and special schools. Many special schools have a religious background: Roman Catholic, Protestant-Christian, Muslim or



Jewish. There is another category of special schools based on specific teaching methods, such as Montessori, Dalton, Jenaplan, Freinet and the Free School. Your city (or neighbourhood) council can provide you with information on all these different schools. Special schools have the right to refuse children, public schools only when they are full. Some schools have a waiting list.

#### What to look out for?

- Is the school in your neighbourhood, is it within easy walking or cycling distance??
- How big are the groups? Are you allowed into the classroom, are you allowed to help at school?
- Talk to the head of the school, to the 'internal coach' and to a teacher. Do you approve of their ideas on children and education?
- Is there an 'after school care' facility?
- Ask other parents for their experience.
- Is the school's approach to children consistent with your approach?
- Is this the right type of school for your child?
- Which teaching method is used at this school, is it teaching in traditional forms or in small groups?
- Do children have tasks to perform every day, or do they get a week's work that has to be finished at the end of the week?
- Is there special care for 'slow learners', and for 'rapid learners'? Do they get homework at an early age?
- How about lunch hour supervision? Or is the schedule uninterrupted?
- What happens with the children if the teacher is sick?
- Look around you in the schoolyard and in the classroom. What sort of children are they, what are the parents like who come to collect the children? Do they fit in with you and your child? What is the atmosphere?



# What can your child do at the age of 4?

- He can talk in short sentences and he talks out loud when playing. He will tell long, clearly intelligible, stories to you or his teacher. He is capable of recounting events in the past.
- He can play with other children, without taking their toys from them or hitting anyone.
- He can sing songs, together with you and alone.
- He can help you out with odd chores, like cleaning up, wiping the table with a rag, watering the plants, feeding a pet.
- He can undress himself. Most of his clothes he can put on himself. Buttons and shoelaces may require some help from you.
- He can climb, jump, throw a ball, kick a ball, draw and paint.
- He can ride a tricycle, and often even a bicycle with side wheels.
- He no longer needs to wear a nappy during the day. He can wipe his own bottom.

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AGES 0 - 4

#### Theme

## Vaccinations

#### Why vaccinate?

All children in the Netherlands are automatically invited for a series of vaccinations. Participation in the RVP (Rijksvaccinatieprogramma) is voluntary. More than 95% of children in the Netherlands are vaccinated. Vaccinations offer protection against ten different infectious diseases with potentially serious consequences. Diseases like diphtheria, whooping cough, tetanus, polio, mumps and measles occur only rarely in the Netherlands. We should not forget how much harm they can cause, so child vaccinations remain important. The high percentage of vaccinated children helps to keep these diseases at bay.

Unvaccinated children and adults will increase the risk of spreading disease germs, which in turn affects the weak and susceptible. Diseases may re-emerge through people returning from travel to countries where these diseases are still out of control. But that danger is eliminated when more than 90% of all children and adults are vaccinated. This is called 'group immunity'. In the Netherlands, around 2.4 million vaccinations take place annually. The vaccination programme will be expanded in the future, if necessary.

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#### Vaccination time scale

#### How does a vaccination work?

Vaccination strengthens the child's immune system by triggering the body into a controlled process of producing anti-bodies and resistant cells for the disease in question. That happens too if the child contracts the real disease, but in that case the risks are much more serious.

#### **Figures**

In the Netherlands, around 800,000 children are vaccinated each year for DKTP (Diphtheria, Tetanus, Whooping Cough and Polio), Hib and Hepatitis B. This prevents 150,000 cases of whooping cough, with about 150 deaths. It prevents around 3,000 cases of diphtheria and at least 75 cases of polio. For children contracting whooping cough in spite of vaccination, the disease is generally less serious than it would have been without the vaccination. (Source: RIVM and RVP, also in English).

#### Vaccination programme DKTP-Hib-BMR-MenC

The vaccination takes place in three stages

Phase 1: Children get a DKTP-Hib-Hep B vaccination and a Pneumcoccus vaccination at two, three, four and eleven months.

At 14 months, they get the MenC and BMR vaccinations.

Phase 2: At the age of 4, one vaccination (DKTP)

Phase 3: At the age of 9, two vaccinations (DTP and BMR).

Phase 4\*: At the age of 12, three vaccinations (HPV)



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#### Vaccinations for serious diseases

- DKTP-Hib-Hep B is a combined vaccine against diphtheria, whooping cough, tetanus, polio, Hib-diseases (haemophilus influenzae type b) and Hepatitis B.
- BMR is the vaccine against mumps, measles and German measles.
- Pneu is the pneumococcus vaccine. The vaccination is administered at the same time as the DKTP-Hib-Hep B vaccination, but to a different place in the body.
- Men C is the vaccine against meningococcus group C.
- DTP is the vaccine against diphtheria, tetanus and polio.
- HPV is the vaccine against cervical cancer (human papilloma virus).

#### Which serious diseases?

- Diphtheria brings about risk of suffocation. The heart and the nervous system may be affected.
- Whooping cough triggers extensive coughing bouts and is especially dangerous for babies because of the risk of brain damage.
- Tetanus can cause lockjaw (facial spasm) and spasm of other muscles, including those used for swallowing and breathing. This may cause a serious oxygen shortage.
- Poliomyelitis, also known as polio or child paralysis, may cause serious paralysis. Hib-diseases may cause meningitis, resulting in blood poisoning and infections everywhere in the body.
- Meningococcus C can cause meningitis and blood poisoning. Possible permanent consequences are: amputations, scars, deafness, motoric problems and learning- and behavioural problems.
- Mumps is a disease affecting the salivary glands, which may ultimately lead to encephalitis, meningitis or infertility.
- A child with measles can be very ill, with a high fever and a body rash. Frequently occurring complications are; ear infection, bronchitis, pneumonia and encephalitis. Before the measles vaccination was

introduced in the Netherlands, 10% of the children with mumps had to be treated in hospital!

- A rubella (German measles) vaccination is an investment for the future. Rubella is a risk for the unborn child: a pregnant woman carrying the disease may give birth to a child with a limitation (deaf, blind, mentally disabled).
- Pneumococcus infections may lead to life threatening diseases such as meningitis, blood poisoning (sepsis) and serious pneumonia.
  Serious possible consequences are, for example, deafness, epilepsy, wasting body parts (often requiring amputation), growth disorder or even death.
- Hepatitis B can lead to a potentially chronic liver infection.

#### Side effects

Children react to vaccinations differently. The exact spot of the vaccination may swell up and turn red. Young children will often run a light fever. Serious side effects are very rare. If they do occur, they are always far less serious than the disease targeted by the vaccination. You can report suspected side effects at www.lareb.nl, the site of the Dutch Side Effect Centre (Nationaal Bijwerkingen Centrum Lareb). Here, information on side effects is collected, so that problems can be identified as quickly as possible. And report the side effects the next time you go the Youth Health Care Centre.

#### Information material

The Youth Health Care Centre has brochures on the vaccination programme. They are in Dutch. Information material is available in 16 other languages, in digital format (on line), downloadable from www.rivm.nl/rijksvaccinatieprogramma, where you will find extensive information on the vaccination programme.



#### Theme

### A sick child

#### When should you call the doctor?

At birth, all children have antibodies, passed on to them by their mother. This offers a reasonable protection against diseases for the first 6 months. After this period, the baby will have to develop his own resistance. The protection provided by the maternal antibodies is no longer available. Being sick is a part of growing up. It is only by being sick that one develops resistance to bacteria and viruses. There are vaccinations for the most dangerous variety (see chapter: 'Vaccinations').

#### Important:

Always consult your doctor if a child aged less than 3 months has a fever (38 degrees or higher). Do the same if the child's temperature is too low (less than 36 degrees).

#### A sick baby, less than 3 months old

When a young baby is sick, you have to be very watchful. At this age, the pattern may be different from that of an older child. Often, they will not even have a high fever. There may be other symptoms indicating that a doctor should be called, even if the child has only a slight fever. For instance:

- 1. The baby is very quiet and apathetic, drowsy, is not looking around and not drinking forcefully.
- 2. The baby's nappies are dry or the baby's urination is less than half the normal amount. Babies dehydrate quickly, so this is an extra reason to be watchful.
- 3. The baby looks sick, he is groaning, there are spots on his body. This is an alarm signal! Call the doctor quickly.

A skin rash that does not disappear when you press it is a warning signal. Call the doctor quickly.

### A sick baby, after the age of 3 months

You do not have to be worried right away if your baby is running a fever. It may be the result of a recent vaccination. Basically, a fever is useful. It is the body's way of battling with the viruses and bacteria, which are often defenceless against a higher temperature. Still, a small child with a fever should be watched, even if the temperature is only slightly higher than normal.

Call the doctor for a baby over the age of 3 months in the event of one or more of the following symptoms:

- a fever of 39 degrees or higher for two or three days.
- the baby is not active and looks drowsy.
- the baby is not drinking` enough: dehydration is a real danger
- the baby looks and feels really sick, groans or is developing a skin rash.

#### Not hungry? But he must drink

Sick children often do not want to eat, sometimes for days on end. That does not matter, as long as they drink. It is very important to prevent dehydration. It can be a problem if they have no appetite. Increase the number of breast-feeds or give more, smaller bottles of formula milk. For slightly older children, try some variety: water, lukewarm tea with a flavour, thin soup, buttermilk, yoghurt diluted with some milk. It is better to avoid fruit juice or milk shakes with fruit if your child has a stomach ache. Ice-lollies are not only a pleasant surprise, they also alleviate the soreness in the throat.



#### **Childhood diseases**

Almost all children go through a number of childhood diseases in their first two years. That is a good thing because catching a childhood disease later in life can give more complications. Skin rash, with blotches and little bumps, is part of many of these diseases.

#### Chicken pox (varicella)

At first, the child does not feel well and is drowsy and listless. Then he gets itchy blotches and bumps, even in his hair. These turn into blisters, which are very contagious. It is the terrible itch that bothers a child with chicken pox the most. Keep his nails clean and short and try to prevent him from scratching open the blisters, because that will result in scars. Get advice from a pharmacy on how to relieve the itch. After a few days, the blisters will dry up and the rash will gradually disappear.

#### Scarlet fever (scarlatina)

This disease starts with a sore throat, vomiting, fever or a headache. After a day or two will you see a red rash on the skin: little spots, starting near the hair roots. They first appear in the neck and armpits and spread over the body. First, the tongue looks coated: then it will turn dark red. That is sometimes called a 'strawberry tongue'. Scarlet fever is a throat infection, to be treated with penicillin. It is a disease for which you must go to the doctor.

#### Impetigo

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A very contagious skin infection, which starts out as a small scratch in the face around the mouth, hence the Dutch word 'Krentenbaard' (Currant beard). The spots spread and have yellow crusts. Impetigo is always a case for the doctor.

#### Fifth disease (erythema infectiosum)

At first, the child has light red spots on his cheeks and the area round his mouth stays white. Then the rash spreads to his arms, legs and the rest of his body. After one to three days he will develop a slight fever. The fifth disease occurs primarily between the ages of 4 and 10.

#### Sixth disease (exanthema subitum)

The sixth disease may make a child quite sick. It often affects children between the ages of 6 months and 3 years, starting with a sudden fever, which can run high. After about three days, the fever will disappear suddenly and then red spots appear.

#### Croup

Children up to the age of 4 can contract croup. The child has a common cold and will feel short of breath, with a wheezing breathing. It very often occurs round 11 o'clock at night. Croup is an acute viral infection of the upper airway near the vocal chords. The infection leads to swelling inside the throat, which interferes with normal breathing. Once treatment has reduced the swelling, the disease is over. The infection always disappears by itself within a few days. No reason for panic, but call in the doctor.

#### **RS** virus

An infection with the R(espiratory) S(yncytial) virus is very similar to a common cold. The virus causes an infection in the airways. The child's nose is blocked and there is mucus in his lungs. He may start to make peeping sounds when breathing or he'll pant and gasp for air. There may be fits of coughing, producing slimy mucus. If the baby is very short of breath, he may have to be admitted to hospital. The average recovery time is about 10 days.





#### More serious: meningitis

Children are vaccinated against meningitis. There are other forms of this dangerous disease against which they are defenceless.

If your child has one of the following symptoms, always call the doctor:

- 1. The most important sign: dark red spots or blotches on the skin that do not disappear when pressed.
- 2. High fever and feeling very sick.
- 3. Aching muscles and nausea. Often the child is listless and apathetic.

#### Your child in hospital

Nowadays, parents are allowed to stay with their child in the hospital overnight. This is called 'rooming in'. Generally, parents are expected to help out with the care of their child. This is good, because with mummy and daddy in his direct vicinity, the child will feel less afraid and lonely. For more information: www.groeigids.nl and then peuter/gezondheiden-voeding/ziekenhuisopname.



#### Theme

### Speech and language

#### How your child improves speech and understanding all the time

#### From 0 to 2 years

A young child cannot say very much yet, but 'communicates' with sounds and gestures but without words. That may be just as clear.

- He reaches out to something he wants to have.
- If there is something he does not want, he pushes it aside or shakes his head.
- He wants attention: he makes several different sounds.
- He is having fun and is laughing.
- He says goodbye and waves.

Parents may stimulate the development of language by:

- looking at the child and his gestures
- talking to him during daily chores
- listening to his words
- trying to understand what he means
- formulating his thoughts for him
- imitating the child, repeating and complementing his words in the correct way
- doing and experiencing things together
- reading a book together and reading aloud the same passage over and over again
- singing songs with the child
- waiting for a reaction
- giving and taking in the form of a game.

Reading aloud to young children helps them in their later language development. It is never too early to start reading. Make your baby a (free) member of the local library. As a welcome present, you will receive the Book Starting Box (BoekStartkoffertje). Go to www.boekstart.nl for more information.

#### Two or more languages

If your native language is better than your Dutch, the child's language development is best served if you consistently use your native language at home. Talk to your child in your own language, so that he will start by learning one language well. At the same time, he will develop a feeling for language that he will need when learning other languages. Of course, it is important that he learns to speak Dutch properly. He needs contacts with Dutch speakers: at the nursery school, the day care centre, maybe with the neighbours and at children's clubs. Generally, children who are raised this way with two (or three) languages, will speak them at the age of 4. Not perfectly yet, but then children who are raised in only one language do not speak perfectly either. If you speak two languages fluently, you can use one language in one situation and the second in another. This also applies where you are fluent in one language and your partner in another. At first, your child may mix up the languages, but this will pass guickly. If you think your child is not learning Dutch well enough, pre-school may provide some stimulus and support. More information on that topic in this Growth Guide, in the chapter on Toddler years: 21/2 to 4.

#### Ages two to three

Children aged 2 to 3 will use language to talk and to learn. They understand simple, uncomplicated sentences and can take simple instructions. They can answer simple questions like "What are you doing?" Around the age of 3 he will understand the difference between 'under' and 'above' and he can tell you 'where' something is. To have learnt that much, he will have done a lot of talking and listening. A three year old has quite a vocabulary and will make three to four-word sentences. Now he can describe feelings, an important development. The parent's active contribution to language development is to allow time for your child to talk and for yourself to listen and answer. Pay attention to what your child is saying, rather than how he is saying it.



#### Ages three to four

At this age, a child will conduct entire conversations with you. There is hardly any need for you to explain things. Your child likes making new friends. Playing in a group is much easier now than it was a year ago. He has no trouble answering questions like "Where is your coat?" Strangers understand him too. At the age of four, he wants to be taken seriously and no longer treated as a small child.

You help your child by:

- having a real conversation with him every day and not avoiding emotions (anger, fear, joy)
- giving him an opportunity to play with other children
- giving him suitable chores, thus raising his level of independence
- reading aloud a lot and making him tell you how he thinks the story will unfold, or what has happened so far
- saying rhymes, or singing songs, together
- involving your child in all daily activities and by talking about them
- discussing things that are not 'here and now', like: "Yesterday you were at your Grandmother's. Tell me: what did you do there?"

#### Stammering

It is not uncommon for a child to stumble over his words, to stutter or to repeat words frequently. You may wonder if he is stammering. At this age, children are learning a lot of new words. They find it difficult to convert their thoughts and stories into the right words and sentences. Most toddlers go through a period of stammering speech. Give him the time to complete his story. Listen to what your child has to say rather than to how he pronounces the words and sentences. More information on: www.stotteren.nl. You will find a checklist to help you determine whether your child is really stammering or not.

If, in his enthusiasm, your child is still producing 'incorrect' phrases, you can repeat and correct him. If he says: "I jamp from the chair", you can reply in a friendly, non-deliberate way: "Yes, very good, you jumped from the chair."

#### 'Why?'

Toddlers can express what they think. You hear your child producing long arguments and at the oddest moments he will ask "Why?" Naturally, you will answer him as often and as patiently as possible. This way you let your child know that he is being taken seriously. Furthermore, he will learn to use a difficult turn of phrase: "Because..."

#### Reading aloud and singing together

Sitting comfortably, next to mother, or on father's lap, or with someone else you know well, and being read to aloud from a picture book almost all children love that. They can point to the pictures in the book and explain what happens, they hear the rhythm of the words you say and they listen to a story. Recognising all those things is a very important experience for children. Don't be surprised if they want to hear the same story over and over again and react with indignation if you try to skip part of the text or insert different words.

Singing songs is just the same. It is fun to do that with your children. You will find that he is gradually mastering the melodies. If you suddenly stop, he will complete the line. The different musical rhythms are good for his language development. By reading aloud and saying rhymes together he will learn to listen to sounds. He will need this later to distinguish small sound differences (for example, bear and pear). More information on www.kindentaal.nl.



Library books are free of charge for children. Libraries have plenty of books with songs and stories for babies and children, even below the age of 1 and up.



#### Theme

### Safety first

Growing up in a safe environment is an indispensable part of a child's development. Thinking of safety, we usually have practical aspects in mind, such as stair gates and water ponds. While these are certainly important, we must not overlook how important it is that the child also feels safe. This means emotional safety. Parents play a vital role here. The following is a list to help make you aware of what you can do to make your child feel safe. Feeling safe creates the best conditions for learning and experimenting.

A child is happy when...

- at least one adult is available for him, to care and to protect;
- he is consistently reminded that he is loved;
- he knows he can always turn to you when there is something on his mind;
- life is a well structured routine;
- rules are clear;
- you are willing to adapt your activities and obligations to his needs;
- there is family and friends to fall back on.

#### **Sleeping safely**

When buying a baby bed, make sure the distance between the bars does not exceed 4 ½ centimetres (with a maximum of 6 ½). Measure it, because your child must not be able to stick his head between the bars! A good baby bed is made of solid, polished wood with base slats. The mattress should be solid and stiff to support the baby's back. The mattress must fit tightly into the bed, so that the baby cannot get stuck between the bed and the mattress. On the mattress you should have a thick flannel cloth rather than one made of plastic or tarpaulin. It is better not to use a pillow or headrest because of the risk of suffocating. Are you going to paint the bed yourself? Ask advice from the paint shop and get a non-toxic paint. Young children will bite and suck their bed. Make up the baby's bed or cot with sheets and two blankets rather than with a quilt and a cover, which is not safe and usually too warm. Never strap a baby in bed. A baby should preferably sleep on his back. A baby sleeping bag (without a belt) is a safe way. In it, the child will not roll onto his stomach so easily, the head is free and he cannot kick his bedclothes off. Later, as he grows, the sleeping bag will make it more difficult for the child to climb out of bed. Is your baby starting to sit up in bed? High time to lower the bottom of his bed, as well as the bottom of the playpen.

#### Pram and stroller:

When you go out walking, have your baby in a flat position for as long as possible. If the baby can roll over or sit up by himself, the pram or the carrycot is no longer deep enough and therefore unsafe. That is the moment to start transporting your child in a more upright position. In the pram, a child should be strapped in right away, even if you are using the foot muff. Never leave your child in the pram anywhere unattended. Put your child in a position from where he can look at you.

#### On the bicycle

The Consumer Safety Agency advises against taking babies younger than 3 months with you on a bicycle. Between the ages of 3 and 9 months, limited bicycle transportation is possible, for instance in a car seat or a baby shell. Taking the baby with you in a sling on the bike is far too dangerous. Make the cycling distance as short as possible. Do not take the baby with you in a bicycle chair until he is able to sit up by himself and keep his head upright. Later on, when he is old enough to sit on the back seat of your bike, make sure you have a protective guard so that his feet do not get caught in the spokes of the wheel. Wearing a helmet is not compulsory, but it is much safer. Extensive information is to be found on www.veiligheid.nl.





There are lots of bicycle accessories for transporting your child on your bike, in front or on the back. Before you buy anything, contact VeiligheidNL to enquire about the safety of the product. www. veiligheid.nl.

#### In the car

In the car, never take your child on your lap. It will be impossible to hold on to him in the event of a collision. It is safest to transport your child in an approved car carry seat in the back of your car, using a three-point safety belt. If you want to transport your baby by car, it is safest to put him in a carry seat. Always buy a seat that complies with European safety rules. This information is to be found on a label or sticker with an orange ECE-trademark: EC 44/03 or 44/04. When buying a secondhand carry seat, make sure it is not damaged and has not been involved in a collision. Otherwise, those chairs are no longer safe. Has your child outgrown the baby carry seat? He is too big for the seat if: the top of his ears is above the back of the seat, or if he weighs too much (look out for the maximum weight). Then it is time to move on to a child car seat. Go to www.autostoeltjes.nl for information on the legal requirements and for help in choosing the best seat for your child.

#### Installing the baby carry seat

- Place the carry seat back to front, i.e. facing backwards. The new i-Size carry seats allow children to sit facing backwards until the age of at least 15 months
- Put the carry seat in the back seat if possible
- Is your car fitted with an airbag for the front passenger seat? Then you should never put a baby carry seat there. You can only put the carry seat there if you can switch off the airbag.
- You put your child in the safety seat and strap him in the seat's own

safety belt. You then strap the entire seat into the car's three-way safety belt.

#### Safety in the home

If you get down on the floor yourself, you will see what can be dangerous for a crawling or walking child. Then you will see how easy it is for them to get near an electric socket, you will see the unsuitable toys on the floor under the sofa, you will see a cloth hanging from the table waiting to be pulled down. A disproportionately large number of accidents happen to children between the ages of 0 and 4. They are enthusiastic and don't see the dangers. So, always keep your child in sight.

Take safety measures to make sure that a child cannot fall out of a window or down the stairs. Make sure he cannot get his fingers caught in the door or hurt himself on sharp furniture edges. Secure the power points with protective plugs or cover plates if it is easy for a child to get to them. Protective covers are also available for sharp table corners.

#### **Preventing burns**

Cook on the back part of your cooker, with the panhandles and grips turned inward. That way, your child will not be able to pull a pan off the heat and he will not be able to reach the flame or the hot plate. Special frames are available to make the stove safe. If you put hot drinks in a thermos, the risk is reduced, but make sure they cannot reach the cups of hot coffee or tea.

Of course, children must never have the opportunity to play with matches, lighters or burning candles. Make sure they cannot get at these. If your child does come into contact with something hot, do not take off his clothes, but rinse the burns in lukewarm (tap) water for at least 20 minutes. Then, take him straight to the doctor or Accident & Emergency department of the hospital.

#### Poisoning

By far most poisoning accidents involving young children occur in the house where they live and most victims are not older than 1 or 2. You can get a 'poison checklist' from the pharmacy, telling you what to do against different kinds of poison. The first rule for every poison accident involving a child: call the doctor or hospital immediately. It is not just turpentine, bleach, medicine and insecticides that are potentially fatal. Lamp oil, cigarettes, detergents, dishwashing detergents, alcoholic spirits and plants may also cause serious poisoning. They are often within easy reach and are irresistible to many children. Make sure they can never lay their hands on them. Be careful when you and your child are visiting other people.

#### Garden and balcony

Your child should not be able to get near toxic plants. It is wise to teach them at an early stage that plants are not for eating. Berries on bushes look just as tasty as strawberries. Unfortunately, many plants are dangerous. Make sure there is no chair or rubbish bin near the balcony edge that your child could climb onto.

#### Drowning

Never leave children alone when they are in the bath or playing near open water. Drowning takes terrifyingly little time: your child is unconscious within two minutes and within four to six minutes brain damage will be irreversible. You won't notice it, because children drown without a sound, and without splashing. Drowning accidents occur in the bath, especially with children between the ages of 8 and 15 months who have just mastered the art of sitting up. Children aged between 0 and 4 can drown easily in shallow water. Ponds are especially dangerous for children who have just mastered the art of walking (12 – 22 months). A garden pond is not just dangerous for your own children, but also for other children in the neighbourhood.

#### First aid for young children

Sickness, ailments, and serious or minor accidents: they usually happen unexpectedly. So it is wise to have a small first aid kit in a suitable place in the house. Never give a child medication meant for adults. Do not use it too quickly, it is not always necessary. The pharmacy or the Youth Health Service will be able to tell you what you should have in your first aid kit. We advise you to take a course in first aid for children.

- If a child has been in the water and does not react: call the emergency services right away (112 in the Netherlands) and get your child to the Accident & Emergency department of a hospital as quickly as possible.
- **Burns:** start immediately by cooling the skin in lukewarm running water for 20 minutes. Do not take off his clothes. Then take your child to the doctor or the Accident & Emergency department of the hospital.
- Severe diarrhea (watery poopy nappies) and vomiting: If you think your child has eaten or drunk a poisonous substance, call 112 immediately and take your child to a doctor or the Accident & Emergency department as quickly as possible.
- Electric shock: switch off the current first by pulling the plug from the power point or switching it off at the mains. Go to a doctor immediately. If the child is unconscious and is not breathing, give him mouth-to-mouth resuscitation and call 112.
- Severe bleeding: you can compress a wound bleeding profusely with sterilised gauze or with a clean tea cloth.
- Smaller wounds: disinfect with sterilon or betadine iodine and cover with a sterile gauze or a plaster.



- Fractures: go to a doctor or Accident & Emergency department of the hospital.
- Bruises and sprains: wrap some ice (or a bag of frozen peas or beans) in a plastic bag into a towel and put it on the painful spot.
- Insect bites: suck or squeeze out the bite. A red, itchy spot may be treated with a special ointment, or vinegar or lemon juice. A bee will leave the sting behind in the skin and it should be removed with tweezers. If the child feels weak, dizzy or nauseous, he may be suffering from an allergic reaction. If the reaction is serious, and if the child has been bitten in the mouth or throat: go to the hospital immediately.
- Ticks: check your child for ticks when he has been out among trees, in the garden or in the dunes. These little black creatures bite their way into the skin and can pass on Lyme disease. They need to be removed correctly. Do not douse the insect with alcohol, oil or other fluids before removing it, as the tick will react by injecting his contagious load into the skin, thereby causing an infection. Your pharmacy has special tick removal sets with clear instructions. Make a note of when and where you have removed a tick.
- Overcome by heat: put your child in a cool place and cool his face and wrists down with cold water. If necessary, go to the doctor.



For more information: www.veiligheid.nl. The following apps are free to download: 'EHBO' from the Red Cross, 'Veilig groot' from VeiligheidNL or 'Tekenbeet'.

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#### Theme

### Travelling with a child between the ages of 0 and 4

#### Be extra careful

Travelling with a young child requires preparation. Enquire at the Child Health Care centre (or the travellers' desk) whether vaccinations are needed for certain countries. Make sure these have been given at least three months before departure. You can also start getting your child used to travelling, by having him sleep in a travel bed at home.

#### In the car

Always put your child in a special seat and strap him in (See Theme 'Safety before everything'). Do not drive for more than two hours at a time. During the break, get your child out of his seat so he can drink and eat and move about a bit. Whoever is not driving can go and sit next to the child for a while and sing songs, read or play games. Change their toys from time to time, instead of giving lots at the same time. Use a wet facecloth in a plastic bag or a box of moisturised tissues to clean their hands and mouth (and your own hands). A CD with songs or stories is a great idea.

#### In the plane

Blocked ears are very painful for the baby. You can tell from the way he is crying. It can often be prevented by breastfeeding, or giving him something to drink during landing and take-off. If he has a cold, get advice before travelling.



#### Extra hygiene in the heat

High temperatures are conducive to the growth of all kinds of bacteria. Be very careful what you eat and drink. Good hygiene will help you keep the infection risk to a minimum. Wash your hands more often than you would at home and definitely after going to the toilet, before you start cooking and before eating. Pots and pans and cutlery can be washed in hot soapy water and dried with a clean cloth. Dirty towels and tea cloths can best be put in the laundry right away. Give them time to dry, preferably in the sun. In a warm climate, it is better not to eat or taste (half) raw meat, fresh fish or shellfish (ground raw steak, ground meat, mussels, oysters). Store all your edibles in a cool place to give bacteria no chance to grow. A cool-box is not cold enough.

#### Diarrhea

Young children with diarrhea dehydrate quickly. To be on the safe side, take a few packets of ORS with you on holiday. The pharmacy or the Youth Health Service can advise you here. If a child has more than three watery thin poopy nappies per day, give him an ORS solution to drink. It contains sugar and salt and will make up for the dehydration. The balance between sugars and minerals is correct, so the intestines will absorb the water immediately. If the diarrhea continues and your child starts to vomit, you should call a doctor immediately. If the child has a temperature or feels drowsy and weak and cries pitifully, you should also call the doctor immediately.



Eat only factory-made ice cream, or fresh ice cream sold in a clean, busy parlour. Ice cream from a vending machine often contains bacteria, so this should be avoided. The same goes for ice cubes made from tap water: avoid them too.

#### Sunburn

Don't let children play out in the open sun too much. Always have them wear a T-shirt and a sun hat. They burn very easily, especially the neck and shoulders and these burns may be nasty. In any case, keep them out of the midday sun (11 to 3) and set the right example by not sunbathing yourself. A factor 30 sunscreen lotion will provide your child with extra protection if carefully applied. Repeat the treatment every hour. Once on the beach the child will no longer have the patience to wait for the sunscreen lotion, so it is best to start applying it at home before you leave.

#### When travelling, don't forget:

His favourite cuddly toy (and a replacement!), roller blinds for in the car, sun shade, sunscreen cream factor 30, a mosquito net, sun hat and T-shirts, plastic water shoes if the child can walk, insect repellent, ORS, food your child is used to, a gas stove and a pan to make formula milk if necessary, wet tissues, a first aid kit containing: children's paracetamol, thermometer, betadine iodine, bandages, sterile gauze, tweezers and special anti-tick tweezers.

#### Theme

### Parenting support:

Children are not born with an instruction manual in their hand. Raising them can be very challenging. So it is natural for parents to look for useful information or advice concerning the problems they may encounter. What to do if your child has sleeping problems, if he has a fit of rage? How to avoid spoiling him?

It is good to know you can turn to people near you to alleviate your concerns. There is nothing wrong with asking questions. Maybe you feel you could use a course, or want to find out how to handle your child's unwanted behaviour. Or maybe you do not have a specific question and would just like to know more about what you can expect from your child at a certain age.

#### Information, brochures, advice, parental training

Whatever you need: simple advice, personal coaching, the right information, brochures, a course, you can turn to the CJG where you will find professional experts ready for discussion and advice. It often takes only a small change to make the task of raising your child a lot easier and a lot more fun!

Take a look on www.positiefopvoeden.nl (also in English).

# Websites offering information:

#### General websites for parents:

www.opvoeden.nl www.groeigids.nl, with your personal site for your child(ren) www. oudersonline.nl

#### Working and day care:

www.rijksoverheid.nl/onderwerpen/kinderopvang www.boink.info

#### (Breast)feeding:

www.borstvoeding.nl www.voedingscentrum.nl

#### Vaccinations:

www.rvp.nl/rijksvaccinatieprogramma www.lareb.nl

#### Safety:

www.veiligheid.nl www.veiligslapen.info

#### Language:

www.babygebaren.nl www.kindentaal.nl www.stotteren.nl www.boekstart.nl

#### Media:

www.digidreumes.nl www.mediaukkie.nl/mediaopvoeding

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## Colophon

The Growth Guide is a publication by the Amsterdam Municipal Health Service (GGD).

It consists of seven volumes\*:

- Planning for Parenthood
- Pregnancy
- Breastfeeding
- Post-natal period
- Ages 0 to 4
- Ages 4 to 12 (in Dutch only)
- Adolescence (in Dutch only)

Together these seven volumes make up the Growth Guide. They can be used separately.

The following persons and organisations contributed to the texts of the Growth Guide: Amsterdam Pediatricians, Royal Dutch Association of Pediatricians, Gynecologists and pediatricians, Maternity centres Lactation experts, Youth Health Service Central Holland, Youth Health Service Jong Florence, Youth Health Service Florence The Hague, Youth Health Service Amsterdam Health Services, Amsterdam Municipal Youth Health Service,

Amsterdam Municipal Health Promotion and Epidemiology Service, Educational experts, SO&T – Quality in Parenting Baby Expertise, Dieticians, Speech therapists, Eigen Taal en Cultuur, Baby Bix, Crebas CC+G (social work in school), Parents.



This logo signifies that the information contained in the Growth Guide has been validated and is therefore reliable. National knowledge institutes apply predetermined criteria, based on national directives, protocols and the latest scientific opinion, to verify the correctness of the information.



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The Growth Guide has been put together with great care. The GGD Amsterdam declines all responsibility for any damage resulting directly or indirectly from the advice included in this volume.

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\* Want to get hold of one or more of these booklets? Go to www.groeigids.nl/ boekenbestellen and order it from the printer. The first 5 booklets are available in English.



### Vaccination programme DKTP-Hib-Hep B-Pneu-BMR-MenC

Vaccinations	on
2 months: DKTP-HIB-Hep B 1 and Pneu 1	
3 months: DKTP-HIB-Hep B 2	
4 months: DKTP-HIB-Hep B 3 and Pneu 2	
11 months: DKTP-HIB-Hep B 4 and Pneu 3	
14 months: BMR	
14 months: Meningococcus	
Age 4: DKTP	

Other vaccinations: (for instance: flue injection)

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# Visits to the Child health care centre

Age: 2 weeks	(	date:					
weight:	gr he	eight:	cm c	ircumfe	erence of the	head:	cm
breastfeeding	or	х	ml of wate	r and	spoonfuls c	of formula	milk
vit. D advice: 1	0 mcg	9			vit. K advice	:	
advice							
					•	1 1	ר.
AGES 0 - 4							5

4 weeks	date:		
weight:	gr height:	cm circumference of the head:	cm
breastfeedin	ig or		
x	ml of water and	spoonfuls of formula milk	
Х	ml of water and	spoonfuls of formula milk	
vit. D advice	: 10 mcg	vit. K advice:	
right testicle left testicle o	descended: yes/ descended: yes/		
advice			

#### How often should I feed my baby?

 $1^{2}$ 

Feed your baby when he asks for it, no need yet fort a strict routine. A young baby has a small stomach and needs to drink frequently. As the stomach expands, your baby will be able to drink more and the time between feedings will increase. Most children like to eat around 6 times a day from the age of 1 month. In the first few months, children like to be fed more often and after 3 months most children will be happy with 5 meals a day. Every child will develop a routine of his own; some drink frequently, others less so. The frequency may even change per day.

8 weeks	date:			
weight:	gr height:	cm	circumference of the head:	cm
breastfeeding	g or			
×	ml of water and		spoonfuls of formula milk	
х	ml of water and		spoonfuls of formula milk	
vit. D advice:	10 mcg		vit. K advice:	
advice				

#### How much complete baby food does my child need?

For every kilo in weight, your baby needs about 150 ml per day. So if your child weighs 4 kilo's, he will need 600 ml per 24 hours (4 \* 150), spread out over the number of feedings per 24 hours. During the first 6 weeks, it is advisable to offer your child nightly feedings too. This rule of thumb may be useful. Generally, however, your baby will leave you in little doubt as to how often and how much he wants to drink in order to keep growing.

3 months	date:		
weight:	gr height:	cm circumference of the head:	cm
breastfeeding	g or		
x	ml of water and	spoonfuls of formula milk	
×	ml of water and	spoonfuls of formula milk	
vit. D advice:	10 mcg	vit. K advice:	
advice			

### Has my child drunk enough?

140

Every child is different and you need to make sure to watch your child when he is drinking. Do not force him to drink when he no longer wants to. It is not always necessary to drink the entire bottle. If you have any doubt concerning his physical development, or if you have any other question, see your local Youth Health Care Service.

months	date:		
weight:	gr height:	cm circumference of the head:	cm
breastfeedir	ng or		
X	ml of water and	spoonfuls of formula milk	
vit. D advice	e: 10 mcg		
advice			
	anden wordt vast v	roedsel als oefenhapjes gegeven na	ast de

months	date:		
weight:	gr height:	cm circumference of the head:	cm
breastfeedir	ig or		
Х	ml of water and	spoonfuls of formula milk	
vit. D advice	: 10 mcg		
advice			

#### Children aged 6 to 7 months

- Breastfeeding or formula, as much as needed. Optional: cereals with follow-up milk, once a day
- Mashed fresh fruit
- Some light brown bread with soft margarine
- a hot meal; vegetables with potatoes, rice or noodles

Your child is perfectly capable of indicating when he has had enough to eat and drink, you do not necessarily have to make him eat the quantities indicated above.

date:	
r height:	cm circumference of the head: cm
mcg	See feeding schedule on page 48.

#### Ages 8 to 9 months

From the age of 8 months, your child will start to eat more solid food alongside the milk feedings.

- breast or formula feeding as required. Optional: one daily portion of cereals (made of wheat or other grains) with follow-up milk (serve the cereals from a plate rather than from a bottle). Instead of cereals, you can slso give him some bread;
- a meal of light brown bread, with a thin layer of margarine and spreads
- mashed fresh fruit

AGES 0 - 4

- a hot meal, to be increased gradually to include meat (or a substitute), chicken, fish or eggs. Spoonfood will gradually become less liquid.
- Some low-fat yoghurt.

months	date:	
weight:	gr height:	cm circumference of the head: cr
vit. D advic	e: 10 mcg	See feeding schedule on page 4
advice		
your questi	ons	
		give your child cereal with 'normal' milk: n protein and salt and not enough iron.
Λ	Λ	
4	+	AGES 0 -

months	date:	
weight:	gr height:	cm circumference of the head: cm
vit. D advice	e: 10 mcg	See feeding schedule on page 48.
advice		
Children fro	om the age of 10	months

- Breast or formula food, on average twice a day
- Two meals with bread (or one with porridge and one with bread)
- One portion of fruit and 1 cracker or rice wafer as a snack
- One hot meal (increasing gradually)
- In between, water or lukewarm tea. No problem if your child does not drink, he is simply not thirsty



months	С	late:	
weight:	gr.	height:	cm
vit. D advice: 1	0 mcg		See feeding schedule on page 66.
advice			

For more ideas and information concerning nutrition, go to www. voedingscentrum.nl or www.groeids.nl and look for 'voeding' (nutrition).

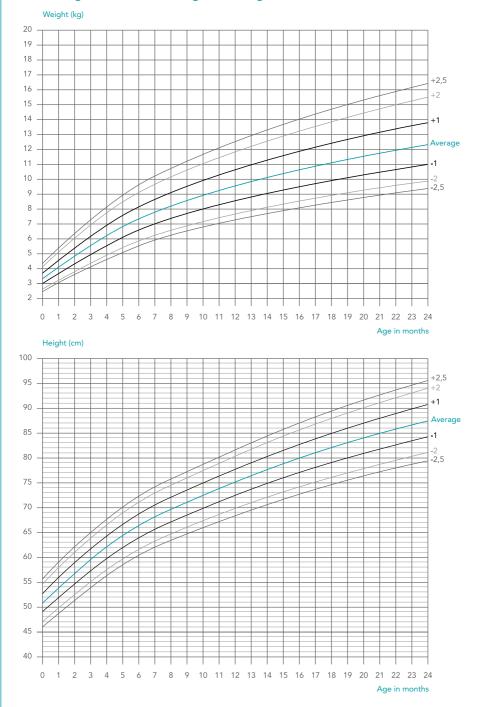
months	С	late:	
weight:	gr.	height:	cm
vit. D advice: 10	mcg		See feeding schedule on page 66.
advice			
your questions			
			1 / 1
AGES 0 - 4			14

years		date:	
weight:	gr.	height:	cm
vit. D advice:	10 mcg		See feeding schedule on page 66.
advice			
your question	S		
<u></u>			
ΛΟ	)		
40			AGES 0 - 4

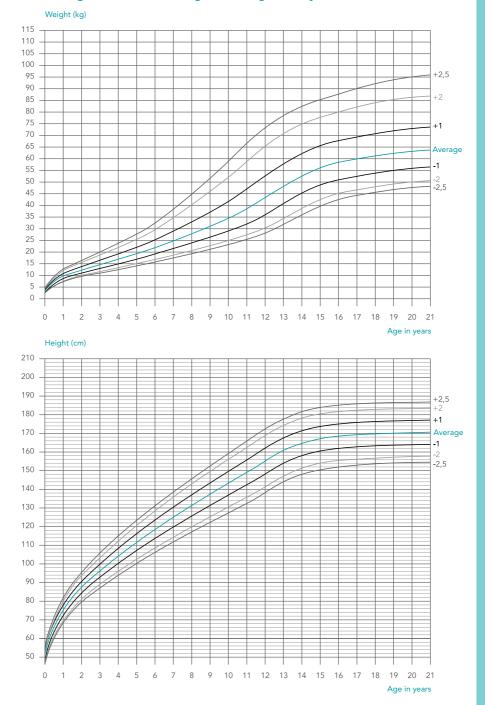
years		date:	
weight:	gr.	height:	cm
vit. D advice: 10	) mcg		See feeding schedule on page 66.
advice			
our questions			
<u> </u>			
			1 1
			14
AGES 0 - 4			

years		date:	
weight:	gr.	height:	cm
vit. D advice:	10 mcg		See feeding schedule on page 66.
advice			
your question	S		
5	)		
			AGES 0 - 4

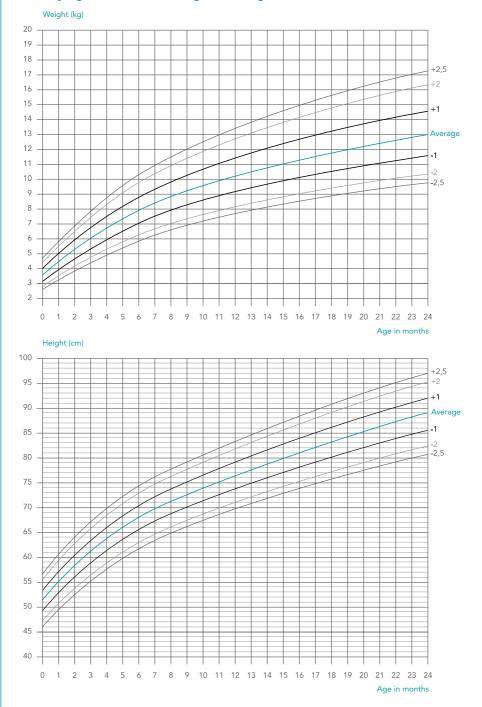




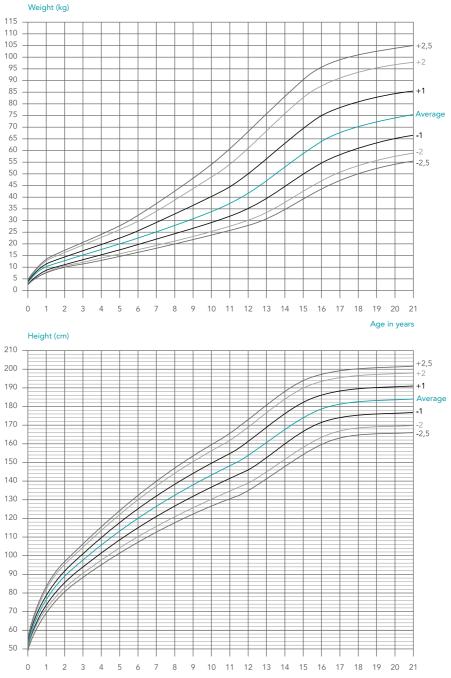
## Girl's growth curve for weight and height 0-24 months



## Girl's growth curve for weight and height 0-21 years



## Boy's growth curve for weight and height 0-24 months



## Boy's growth curve for weight and height 0-21 years

Age in years

Your own child's growth in figures

date	age	height	weight	head circumference

Make your own website at www.groeigids.nl with all the data for your child. Print your child's own booklet with all the facts and figures: growth curves, vaccinations and other milestones. Or download the app: GroeiApp!



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